

PAPER 6

When More Than Half a Billion Dollars is Not Enough:

The efforts and challenges faced by the Claims Conference and its partner agencies, such as in Chicago, in addressing the unmet need of vulnerable Holocaust survivors

YONIT HOFFMAN, PH.D.

Director of Holocaust Community Services
CJE SeniorLife

MIRIAM WEINER

Assistant Executive Vice President for North America and Director of Allocations
Conference on Jewish Material Claims Against Germany (Claims Conference)

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DISCLAIMER

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Executive Summary

More than 70 years after the Holocaust, the number of living survivors continues to decrease, and each year, those who remain alive become older and more infirm. The Claims Conference estimates that, currently, there are approximately 80,000 survivors living in the United States, of whom 28,000 live in poverty.

For the past decade the Claims Conference successfully pushed to increase financial support for this vulnerable population. In 2018, the Claims Conference allocated nearly \$500 million to agencies worldwide to provide social services to survivors, of which \$150 million was earmarked for those residing in the United States. Combined with payments for individual compensation, the financial assistance is nearly a billion dollars globally and \$200 million for survivors in the United States.

Despite this significant sum, low-income survivors continue to face hardships. In the coming years, as the demography of survivors shifts, the Claims Conference and local communities, such as Chicago, must determine how they will continue to address the needs of survivors.

- In the next 10 years, it is estimated that the number of survivors living in the United States will shrink dramatically. However, the overall number of survivors living in poverty will decrease at a much slower rate.
- Survivors from the former Soviet Union (FSU) represent the majority of survivors living in poverty. These FSU survivors tend to be younger than other survivors and may not require as much home-care support now, but they do need more financial assistance for other basic needs.
- As survivors from the FSU grow older and more infirm, it is likely that a higher proportion will need more home-care support.
- The German government, the Claims Conference's primary funder, prioritizes its funding based on the home-care needs of those survivors who were in camps and ghettos, and in hiding under Nazi occupation. Survivors from the FSU typically did not suffer these types of persecution and therefore are subject to weekly caps for their home-care needs.
- The Claims Conference and the rest of the American Jewish community must find a way to address the projected ongoing needs of the survivor population.

Introduction

Holocaust survivors are an extraordinarily vulnerable population; not only must they contend with the regular demands of old age, but they must also cope with the trauma—both physical and emotional—of their tragic pasts. While it is true that many Holocaust survivors who immigrated to the United States were able to rebuild their lives with tremendous success, there are, unfortunately, thousands who remain shattered by their war experience. Further, in many cases, subsequent persecution under Soviet rule exacerbated problems that these survivors continue to face today.

It is estimated that over one-third of Holocaust survivors living in the United States live below the poverty threshold.¹ Since its founding in 1951, the Claims Conference has dedicated itself to improving the situation of Holocaust survivors through a variety of assistance, such as direct compensation programs and financial grants to social service agencies. In 2018, the Claims Conference provided nearly \$1 billion in assistance to survivors worldwide, of which nearly \$200 million was spent in the United States.

While the Claims Conference continuously negotiates with the German government to increase its support, the reality remains that the needs of survivors still surpass existing Claims Conference resources. In the next few years, the total number of survivors in the United States will sadly decline. However, as the remaining survivors grow older and more infirm, they will require additional support, primarily in the form of home care, which is an expensive ongoing service. Further, the younger survivors today are primarily those from the former Soviet Union (FSU), who tend to be the most financially vulnerable. Thus, over the coming years, while the total number of survivors will decline, those who remain will be older and more financially and physically vulnerable than they are today. Therefore, the overall need within this population will not significantly decrease.

This is the challenge that must be faced: How do we address this ongoing need over the next 10-15 years? In this paper, we will describe the demographics of the current and projected survivor community in the United States, the unique challenges survivors face, and the funding and services the Claims Conference currently provide. Holocaust Community Services (HSC) in Chicago will provide an individual agency and community perspective on these challenges, which are a microcosm of the challenges facing the larger United States survivor population, as well as examples of effective community engagement in providing comprehensive services.

¹ According to a Claims Conference commissioned report (Miller, Beck and Torr October 2003), the poverty rate is roughly 37 percent. However, an earlier report (Kotler-Berkowitz, Neuman and Blass 2004) uses a lower rate of 25 percent. For the purposes of this paper, 35 percent is being used.

Background

Poverty is not an unknown phenomenon among the elderly, and it is especially pronounced among Holocaust survivors. A little over 9 percent of older adults in the United States live below the federal poverty level (FPL), and 14 percent live below the supplemental poverty measure (SPM)² (Cubanski, et al. November 2018). Survivors living in the United States are more than three times as likely to live in poverty than other elderly—it is estimated that 35 percent of survivors live below the poverty level.

Survivors have many characteristics that are associated with poverty—they are elderly, often in poor health, and a majority are female³—but their unique histories further exacerbate their financial situation. The stress induced by their war experiences has been linked to poorer health,⁴ the care of which puts further financial strain on survivors. Many survivors rely on governmental support, such as Medicare or Medicaid, to pay for these physical needs. However, such programs are constantly under threat as the government tightens its budget. Even with Medicare, the financial burden to cover medical expenses for the elderly is quite high as it does not cover 100 percent of expenses, nor is there assistance with all copays, coinsurance, and other out-of-pocket expenses.⁵

Tragically, survivors are also more prone to social isolation, mostly a result of their reduced family network. Survivors are more likely to have no children or fewer children than other elderly (Keinan-Boker, Shasha-Lavsky, et al. 2015, Glicksman, Van Haitzma and Mamberg, et al. Januar 2003) and nearly 25 percent of survivors live alone (Kotler-Berkowitz, Neuman and Blass 2004). These isolated survivors often cannot rely on family as caregivers and must rely on paid caregivers, which can be quite costly.⁶

Poverty is especially acute among survivors from the FSU who have a unique set of challenges. They are not only more impoverished than other elderly but also poorer than other survivors (Kotler-Berkowitz, Neuman and Blass 2004, Cohen, et al. 2011), and they make up the majority of the approximate 28,000 survivors living in poverty in the United States. They also have poorer reported health than other elderly, as well as other survivors (Kotler-Berkowitz, Neuman and Blass 2004, Cohen, et al. 2011). FSU survivors, who immigrated to the United States more recently, display the vulnerabilities of other recent immigrants, such as having lower levels of language proficiency and lower levels of employment (Evans and Fitzgerald 2017)—both contributing to their dire financial situation.

² Every year, the Department of Health and Human Services (HHS) announces a federal poverty level (FPL), which is used to determine eligibility for governmental support programs, such as Medicaid. The supplemental poverty measure (SPM), an alternative to the FPL, was adopted by the United States Census Bureau and accounts for additional expenses that impact economic insecurity, such as taxes and medical spending.

³ Poverty is higher among seniors with these characteristics (Cubanski, et al. November 2018). Women especially are more vulnerable to poverty as they receive smaller Social Security benefit payments than men, mostly a result of smaller lifetime earnings (Social Security Is Important to Women August 2018). Female survivors outnumber male survivors, at a ratio of 6:4 (Kotler-Berkowitz, Neuman and Blass 2004).

⁴ For example, survivors have higher rates of cancer (Fund, et al. 2019, Sadetzki, et al. 2017, Keinan-Boker and Goldbourt 2016, Keinan-Boker, Vin-Raviv, et al. 2009), cardiovascular disease (Fund, et al. 2019, Zamstein, et al. 2018, Keinan-Boker, Shasha-Lavsky, et al. 2015, Bercovich, Keinan-Boker and Shasha 2014), hypertension, obesity, and diabetes (Fund, et al. 2019, Keinan-Boker, Shasha-Lavsky, et al. 2015, Bercovich, Keinan-Boker and Shasha 2014), as well as other chronic conditions, such as chronic pain (Yaari, et al. 1999) and gastrointestinal distress (Stermer, Bar and Levy 1991). Survivors are also more likely to suffer from osteoporosis and hip fractures (Fund, et al. 2019, Marcus and Menczel 2007, Weisz and Albury 2013) and, significantly, do not heal as well as other elderly after stays in rehabilitation facilities (Mizrahi, et al. 2017).

⁵ Clients on Medicaid may have more coverage for medical expenses, but the exact benefits are state specific and do not cover home care in all locations. For example, in New York, Medicaid does cover home care, and in Florida, it does not. Ironically, the situation is more dire for elderly who live in the “financial gap,” i.e., are too poor to afford supplemental coverage but too wealthy for Medicaid. This group spent 77.8 percent more than those who received Medicaid on out-of-pocket expenses (Schoen, Davis and Willink 2017).

⁶ Those in poorer health or in need of assistance with Seven Activities of Daily Living, also tend to experience food insecurity. Also, the food insecurity rate is higher in dual Medicare and Medicaid recipients, women, those without a partner, or the socially isolated (Steiner, et al. 2018)—characteristics associated with many Holocaust survivors.

Specifically, survivors from the FSU have suffered multiple traumas (Glicksman and Van Haitsma 2002), which worsen their emotional and physical situation. Not only were these survivors faced with the calamities of the war, but they also then had to live for decades under Soviet rule, rife with anti-Semitism, which actively discouraged the acknowledgment of the tragedy of the wartime experience (Kahana, et al. 2015). Finally, when the Iron Curtain came down and these survivors were able to escape this regime, they were confronted with the multiple difficulties of being an immigrant in a foreign country.

There are approximately 80,000 survivors living in the United States,⁷ with a growing majority from the FSU. In 2001, the breakdown of FSU to non-FSU survivors was about 50-50 (Kotler-Berkowitz, Neuman and Blass 2004). The Claims Conference estimates that in the years since, the split has increased to approximately 80-20. This trend makes sense given that survivors from the FSU are often younger than survivors from other European countries (Kotler-Berkowitz, Neuman and Blass 2004, Cohen, et al. 2011)⁸. Most concerning, however, is the high rate of poverty among survivors from the FSU, which may run as high as 51 percent (Kotler-Berkowitz, Neuman and Blass 2004).⁹ This is a major concern for the Claims Conference—and should be for the wider Jewish community.

Claims Conference Contributions

DIRECT COMPENSATION PROGRAMS

Since 1995, the Claims Conference has administered the Article 2 pension program, which together with the companion program in Eastern Europe, to date, has paid pensions to over 132,000 survivors worldwide. In Q1 2019, over 8,000 survivors living in the United States received an Article 2 pension, of whom 33 percent are survivors from the FSU. Currently, the pension program is open to survivors who were in a camp or ghetto for three months or longer, or were in hiding or living under a false identity for four months or longer. The Article 2 pension is only open to survivors who meet income and asset limits, and for these survivors, a monthly pension of €415 (\$473) can be very significant.

The Claims Conference also administers the Hardship Fund (a one-time payment of €2,556/\$2,915) for those who fled from the Nazis, were subject to curfew, were forced to wear a yellow star, or suffered other forms of restriction of their liberties. In total, since 1980, over 115,000 survivors living in the United States have received a Hardship Fund payment, virtually all of whom are survivors from the FSU. Although a one-time payment of a couple thousand dollars is not a life-altering sum, the recognition of suffering is validating to these survivors, and the funds can be helpful to cover short-term or unexpected needs.¹¹

⁷ This estimate is based on information recorded in Claims Conference databases and data from the German government. As of 2016, the Claims Conference estimated approximately 100,000 survivors living in the United State. Using a 5 percent mortality rate, we estimate that the number of remaining survivors is around 80,000.

⁸ This trend is also present in Claims Conference internal data.

⁹ In contrast, between 1 percent (Kotler-Berkowitz, Neuman and Blass 2004) and 18 percent (Cohen, et al. 2011) of survivors from other regions live in poverty. Range is the result of different sample sizes, sample regions, and definitions of “poor.”

¹⁰ Income limit is \$25,000 annually but does not include employment, government, and compensation pensions or 401K payments; asset limit is \$500,000 but does not include primary residence or automobile.

¹¹ Over the decades, there have been other compensation payments, such as the German Slave Labor Fund, Swiss Banks Settlement Slave Labor Payments, Ghetto Fund and Ghetto Pension, and, of course, one-time and pension payments under the German Federal Indemnification Laws, negotiated by the Claims Conference in the 1950s.

GRANTS TO AGENCIES

The Claims Conference also partners with social welfare agencies around the world to provide essential social services to vulnerable survivors. These Claims Conference funded services, which would otherwise be unaffordable for survivors, reduce their need to choose between critical needs. In 2018, the Claims Conference allocated nearly \$500 million to its partner agencies worldwide, of which \$150 million was allocated to over 100 partner agencies in the United States. Nearly 18,000 survivors living in the United States receive Claims Conference funded services, such as home care, supplemental services, and emergency assistance.¹² To qualify for these services, survivors must meet certain income and asset limits, although these are very liberal.¹³

Home Care

Home-care services consist primarily of chore/housekeeping, personal/nursing care, and skilled nursing. These services represent the more expensive health care costs for the elderly, and can quickly deplete their savings. Claims Conference support provides these survivors with much-needed care and also prevents them from falling into further financial insecurity by shouldering the cost of these very expensive services. Home-care services can prevent premature institutionalization or accelerated decline in health. The Claims Conference aim is to allow survivors to age comfortably at home with dignity, whenever possible.

In 2017, the Claims Conference provided \$95 million in funding for home-care services in the United States. In total, 8,068 survivors were served, receiving 4,907,512 home-care hours.

Supplemental Services

Supplemental services funded by the Claims Conference include food programs (communal, home delivery, vouchers, etc.), client transportation, medical programs (out-of-pocket medical expenses, etc.), medical equipment and minor home modifications, medicine, dental programs, case management and legal services, and socialization programs.

The Claims Conference funded \$21,113,559 in 2017 toward supplemental services in the United States, serving 14,021 survivors. A large percentage—approximately 60 percent—of recipients of supplemental services are survivors from the FSU, reflecting the greater need among these survivors for additional financial support to cover daily expenses.

Emergency Financial Assistance

Emergency financial assistance alleviates and/or prevents crisis situations. These grants are intended only for the most vulnerable clients for short-term/urgent needs and, therefore, clients must also meet a lower financial threshold (i.e., 200 percent of the federal poverty level). Emergency grants may cover the cost of dental and medical needs, short-term home care (e.g., post hospitalization), rent, utilities, funeral expenses, etc. In 2017, 3,448 survivors living in the United States received emergency grants totaling \$3,757,854.

OTHER INITIATIVES

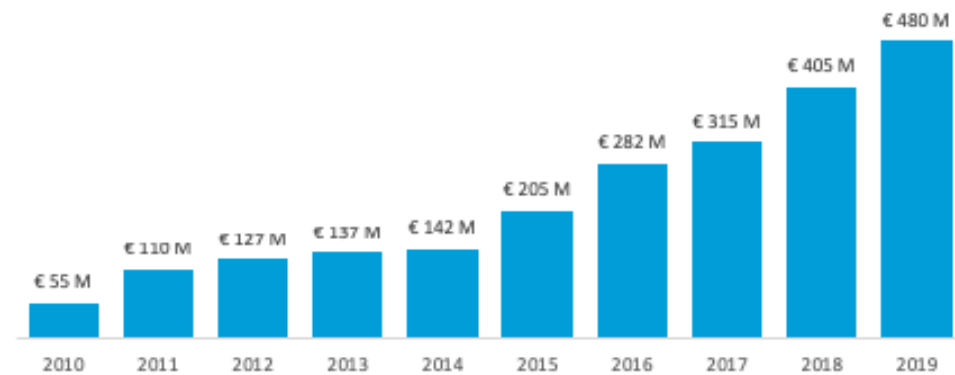
Until 2011, the Successor Organization—a fund comprised of the proceeds from the sale of unclaimed Jewish properties in former East Germany—was the primary source for funding Claims Conference grantees. In the early 2000s, there were also several settlements/agreements with foreign governments and entities that supplemented the Successor Organization's funding.

However, as years passed and survivors' needs increased, it became clear that these funds were finite and, thus, the Claims Conference started focusing on home-care negotiations with the German government. The first German government grant for home care was in 2004. The Claims Conference achieved a breakthrough in 2011 when it secured a financial commitment from the German government for an increase in funding for services from €55 million to €110 million annually. With each passing year, the Claims Conference succeeded in negotiating increases, and in 2019, the German government committed €480 million toward social services programs worldwide, a nearly 800 percent increase since 2010.

¹² The Claims Conference also helps cover the administrative costs for running these programs. In 2017, the Claims Conference funded over \$8.5 million in administrative costs of implementing agencies.⁹ This trend is also present in Claims Conference internal data.

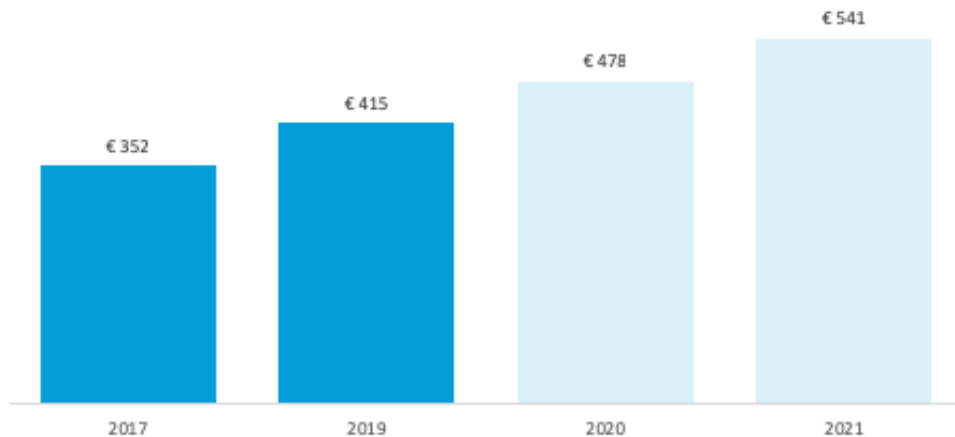
¹³ Income and asset limits are similar to those for the Article 2 pension, except for emergency financial assistance, which has a lower financial threshold (i.e., 200 percent of the federal poverty level). \$500,000 but does not include primary residence or automobile.

FIGURE 1: GERMAN GOVERNMENT WORLDWIDE FUNDING FOR SERVICES INCREASES 2010-2019



Other results from the negotiations with the German government include increases in the monthly Article 2 pension amount and the liberalization of eligibility criteria. In the past five years, the expanded criteria have allowed over 1,000 survivors in the United States to begin receiving a pension. In 2019, pensions increased by \$72 a month—an additional \$864 per year—and the German government has committed to increasing pensions by an additional \$144 per month over the next 20 months. The German government is now the primary funding source for Claims Conference activities.

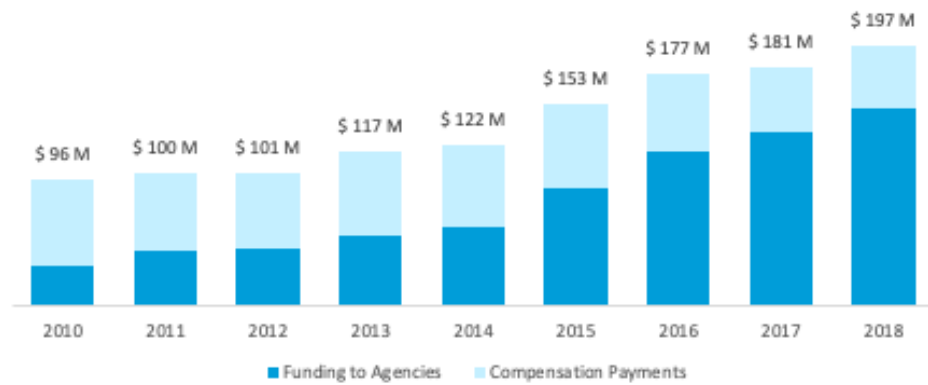
FIGURE 2: MONTHLY A2 PENSION INCREASES 2017-2021



When emergency assistance funds provided through various settlements were winding down, The Harry and Jeanette Weinberg Foundation stepped in and provided much-needed supplemental funding. Since 2010, the Weinberg Foundation has provided emergency assistance funding to Holocaust survivors in North America. The Weinberg Foundation has generously provided more than \$15 million in assistance over the past decade and has committed to funding through 2021. In 2017, over 1,300 survivors from the United States, most of whom were living at or below 200 percent of the FPL, received assistance through the Weinberg Foundation program.

With increased pension amounts, liberalizations of the compensation program criteria, increases in funding for services, and partnerships with outside funders such as the Weinberg Foundation, the Claims Conference has steadily increased its support for Holocaust survivors in need.

FIGURE 3: TOTAL CLAIMS CONFERENCE FUNDING IN THE UNITED STATES 2010-2018



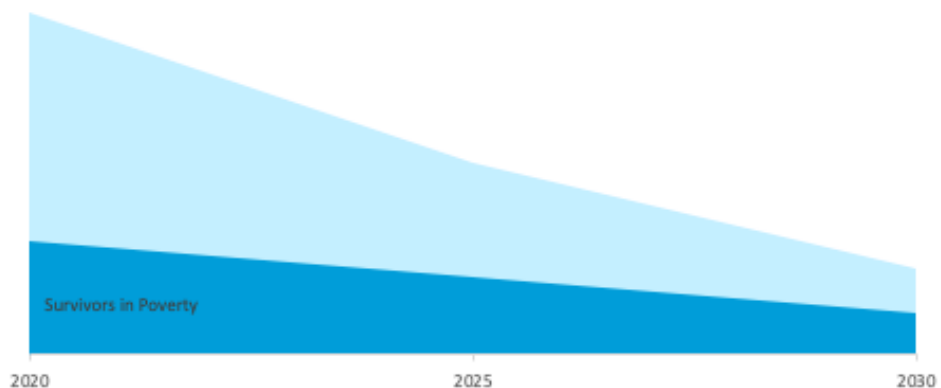
The Claims Conference **funding for vulnerable survivors in the US has more than doubled** over the past nine years, even though the total **number of survivors has decreased dramatically**.

In addition to increased funding, the Claims Conference has also improved its processes and infrastructure to better serve survivors. A critical initiative was the creation of the DIAMOND database. In DIAMOND, partner agencies record every survivor receiving Claims Conference funded services, relevant information such as date and place of birth, services received, the cost of each service, and equally important, unmet need. There are records for 28,215 Holocaust survivors in the United States (and records for 159,846 survivors worldwide). As a result, the Claims Conference has comprehensive data on its clients, their needs, and their demography, and we have used this information for data-driven programs and for better advocacy for Holocaust survivors worldwide.

Future Challenges

The Claims Conference estimates that there are approximately 80,000 survivors living in the United States; of these, approximately 28,000 are poor and, as previously noted, they are overwhelmingly from the former Soviet Union. While the overall number of survivors will steadily decline as survivors age and pass away, the number of survivors in poverty, requiring support from the Claims Conference, is expected to decline at a slower pace.

FIGURE 4: DECREASING SURVIVORS AND PERCENTAGE OF POOR



Over the next few years, the Claims Conference expects to serve fewer survivors from outside the FSU, as this population ages and passes away. However, the relatively younger survivors from the FSU will likely require more physical support and home-care hours, replacing the older non-FSU population.¹⁴

According to reports from partner agencies, and from new clients entered in DIAMOND, survivors continue to come forward, reaching out for assistance for the first time. Therefore, we estimate that over the next few years, there should not be any significant decline in home-care needs, despite the overall decrease in the survivor population.

The German government, the primary funding source for Holocaust survivors, focuses its funding on the home-care needs of those survivors who were in camps and ghettos, and in hiding under Nazi occupation. Survivors who endured such persecution can receive up to 24/7 care if they are in severe physical need and have certain medical conditions.¹⁵ For Jews who fled and were not under Nazi occupation, the German government mandates a weekly home-care cap. As previously mentioned, survivors from the FSU (the majority of whom fled and were not in camps or ghettos or under Nazi occupation) also need substantial support in the form of supplemental services. As the percentage of survivors from the FSU served by Claims Conference funding increases, so too will the need for these supplemental services and home care. With this demographic shift in the survivor population, the Claims Conference will be challenged to meet these survivors' needs.

It should also be noted that a counterintuitive trend has been observed among survivors: While they may be more infirm and poor than their contemporaries, they are living longer (Fund, et al. 2019, Sagi-Schwartz, et al. July 2013). A recent study found that survivors outlived their peers by an average of seven years (Fund, et al. 2019). There are several proposed hypotheses for this observed longevity: Some believe a “survivor gene” to be a contributing factor—that is, the determination that kept them going throughout the war now keeps them resilient during the difficulties of old age (Sagi-Schwartz, et al. July 2013). Others point to the fact that survivors

are more likely to seek out medical attention than other elderly and in general are more cognizant of their health as a means toward aging well (Elran-Barak, et al. 2016). If the latter is the case, then the Claims Conference and its partner agencies have, proudly, contributed to this phenomenon by providing critical services that provide survivors with assistance with their health needs.

PARTNERSHIPS AND COMMUNITY INVOLVEMENT

Unlike many other foundations, the Claims Conference does not demand a significant matching requirement of its funds from partner agencies. In fact, in 2018, the average US agency match was only 4.4 percent. We continuously ask these partners to secure additional funding, but one of the issues they confront is that other funders do not realize that there are still needs for survivors beyond what the Claims Conference can support. Alternatively, communities may believe that the Claims Conference is funding so much care for survivors, that other important needs of the community, which cannot be funded by the Claims Conference, require communal funds. The time is now when the American Jewish community can make a real difference in the lives of survivors. We are left with a critical question: *How can we mobilize our communities and explain to them that survivor poverty is a real problem and that there are serious needs?* We believe the following next steps should be taken:

- We must educate the broader community about the unique needs of survivors. This can happen through sessions at conferences focused on topics such as the elderly, poverty, trauma, and social welfare in the Jewish community.
- Local communities (in coordination with Jewish Federations and Jewish social service agencies) should create partnerships that take a holistic approach to caring for survivors, and that should incorporate other NGOs, clergy, volunteers, etc.
- Professional or affinity groups should be cultivated to donate services, such as the Alpha Omega-Henry Schein Cares Holocaust Survivors Oral Health Program.

¹⁴ This is the general national trend, although in individual communities, the demographics might be slightly different. For example, in Chicago there are many older FSU survivors who already need substantial home-care assistance.

¹⁵ Capped at €100,000 annually.

- Agencies should invest in actuarial research about the trajectory of needs in the survivor community in order to be better prepared to provide essential services over the next two decades, to survivors known to our communities and to those who will need and request help as they age and deplete their resources.

Through these initial steps, the Claims Conference and the broader American Jewish community can ensure that those who have suffered so much live their final years in dignity and comfort.

Holocaust Community Services (HCS) in Chicago, a long-standing partner of the Claims Conference, has successfully built a program that may be used as a model for other organizations looking to expand capacity and comprehensively meet survivors' growing needs.

Chicago: A Case Study

WHEN MORE THAN FIVE MILLION DOLLARS IS NOT ENOUGH

The demographics and needs of the metropolitan Chicago survivor community closely mirror many of the national trends described by the Claims Conference. Our survivors are poorer, sicker, and more isolated than their age-peers, and—in even greater numbers than the national trend—the vast majority is from the former Soviet Union (FSU). Most HCS clients from the former Soviet Union (approximately 95 percent at present, up from 40 percent in 2014) immigrated to the US during “Operation Exodus”—after having experienced Nazi persecution during the war, followed by decades of harsh Soviet regime, abysmal health care, and endemic anti-Semitism. Arriving in the US late in life, they have faced additional challenges in acculturating and learning a new language, and as many could not work in their professions, they had fewer opportunities to build savings to support themselves in their older age. Furthermore, language limitations present obstacles in their ability to independently secure benefits and resources, negotiate health care and support systems, and challenge agencies to find skilled bilingual case management and clinical service providers.

Holocaust Community Services was founded in 1999 by the Jewish United Fund/Jewish Federation of Metropolitan Chicago (JUF) as a joint effort with CJE SeniorLife (Council for Jewish Elderly), Jewish Child & Family Services (JCFS), and HIAS Chicago. Fully administered by CJE SeniorLife, a leading provider of programs and services for older adults, HCS provides coordinated support to aging Holocaust survivors in Chicago and surrounding suburbs, and it is the only local program dedicated to survivors' needs. Its mission is to provide supportive services that maximize survivors' independence, prevent the need for institutional care, reduce social isolation, and—to the best of its ability—ameliorate circumstances that can tip survivors into financial or psychosocial crises.

HCS has developed a nationally recognized model of person-centered trauma-informed (PCTI) care, embracing a holistic approach to comprehensive support. Its services include financial assistance toward in-home personal care, food, and medication, in addition to emergency financial assistance for urgent dental services, medical bills, and other unexpected costs. Through its PCTI framework, HCS also offers clinical case management, reparations and legal assistance, counseling, support groups, socialization programs, health and wellness classes, community education and awareness-raising events, friendly visitor and survivor-

to-survivor buddy programs, intergenerational and therapeutic arts programming, and professional and community trainings.

HCS clientele range in age from 74 to 105 years old (average age: 85). While national statistics suggest a younger FSU cohort, HCS has encountered an emerging and imperative trend: a double demographic challenge of some 20 percent of clients under 80 years old (indicative of needs that may span over the next 10-20+ years) and 20 percent who are 90 years old or over (whose advanced age and fragility require more extensive and costly services). Survivors are increasingly challenged by the depletion of their own and community resources, significant chronic and acute health conditions, social isolation, and the ongoing and late-onset psychological sequelae of their traumatic histories.

As survivors become frailer and outlive their resources, more have turned to HCS for help than ever before. **The rate of survivor requests for assistance from HCS has more than quadrupled in the past five years.** In 2014, HCS served approximately 400 local survivors; in 2018, more than 1,600 survivors received monthly financial assistance. This represents 7.2 percent of the nearly 18,000 survivors living in the country who receive Claims Conference social welfare funds (not including the over 300 HCS clients who received funds through private support). Accounting for survivors reached through nonfinancial services, HCS has touched more than 2,000 survivors in 2018.

Claims Conference allocations have more than doubled in the last three years, increasing from \$2.9 million in 2017 to \$5.3 million in 2018 and \$6.7 million this year. These funds provide tremendous support to enable HCS to respond to increased survivor needs. Still, despite continually adding clients to its service rosters and the inevitable attrition of an aging population (112 clients died or moved to long-term care in 2018), additional survivors continue to reach out for the first time, exacerbating already-strained staff capacity and financial resources. For several years, HCS has been faced with a rolling waitlist of approximately 250 survivors awaiting assessments for financial assistance, peaking at 489 in mid-2017. With additional case management staff and funding increases from the Claims Conference, survivors

are becoming clients at a much faster pace than previously possible, yet the rate of requests has not ebbed. In 2018, the program received an average of 49 new service requests per month from prospective clients, which climbed to 68 requests in January 2019. In order to use its funds judiciously, HCS employs a triage approach to identify the highest risk and most urgent cases, prioritizing critical supports to survivors with no family or who have an acute health crises, or who are over 90 years old.

The significant annual increases in Claims Conference allocations, particularly for home care, have allowed HCS to dramatically grow its service reach. These grants have grown from representing 68 percent of the program's budget in 2018 to a projected 80 percent in 2019. In addition, HCS has built a strong partnership model to respond to the ongoing needs of the Chicago survivor population, and supporting Holocaust survivors is one of JUF's top fundraising priorities. JUF is responsible for fundraising on behalf of HCS, each year raising nearly \$1 million from private foundations and individual donors (ranging from \$5,000 to \$300,000), in addition to providing an annual allocation of \$250,000 toward enhancing survivor services. In 2017, JUF hosted a fundraiser around the "Defiant Requiem: *Verdi at Terezin*" performance, which raised over \$4 million to be spent over the next several years for survivor support.

The costs of carrying our survivors through the near and distant future is staggering—even with the generous support of Claims Conference and other funders. In 2018 alone, the monthly cost of approved, ongoing concrete services (home care, food, medication, and transportation) almost doubled—from \$375,830 in January to \$728,768 in December—extrapolating to \$8,745,216 per year. Additionally, significant funds are required for emergency financial assistance for urgent, one-time needs. In 2018, 320 survivors received \$240,000 toward emergency needs, made possible by many funders who provide support in this area. However, survivors on average received only 40 percent toward their total bills. Furthermore, these dollar figures do not include the significant case management and administrative costs of the program, nor do they reflect the many additional support services the program offers, which foster the well-being of survivors.


Max and Ludmilla (names have been changed to protect privacy) are one such couple whom HCS has supported:

Max, 89, and Ludmilla, 84, were both born in the Ukraine and forced to leave their homes during the war. They are a married couple living in a far suburb of Chicago. In 2017, they turned to HCS requesting help for one-time, emergency needs: Max for a hearing aid and Ludmilla for dental services. HCS used Weinberg Foundation emergency funds toward Max's hearing aid, and connected Ludmilla with the Alpha Omega-Henry Schein Cares Holocaust Survivors Oral Health Program, an HCS partner dedicated to providing pro bono dental services to Holocaust survivors.

Initially, this one-time assistance helped Max and Ludmilla weather a potential financial crisis. This year, the couple requested help paying for Max's second hearing aid. Before addressing this request, an HCS care manager conducted a comprehensive assessment and learned that 2018 had been especially difficult, both financially and emotionally. The couple, who have no local family support, needed to leave their longtime apartment after rents tripled.

Ludmilla has a history of depression, which was exacerbated by the stress of having to leave her home, triggering traumatic memories of evacuation, resulting in a psychiatric hospitalization. HCS receives contributions from a local foundation, specifically designated for FSU older adults' transportation needs, and accessed these funds to help Max visit his wife in the hospital. Once Ludmilla returned home, this transportation assistance ensured she could continue receiving outpatient treatment.

When reassessing their financial circumstances, HCS staff identified additional needs for food and medication assistance. The couple was enrolled with Maot Chitim, a local Jewish holiday food delivery program. Staff also recommended HCS wellness classes, funded by a Jewish Federations of North America grant; these classes help the couple better manage anxiety and emotional distress, and have served to expand their social network. This past December, for the first time, Max and Ludmilla attended the HCS Café Europa Chanukah Party. Celebrating with others filled them with joy, helping them feel more connected to their Jewish heritage and to fellow survivors.



Within this landscape, recognizing that no single organization can meet all the needs of this vulnerable population, HCS has been a leader in actively pursuing and leveraging community resources and partnerships to enhance the lives of Holocaust survivors. Such partnerships include the Illinois Holocaust Museum and Education Center and the US Holocaust Memorial Museum; Jewish service centers, food pantries, and delivery programs; legal experts in reparations and advanced directives; Jewish day schools, colleges, and universities; local synagogues; cultural venues; and national organizations such as Alpha Omega Dental Fraternity, Kavod, and Jewish Federations of North America. Unfortunately, many organizations are also struggling due to local budget crises and increased need, and are only able to offer limited assistance.

Looking ahead, HCS recognizes that its continued efforts at advocacy and raising awareness are crucial to sustaining its services and addressing the profound trajectory of future need. HCS understands the necessity of educating the community and potential funders about the enormity of survivors' challenges with aging in poverty, in addition to conveying who survivors are in the context of common misperceptions about their Nazi persecution and their longevity. In addition to the tremendous advocacy by the Claims Conference to recognize survivors from the FSU with the German Government, HCS feels the need to ensure that all survivors are fully eligible for levels of care that have not historically been afforded to survivors who were persecuted outside of camps and ghettos. Its shared mission continues to be to honor the legacies of all Holocaust survivors by providing support to all who are still living among us.

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