

# Candid Comments

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## Measuring Jewishness

When is a Jewish institution not a Jewish institution? That question is again being debated in national circles — partly as a result of the new ethnic consciousness.

Some people measure the Jewishness of an institution by Body Count; that is, by the number of Jews it serves. It has been calculated, for example, that Mt. Zion Hospital has served the majority of Jewish families in San Francisco, in one way or another. So has the Bureau of Jewish Education.

But so has the California Bureau of Motor Vehicles. In Body Count, the concentration of Jews is more important than absolute numbers. The proportion of Jews served by the Bureau of Motor Vehicles is the same as the proportion of Jews in the population. But the proportion of Jews in the Jewish Home for the Aged is about 20 times higher than the proportion of Jews in the population.



Raab

No first-rate hospital with modern medical facilities could sustain itself with that proportion of Jews — (there just aren't that many sick Jews in San Francisco) — but the proportion of Jews served by Mt.

Zion Hospital is about five times higher than the proportion of Jews in the population. Or, to put it another way, the proportion of Jews served by Mt. Zion is at least 15 times higher than the average of other hospitals in the city. And the proportion of medically indigent Jews must be at least 50 times higher. The proportion of Jews served by the Jewish Community Centers is about 10 times higher than the proportion of Jews in the population.

Some people, however, prefer the Cost Accounting measure of Jewishness; that is, the number of Jews served per dollar contributed by Jews. On that scale, Mt. Zion Hospital might emerge as the most Jewish of local institutions. More than half a million dollars is expended annually on medically indigent Jewish patients, although the Jewish Welfare Federation only gives the Hospital less than a quarter of a million dollars. That is a bargain in any business.

But Body Count and Cost Accounting measures of Jewishness have a certain limited usefulness. There is, after all, the question of whether these institutional services have some uniquely Jewish purpose. In the case of the Bureau of Jewish Education, the question answers itself. But what is Jewish about Jewish health and welfare agencies — aside from the fact that they happen to disproportionately serve Jews?

One answer might be that they don't just *happen* to serve Jews disproportionately. After all, there is an open marketplace in health and welfare services. The Body Count points up the fact that a large number of Jews *want* to be served in Jewish institutions. The reasons are undoubtedly varied, including sense of ease, conformance with traditional customs, and other special needs. For example, would the Soviet Jewish emigres get the same needed treatment at the state employment service, the general family service agency, or San Francisco General Hospital, as they now get at the comparable Jewish agencies?

There is, of course, a further question of "Jewish content." The Bureau of Jewish Education, by its nature, has more explicit Jewish content in its program than Jewish health and welfare institutions, such as the Jewish Home for the Aged. This presumably does not make the Jewish Home for the Aged less valid as a Jewish institution; it just has a different function. But it can still be legitimately asked whether the Jewish Home for the Aged, or Mt. Zion Hospital, or the Jewish Community Center are as "Jewish" in religious or cultural tone as they can or should be, within the limits of their different functions. That is a continuing and proper debate in any pluralistic community.

All of which still does not touch on one of the more important aspects of the "Jewish purpose" of these communal institutions.