



Community Expectations of 'Jewishness' in Service Delivery

Summary Report for the Victorian Jewish Community

Jewish Care Victoria
In conjunction with
Professor Andrew Markus
Australian Centre for Jewish Civilisation
Monash University

 **JewishCare**
My Community. My Choice.

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Executive Summary

Background

A Jewish Care Strategic Initiative

Understanding the Victorian Jewish community is central to the capacity of Jewish Care to provide tailored aged care and community services. In 2012, Jewish Care embarked on a strategic piece of research to learn more about what the community expects in relation to the 'Jewishness' of its services. The research has become known as 'Community Expectations of Jewishness in Service Delivery'.

Evidence-Based Decision Making

The information gathered through the survey research project provides insight into how the community would like to see 'Jewishness' reflected in services. It forms an evidence base from which Jewish Care can make decisions about how to best position itself to meet the expectations of its diverse community.

Working in Partnership

Jewish Care recognises the value of forging links with academic and other institutions for the purpose of research. Building a tradition of partnership in research, Jewish Care joined with Professor Andrew Markus, Australian Centre for Jewish Civilisation at Monash University, to undertake the research into community expectations of 'Jewishness' in service delivery.

A Consultative Survey Development Process

The survey tool was developed through extensive consultation with key stakeholders. Intensive discussions within the Jewish Advisory Committee, the Jewish Care Quality Service Review Committee and the Jewish Care Board were matched with comprehensive external consultation. Over the course of three external focus group sessions, representatives from each of the Jewish Community Council of Victoria, Council of Orthodox Synagogues, Union for Progressive Judaism, Association of Principals of Jewish Schools of Australasia as well as donor, client and community representatives, worked to refine survey questions.

Research Methodology

Survey Participants

Employing a rigorous scientific research methodology, the survey was administered to *two sample populations*, reaching in excess of 14,000 prospective participants. The first sample was drawn from the Jewish Care database and the second was recruited from the community at large.

Jewish Care maximised the opportunity for the community at large to participate in the survey, advertising for participants through an array of different media including The Australian Jewish News and Hamodia newspapers as well as through community email networks. Surveys were also made accessible in both online and paper-based formats.

Participants from the two sample populations were statistically comparable and so data sets were combined, creating a single sample of 1305 participants.

Survey Data Analysis

Survey data analysis was extensive and the methodologies used ensured that each of the classified 'religious identifications' was awarded equitable representation.

Key Findings

Overarching Themes

- There was strong and widespread support for the maintenance of religious and cultural practices and observances within Jewish Care.
- Religious identification was a strong predictor of response to questions posed about observance of religious practices. For example, amongst those who identified as Ultra or Strictly Orthodox, there was close to unanimous support for observances of kosher dietary laws and Shabbat in communal and public areas within facilities, whereas less than one quarter of those identifying as not religious supported or strongly supported these observances.
- Opinion was divided on questions pertaining to individual choice (as distinct from communal practice); with questions related to end of life decisions, provision of requested non-kosher food and facilitation of group activities not in keeping with religious observance, polarising participants.

- Strong support for religious and cultural practice
- Religious identification was a strong predictor
- Opinion divided on matters relating to individual choice

Specific Areas of Consensus

- There was strong agreement amongst a vast majority of participants for religious and cultural observances; in particular the observance and commemoration of religious and cultural events and the observance of Shabbat and kosher dietary laws in communal and public areas within Jewish Care services and programs.
- There was very strong negative sentiment from a vast majority of participants towards the notion that Jewish Care should facilitate the celebration of non-Jewish occasions in communal areas for clients who request this.
- There was strong agreement amongst almost all survey participants for consultation with family and clients in the delivery of care.
- *Of the limited number of Jewish Care services listed for comment, there was strong agreement amongst almost all survey participants for provision of these services (e.g. respite services for adults with disability, mental health services).*

- Observance of Shabbat and kashrut
- Observance and commemoration of religious and cultural events
- Not to facilitate the celebration of non-Jewish occasions
- Consult with families in delivery of care
- Provision of services such as respite for adults with a disability and the Mental Health Program

Specific Areas of Divergence

Opinions of survey participants were divided about whether Jewish Care should:

- Advocate for life prolonging measures at end of life stage.
- Provide non-kosher food to residents and clients who request it.
- Facilitate group activities that are not necessarily in keeping with Jewish religious observance when requested.

- Advocate for life prolonging measures
- Provide non-kosher food if requested
- Facilitate group activities not in keeping with Jewish religious observance

Key Learnings

In the main, survey findings reaffirm that **Jewish Care is delivering its services in a manner that is consistent with the expectations expressed by the community about how ‘Jewishness’ should be reflected in service delivery – validating financial investment in the ‘Jewishness’ of this service provider.**

To address survey findings of divergence in community opinion, Jewish Care has committed to actions as outlined in the following Table.

Table 1: Key areas of divergence in community expectations and Jewish Care response to managing divergent expectations

| Divergent Community Expectation | Jewish Care Response |
|---|---|
| <p>Opinion was divided in response to the proposition that non-kosher food should be provided to residents and clients who request it: 51% disagreed, 13% mid-range, 36% agreed.</p> | <p>Jewish Care is committed to continuing its practice of permitting residents/clients to bring their own food into facilities for consumption in ‘private spaces’. Consumption of such food in ‘public spaces’ would affect the kosher status of the facility and, as such, is not supported by Jewish Care or the community it serves (see paragraph four under sub-heading ‘Areas of Consensus’).</p> |
| <p>Opinion was polarised in response to a stand-alone question concerning advocacy of ‘life prolonging measures at end-of-life stages’: 39% strongly agreed or agreed, 21% mid-range, 40% disagreed or strongly disagreed.</p> | <p>Prior to survey administration, Jewish Care commenced implementation of Advance Care Planning (ACP). The organisation is committed to embedding ACP as a process within residential and community aged care services. As industry best practice, ACP empowers and enables residents/clients to customise future medical treatment and care (subject to laws applicable in Victoria).</p> |
| <p>Opinion was divided in response to a question about whether Jewish Care should ‘facilitate group activities at the request of residents and clients which are not in keeping with Jewish religious observance’: 40% agreed, 20% middle, 40% disagreed.</p> <p>Similarly, opinion was divided in response to a question about whether Jewish Care should ‘facilitate the celebration of non-Jewish religious occasions in staff areas for staff members who request it’: 39% agreed, 21% middle, 39% disagreed.</p> | <p>Jewish Care has always given due consideration to activity requests and, where possible, requested activities are facilitated. Jewish Care is committed to continuing the practice of facilitating, where possible, activities that are not in keeping with Jewish religious observance, provided that these activities are carried out in a manner that is respectful.</p> |
| <p>Religious identification was a strong predictor of response to questions posed about observance of Orthodox religious practice.</p> | <p>Jewish Care has traditionally delivered lifestyle programs that reflect both Jewish religion and culture. Recognising that Orthodox religious practice is not equally valued by all community members, Jewish Care has committed to further development and ongoing review of lifestyle programs for both the celebration of Jewish religion and the celebration of Jewish culture.</p> |



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