JEWISH HEALING PROGRAMS: BEST PRACTICES
SAMPLER

2008

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This publication is a compilation of Best Practices and New and Interesting Programs contributed by organizations that are part of a national network of Jewish Healing/Spiritual Care Centers and Programs. Many of these programs are in Jewish Family Service Agencies throughout the USA.

Visit www.ncjh.org for an up-to-date list of Jewish Healing/Spiritual Care Centers and Programs, free resources and publications for purchase, professional and lay training resources and useful links.
The National Center for Jewish Healing (NCJH) a program of JBFCS, helps communities better meet the spiritual needs of Jews living with illness, loss and other life challenges. Working closely with an international network of Jewish healing/spiritual care centers and programs and in cooperation with the Association of Jewish Family and Children’s Agencies (AJFCA) and the Kalsman Institute on Judaism and Health, the NCJH provides networking opportunities, consultation, publications, web-based resources, training and referral to community resources.

NCJH is a Rita J. Kaplan Jewish Connections Program which supports Jews through life transitions and challenges by connecting with community and tradition. These programs work collaboratively with synagogues, schools, JCC’s and other community partners to help people cope and grow by drawing on resources that are spiritual, psychological and practical.

The Jewish Board of Family and Children’s Services (JBFCS) is one of the nation’s premier mental health and social service agencies. JBFCS offers the best-trained professionals and the most advanced mental health care and social services to help individuals live better at every stage of life. For more than 125 years, we’ve been providing help to New Yorkers on a wide range of issues – from family violence and struggles with mental illness to day-to-day challenges. And every year, across all five boroughs, more than 50,000 people rely on us for help through our 160 programs.
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   Updated April 2008
   www.ncjh.org
Name of Program: Judaism, Health and Healing for Physicians - New and Interesting 2008

Organization: Kalsman Institute on Judaism and Health and Temple Chai Deutsch Family Shalom Center

Description: Responding to an awareness of increased stress and communal disengagement among healthcare practitioners and their search for tools to cope, The Kalsman Institute on Judaism and Health and the Temple Chai Deutsch Family Shalom Center have developed a distance education program designed to help these professionals integrate their clinical and spiritual lives. This financially sustainable program provides practitioners the tools to cope with this stress, and opportunities to deepen their connection with Judaism. The “Judaism, Health and Healing (JHH)” curriculum brings together the clinical experience and theory of leading practitioners with the rich treasury of resources and experiential tools that reside within the Jewish tradition. The ten-week online and telephone distance learning model is coupled with opening and closing Shabbat retreats that provide a realistic offering for professionals who have cramped schedules and competing demands. The program produces Jewish clinicians who go back to their Jewish communities engaged and recharged.

Content: The Judaism, Health & Healing for Physicians program is designed to encourage Jewish clinicians to deepen their connection with Judaism and to help build communities of Jewish clinicians. The Initiative expects to:
1. Increase physician participants’ knowledge of Jewish tradition and sources related to health and healing.
2. Provide tools, insights and experiences to help clinicians infuse Judaism, spirituality and self-awareness into their professional and personal lives.
3. Promote wellness and enhanced meaning thereby addressing burnout, compassion fatigue and related issues.

Lessons Learned: Enrollment was as strong as hoped for – 16 for our pilot group
Engagement is quite profound – the experience has been transformational for the participants and faculty

What It Takes: This is a program that we are interested in moving to other markets and offering to other healthcare professionals, in addition to physicians. Our team, including administration and faculty, is open to exploration of partnerships with various community agencies and congregations.

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Name of Program: Rabbi/Social Worker Roundtable - Updated 2008

Organization: Jewish Family Service/Los Angeles

Description: The Rabbi/Social Worker Roundtable is a program developed by the J in JFS Committee of JFS/LA to enhance relationships between JFS clinical staff and congregational rabbis, provide pastoral counseling consultation for rabbis and exposure to the use of spiritual resources in counseling for social workers. Its ultimate goal is to encourage collaborative relationships, both in the area of counseling referrals and program development.

Under the leadership of a JFS coordinator/facilitator, a group of six congregational rabbis and six JFS social workers have met monthly, exploring issues of loss, addiction, abuse, marital counseling, bereavement, pet loss and spiritual support, using presentations, case consultation, vignettes and Jewish texts. Social workers were selected from throughout various services of the agency. Criteria included openness/interest in working in interdisciplinary setting and the ability to work collaboratively. There were no criteria regarding Jewish background/knowledge although there was an expectation of openness to learning more about pastoral and spiritual issues. Rabbis were selected based upon following criteria: Interest in increasing pastoral counseling skills; openness to working in interdisciplinary setting; interest in collaboration. Both groups were asked to initially make a 3 month commitment to the group. The majority of members have participated since the group’s formation in October 2003.

Content: Group meets one morning a month for 1 ½ hours, in a centrally located synagogue.

Sessions include:

- ‘Burning issues’: counseling issues of immediate concern, usually presented by the rabbis. Group consultation follows
- Group initially selected topics including loss and bereavement; separation and divorce; premarital issues; counter transference and boundaries; pet loss; and more.
- Over time, rabbis have asked for more skills-based presentations from social workers and social workers have asked for more exposure to what Judaism has to say about families, loss and crisis. Vignettes from the participants’ practices are always included. The meetings are interactive, not primarily didactic. Many issues are revisited, particularly counter transference and boundaries. Most recently, we have not pre-selected topics as there is enough content arising from ‘burning issues’ to drive the meeting.
- Format is reassessed every six months. It is essential that this be group-driven, not facilitator driven.

Surprises: 1. New social workers and rabbis have been added over the years; those who have had to leave the group remain on the roster and are invited to come when possible. Although that has happened infrequently (one rabbi did return after nearly a year’s absence when his schedule changed), many of the rabbis have
maintained relationship with social workers and, in particular, program coordinator, for consultation around difficult counseling issues.

2. Although it was always a hope that social workers would become increasingly interested in what Judaism/Jewish tradition has to offer, it was not anticipated that they would ask for text study!

3. We did not anticipate the level of bonding that has occurred and that nearly three years later, we would still have most of the ‘founding’ rabbinic members. Several rabbis have recruited colleagues into the group.

4. We have had meaningful collaborations develop. These have included JFS staff making presentations at synagogues; rabbis publicizing JFS programs and/or making their facilities available for JFS programs; rabbis consulting with various JFS staff members on issues ranging from child abuse to substance abuse and individual counseling issues. This began slowly but has become very much part of the fabric of the Roundtable. (One staff member found herself pulled aside by a rabbi at a bar mitzvah reception to consult on a possibly suicidal congregant)

5. From the rabbis’ evaluations:
   a. As a rabbinical student, I had one or two very mediocre ‘crisis counseling’ classes. I felt ill prepared for my role in pastoral counseling. This group has given me the opportunity to reflect upon my practice, to learn about additional specific counseling areas, and to develop contacts/resources in the JFS world
   b. While I have been comfortable calling JFS in the past, I appreciate this opportunity to more accurately direct congregants into the system. The camaraderie we’re developing is a positive outcome of this program. Open space to learn and share while getting to better know colleagues
   c. I’ve appreciated getting to understand the different ways rabbis and social workers approach issues and seeing how we can complement each other’s approaches and work
   d. Though I’d worked with JFS on a referral basis, didn’t have anywhere near the familiarity I now have. Also never collaborated as I am now.

6. From the social workers’ evaluations:
   a. I have learned more about the fuller scope of their spiritual work, their knowledge base, their personal struggles and concerns
   b. More counseling involved than I believed; more spiritual/less religious connections with congregants
   c. I have learned that the needs placed on them differ very little from those placed on social workers, except that there is great risk of dual relationships and crossed boundaries; also, that the rabbis don’t have sufficient clinical training
   d. I’ve appreciated getting to know rabbis ‘up close and personal’ and the collaborative possibilities that have developed

Lessons Learned: 1. The rabbinic contingent includes senior, assistant and associate rabbis. The need for consultation and honing counseling skills transcends title and seniority. We had originally targeted social workers from a range of JFS programs/services, hoping especially to strengthen relationship with
counseling offices by involving line staff. We learned that program managers are much better position to develop the collaborative potential of this program, though the line staff who are involved are deeply committed to the Roundtable and participate fully.

2. This program has attracted rabbis who either are associate or assistant rabbis or, in one case, rabbi of a small suburban congregation. The Roundtable is best suited for newer, even entry-level congregational rabbis who understand the importance of both honing their counseling skills and of the opportunity for regular counseling consultation.

3. Initially, though everyone liked the idea of this program, we could not get it started—couldn’t coordinate dates, location, etc. This changed when program coordinator met with two key rabbis, as a team they set the dates and the rabbis co-signed the invitation to their colleagues as well as making some calls. After that, there has been no difficulty with the coordination.

4. We meet monthly but choose dates every three months. Initially, we met on different days each month in order to not always hit a rabbi’s day off. Then the group decided on same day each month (Thursdays, which don’t tend to be a rabbinic day off). Even so, we only set dates three months in advance so calendars can be accurately assessed and cleared.

5. All correspondence is by email. Program coordinator generally sends two reminders in advance of the meeting.

6. www.Meetingwizard.com is a great resource for coordinating the meeting schedule!

**What It Takes:**

1. Support of agency for program that does not generate fees; understanding that the collaborative potential and bridge-building with congregational rabbis is worth its weight in gold! (‘Cost’ of program is staff time—both of coordinator/facilitator and participating social workers).

2. Coordinator/facilitator who has strong relationship with rabbis in the community, can easily make initial contact with them.

3. Both rabbinic and social work participants that have both interest in building pastoral skills and ability/willingness to learn in a group setting;

4. Individual outreach to both rabbis and social workers by program coordinator.

5. Commitment from all members to attend and to participate.

**For More Info:**

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Name of Program: Carpenter Rabbinic Internship

Organization: Joan Grossman Center for Chaplaincy and Healing of JFCS - Philadelphia, PA

Description: Internship places rabbinical students in departments of JFCS. Interns serve as team members with social workers and create an interdisciplinary environment for client care.

Content: The interns provide pastoral care to clients of the agency- often visiting in their homes. They engage in discussions of spirituality, meaning-making, and explore the emotions related to illness, limited mobility, and death. The interns also engage in staff meetings offering Jewish and spiritual perspectives to the team discussions. Interns also benefit for perspective and skill base of clinical team. As a result of these shared perspectives, a more holistic approach is brought to understanding client needs and delivering care.

Interns receive intensive supervision in chaplaincy. The internship is modeled on the theory and form of clinical pastoral education (CPE).

Surprises: Students bring an energy and intensity to the work that is helpful. Because they are students, the social work team does not view them as threatening and they are more easily integrated.

Lessons Learned: It takes a lot of work with staff to help them understand how to use students. This is ongoing learning process that needs to be constantly renewed. It continues to be a strong, viable program that receives continuation funding.

What It Takes: A clinical and administrative supervisor who can devote one-day a week to the internship. Funding to pay students for the internship.

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Name of Program: Lunch-and-Learns for Agency Staff - Updated 2008

Organization: Westchester Jewish Community Services, Westchester, NY

Description: Staff training on spiritual issues is conducted every spring and fall by Rabbi Pamela Wax, WJCS spiritual care coordinator, under the auspices of the WJCS Jewish Healing Center. These sessions have been attended by social workers, nurses, residential staff at CRC’s (residential homes), and administrators. In the last year, healing circles and bereavement groups have been added for staff.

Content: The following three series have taken place to-date, each with three sessions:

Series I. "Death and Mourning in the Jewish Tradition: Beliefs and Practices"
   A. Death and Mourning in the Jewish Tradition
   B. Beliefs about the Afterlife in the Jewish Tradition
   C. Ethical Wills

Series II "Spirituality in the Workplace"
   A. Doing Spiritual Assessments
   B. Using Liturgy and Ritual in the Healing Process: How to Bring It Home
   C. Healing Ourselves: Replenishing the Spiritual Wells When We are Burned-Out, Fed-Up, or Done-In

Series III "Therapeutic Issues with a Religious Component"
   A. Forgiveness as a Therapeutic Theme
   B. Guilt and Repentance as a Therapeutic Theme
   C. Theological Understandings of Suffering

In addition to these three series, a program entitled “A Night at the Mikveh” was held for therapists at a local mikveh housed in a Conservative synagogue. The program served to further the discussion of the healing potential of ritual in a client’s life. Out of these bridge building ventures, staff has requesting assistance with their grief issues arising from their own lives and from their work with clients with serious illness and loss issues and

Surprises: Staff is more attuned to issues of care for the professional caregiver. Also, the nicest surprise is finding therapists who are attuned to the spiritual needs of their clients and willing to consult with the staff rabbi on these areas of collaboration.

In the session on forgiveness, I was humbled to learn that the forgiveness for survivors of sexual abuse or domestic violence is a problematic issue and that the idealistic Jewish view is not always appropriate or healthy to promote. This interplay between the spiritual and the therapeutic has led to great learning and questioning.
Lessons Learned: The staff members who are themselves spiritual seekers are the ones who tend to be interested in these programs. This has evolved into healing circles and bereavement groups for staff. The question is still how to open the conversation up to those who are yet unaware of the potential in the interplay between therapeutic and spiritual interventions.

What It Takes: My experience is that if you plan it, they will come. Many staff members have come from other clinics as far as a 40-minute drive away to attend these lunch-and-learns. However, accessible venues do facilitate participation.

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Name of Program: Staff Healing Circles - Updated 2008

Organization: Jewish Family & Children’s Service of Greater Boston
Jewish Healing Connections, Waltham, MA

Description: The Staff Healing Circle is a model of self-care for human service professionals working in Jewish Family Service agencies. The Staff Healing Circle was designed to alleviate the pervasive effects of work-related stress. Human service professionals are constantly in service to others and are as much in need of spiritual support as those they serve. Stress reduction, self-care, and healing are vital for human service professionals who often feel depleted. Research has shown that agencies that are open to the role of spirituality in the workplace may see improvement in job performance and satisfaction. Staff Healing Circles foster an atmosphere of spirituality and support within the workplace. Spiritual support can be used quite effectively in the workplace to prevent burnout and promote personal growth.

Content: For over 10 years, a half-hour monthly Staff Healing Circle has been offered during the lunch hour. Staff Healing Circles include silent meditation, inspirational readings, discussion, prayers for healing, and music.

Surprises: Between 6-14 different staff members participate each month. Staff members look forward to coming together in a sacred space. Over the years staff members have shared many personal and professional experiences with one another. Staff Healing Circles have become an integral part of the fabric of the agency’s culture; at a staff training dealing with suicide the presenter requested that the training be taught within the framework of a Healing Circle.

Lessons Learned: It is possible to create a sacred space in a conference room! Lighting matters - the fluorescent lights are turned off, and a lamp and candle transform the space. The conference room table is covered with a beautiful cloth. A memo with dates is sent out six months in advance for staff to mark their calendars. On the day of the Staff Healing Circle an email reminder is sent.

What It Takes: One staff person who is committed to making it happen and is supported by the agency. Once the program is in place it will succeed if staff members find it meaningful.

Name of Program: Prison Ministry Services – Best Practice 2008

Organization: The Jewish Healing Program of the JFCS of Sarasota, FL

Description: There is very little consistent spiritual support for prison inmates. A retired Rabbi volunteer has been serving 20 inmates at one of the male FL State Correctional Facilities. Spiritual guidance, comfort and support are also offered. The Rabbi and Para-Chaplains are also available on an on-call basis for visits with inmates at the local county jail.

Content: • Weekly Shabbat or special service depending on the calendar.  
  • Torah study with weekly pashas developed by the Rabbi.  
  • Spiritual discussions applying traditions and wisdoms to their lives.  
  • Visits with local county male and female inmates offering support, referrals and assistance with planning for their success upon re-entry to the community.

Surprises: There were many surprises in development of this program:  
We received overwhelming support from the State Correctional Facility and the local Sheriff’s Department for this service from the beginning. The administrator of the State Facility has reported positive differences in participants’ behaviors as evidenced by virtually no disciplinary infractions for consistent participants and positive influence on others to “do the right thing.”

This program began as a monthly contact with the State Facility and quickly evolved into weekly trips (1.5 hours from the agency) with services now offered in two locations at the facility.

Our Prison Services Rabbi received a call from the Juvenile State Facility near the adult one and was asked by a 16 year old girl to help her study for her Bat Mitzvah. She completed her studies, had her celebration and is continuing to do well in school and in the community since her release, a true mitzvah.

Lessons Learned: When we talk about this program people are shocked to hear that there are Jewish inmates. We have learned that the stereotype that Jews do not suffer from the same social ills as other segments of the population is still rampant. Those who serve this most disenfranchised of our community receive as much if not more than they give.

What It Takes: This program requires a person with knowledge and experience in corrections, dedication and a non-judgmental attitude toward inmates, regardless of the crime committed. To be successful long term given the amount of hours required for the commitment, funding is needed for the Rabbi. This program requires additional financial commitment from the agency and dedicated donors for travel, food, materials and staff supervision. Recognition of the one doing the direct service
Visiting and Supporting the Visitors

from the agency, within the Jewish community and the community at-large is a must for this great work.

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Name of Program: Continuum of Visiting Services, Jewish Healing Program – Best Practice 2008

Organization: Jewish Healing Program of JFCS, Sarasota, FL

Description: The Jewish Healing Program has been dedicated to developing a continuum of services for those who are isolated, alone and experiencing life challenges. The Senior Services Department at JFCS provides volunteers who provide on-going telephone reassurance and visits through the Friendly Visitors Program. The Jewish Healing Program trains Bikkur Cholim Para-Chaplains who address the spiritual component of visits for people in their homes, nursing homes or hospitals. The Doula Services component of Jewish Healing trains volunteers to companion with those who have a serious life-threatening illness. These highly trained volunteers provide spiritual and emotional support, advocacy and comfort to care-recipients while they are transitioning to the end of their lives. Thus, when there is a need for visits, a staff person is able to assess the need and provide the appropriate volunteer service from the continuum. Those receiving services are able to move from one service to another on the continuum as their needs change.

Content:
- Training and matching of Bikkur Cholim volunteers for assignments in hospitals, senior facilities and for in-home visits.
- Training and matching of Doula volunteers for their one-on-one match in whatever setting their care-recipient resides including hospice houses.
- Licensed staff complete clinical assessments and make assignments to the appropriate program component, following up with quarterly reviews, satisfaction surveys and annual assessment updates
- Staff hold monthly meetings for supervision, additional training, support and coordination of volunteers within each component

Surprises: Several of the Healing Program’s services, including hospital visitation, existed within the agency before the inception of the Jewish Healing Program. Upon my arrival and establishment of the Program, I was concerned about how I would incorporate these services within the program and also how visiting services would interface with other JFCS services. Having had no prior experience with the agency, I could not envision how the program would become an integral part of the agency, while incorporating existing elements. The agency, however, has always been totally committed to Jewish programming and has been totally supportive in establishing and expanding the program. The agency has assisted in integrating the existing components while supporting the addition of new services seamlessly within the agency. The components that were operating prior to the program’s inception, however, were accustomed to working independently without supervision, which presented some interesting challenges at times.

Lessons Learned: In the development of a program it seems that I always underestimate how much time is needed for marketing the program’s services and for recruitment of volunteers. Accomplishing both of these tasks requires knowledge of the community, a huge time commitment, traveling throughout the two counties.
What It Takes: The most prized resource for this service is the dedicated volunteers who give of their time and their hearts when others are identified as suffering. There needs to be constant volunteer recruitment, training, supervision and support for the services to be consistent and effective. To accomplish this there needs to be coordination within the agency by all departments with Jewish Healing: Outreach and Volunteer Coordinator, Marketing, Senior Services and the Intake Department, for example. There needs to be a major commitment on the part of the agency for use of resources such as space, materials, and staff time. There must also be a strong commitment from Board and Executive Staff leadership to ensure there is the guidance and resources required to meet the needs of the Jewish communities served.

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Name of Program: The Caring Communities Resource Network - New and Interesting 2008

Organization: Jewish Healing Connections, a program of Jewish Family & Children’s Service of Greater Boston Waltham, MA., in collaboration with Jewish Family Service of Metrowest, Framingham, MA

Description: JF&CS is leading this new effort - building on its past 10 years training synagogue Caring Communities. The Caring Communities Resource Network (CCRN) works in collaboration with area synagogues, helping them create and sustain Caring Communities. The CCRN hosts community trainings at JF&CS and JFSMW, and is designed to bring congregations together to share experiences and to create a sense of connection among the congregations. The CCRN also trains and consults with individual synagogues.

Content: The CCRN provides training and networking opportunities among synagogues, and offers consultation, training workshops, and resource materials. In addition to fostering support and communication among synagogues, the CCRN also informs congregations about the variety of services available through JF&CS and JFSMW for their congregants in need. The CCRN also matches congregations with Agency volunteer opportunities.

Surprises: The response has been overwhelmingly positive from synagogues interested in participating in the Network. A unique feature of the CCRN is that it is trans-denominational; the Network presently has members from more than 30 synagogues representing the Reform, Conservative, Reconstructionist, Jewish Renewal, Orthodox, and non-movement affiliated communities.

Lessons Learned: The program coordinator conducted a needs assessment survey to determine training topics congregations were most interested in. The first training held at JF&CS, and in collaboration with a synagogue, was entitled, “The Nuts and Bolts of Creating Caring Communities.” The second training focused on “Aging With Our Parents: The Sandwich Generation.” The next training will focus on, “Being Present: Listening & Communication Skills.”

What It Takes: The program coordinator spent months contacting synagogues to inform them about this new initiative. She follows up each community training by emailing detailed minutes. In this way, those congregations unable to attend the training feel connected to the Network. She also sends periodic e-mails with resource materials to foster an ongoing sense of community and connection among members of the Network.

For More Info: Sue Spielman, Program Coordinator, 781-647-5327 ext. 1959 sspielman@jfcsboston.org.
Visiting and Supporting the Visitors

Name of Program: Advanced Jewish Healing Program: Lilmode, Lelamed, Lenakhm (To Learn, To Teach, To Comfort)

Organization: Deutsch Family Shalom Center, Temple Chai, Phoenix

Description: This three-year program was developed to deepen participants’ understanding of Jewish healing practices and the mitzvot of healing; to offer practical assistance to clergy and congregants; and to create and develop projects to bring healing to our personal and professional work and to our community.

The program emphasized a participatory learning process to explore and utilize our Jewish traditions and wisdom in the areas of:

- Traditional and contemporary concepts of Jewish healing
- Personal development skills of listening and connecting with self and others
- Theological issues in health, illness, and loss
- Role of prayer and the spiritual dimension of health and illness
- Jewish principles of caring for the dying and their loved ones
- Ancient and modern texts related to Jewish healing
- Development of healing projects for our community

Content: Year I: Monthly meetings facilitated by Temple Chai clergy and selected guest scholars of the Jewish healing movement; weekend retreat; selection of healing projects

Year II: Workshops presented by participants, along with the implementation of selected healing projects; lectures and workshops throughout the year; healing trip to Israel

Year III: Continued implementation of healing projects; group activities (retreat, hike, etc.); and closing ceremony

Surprises: This program attracted many healthcare professionals who were drawn to the opportunity for spiritual development and personal growth. They turned to the synagogue at a time of re-examining their roles at work. Many were experiencing burnout, disillusionment, and/or family and health concerns. They were seeking safe and non-judgmental opportunities to bring balance into their lives.

Lessons Learned: The participants found creative ways to synthesize their professional and personal interests through their healing projects. These included:

- Development of a spiritual direction program for congregants
- A shiva minyan training
- Study and development of a chevra kaddishah
- Job transition support group and workshop
- Creation of lap quilts and a book of poems and prayers for congregants who are ill
- Jewish physician healing program
Visiting and Supporting the Visitors

What It Takes: This program takes the dedication of clergy, a healing center staff member, and volunteers who view caring and compassion at the center of synagogue life.

For More Info: Contact Sharona Silverman, Director, Deutsch Family Shalom Center, Temple Chai
ssilverman@tempechai.com
602-971-1234
Name of Program: JHHC Bikur Cholim Friendly Visiting Program - New and Interesting 2008

Organization: Jewish Health and Healing Center, Jewish Family Services of Greenwich

Description: The Greenwich community is approximately 62,000 people. It is estimated that 6,000 are Jewish. Of those 6,000, less than half affiliate with the Jewish community. There are six synagogues in our program area. They are several of the founding members of the JHHC, JFS Greenwich. Five have chosen to participate in our Bikur Cholim Friendly Visiting Program. Each participating congregation is paired with a local facility, i.e. nursing home or assisted living, and provides Shabbat and holiday programs on-site. The anticipation is that as a result of this relationship, individual relationships will be formed resulting in one-to-one visiting.

Content: Jewish music and traditional holiday/Shabbat foods are provided. The program is led by a clergy member in coordination with a social worker. Occasionally a teen synagogue youth group or children from the synagogue nursery school join the clergy person on the visit.

Surprises: The clergy leader and the participating kids/teens received as much joy as the participants.

Lessons Learned: Follow up with the synagogues is much more difficult than expected. The facilities are good coordinators, but some clergy and youth workers need to be “harassed” to pick dates of programs and then need lots of hand holding through the program process. We are finally picking up momentum and as this year comes to an end we will have a great basis to continue building the relationships, as a group and as individuals.

What It Takes: Time!!! Innumerable hours are spent coordinating agencies. Follow up countless times with staffers and participants.

For More Info: Dinah Miller Marlowe, LMSW  
Jewish Health and Healing Center  
Jewish Family Services of Greenwich  
1 Holly Hill Lane  
Greenwich, CT 08630  
203-622-1881 x17.
Name of Program: *Turn to Me* - A Documentary Film about Bikur Cholim - Updated 2008

Organization: Rabbi Isaac N. Trainin Bikur Cholim Coordinating Council (BCCC) of JBFCS, NY, NY

Description: BCCC has produced an inspirational/instructional Documentary Film called “Turn to Me” that focuses on the performance of the mitzvah of Bikur Cholim. The film was created by Dr. Murray Nossel, an Academy Award nominated documentary film-maker. It is available along with a study guide at $36 for groups, and $18 for private use, and s&h costs.

Content: The purpose of the film is:
- To *inspire* viewers to participate in the mitzvah of Bikur Cholim.
- To *educate* viewers about the practice of Bikur Cholim.
- To *provide* practical guidelines regarding visiting the sick.

The film features:
- Interview segments with Dr. Elie Wiesel and Rabbi Tzvi Blanchard.
- Real life footage of Bikur Cholim visits.
- Segments of a Psalm group meeting demonstrating a key component of bikur cholim, prayer.

“Turn to Me” has been screened at The New Jersey Jewish Film Festival and Sun Valley Spiritual Film Festival. It is now on DVD and VHS available for distribution to synagogues, Jewish Day School/Yeshivot, Jewish Community Centers, Jewish Family and Children Services Agencies, community-based Bikur Cholim programs, and for personal ownership. “Turn to Me”, which is accompanied by a Study Guide created in collaboration with Dr. Mark Kramer, Robin Schoenfeld and Vicki Rosenstreich, is intended to be used to educate, orient and encourage youth and adult members of the Jewish community to step up and participate in the mitzvah of Bikur Cholim. The companion guide features instructions for use, a suggested study questions for discussion, and other related skills for individuals and those wishing to develop a bikur cholim program.


For More Info: www.bikurcholimcc.org

Vicki Rosenstreich, LCSW
Director of Training

Robin Schoenfeld, LMSW
Program Coordinator

bikurcholimcc@jbfcs.org
212.399.2685 ext. 212
Visiting and Supporting the Visitors

Name of Program: Bikur Cholim Training Program for Chicago-area Synagogue – Updated 2008

Organization: Jewish Healing Network of Chicago, JCFS, Skokie, IL

Description: Jewish Healing Network of Chicago (administered by Jewish Child & Family Services, in partnership with CJE Senior Life, the Chicago Board of Rabbis and Jewish Federation of Metropolitan Chicago) seeks to create a linkage between Jewish Federation agencies and Chicago-area synagogues to enhance emotional, spiritual and/or practical support to members of the Jewish community facing illness, pain, loss or mortality. A Bikur Cholim (visiting the sick) training curriculum has been developed to work towards those goals. It is followed-up by a semi-annual meetings open to coordinators of synagogue Visiting Committees. The training is funded by the program.

Content: Training curriculum is tailored to meet the needs of each congregation. It is co-led by a social worker and a rabbi/chaplain. Below is a list of topics that might be covered. The training can be done in between two and six meetings (4 + is optimal). We use the book: Give Me Your Hand: Traditional and Practical Guidance on Visiting the Sick and the video “Turn to Me” as well as a variety of handouts specific to the needs of the congregation.

I. Introduction
   a. Leader, program, what agencies are involved; Jewish Healing Network of Chicago.
   b. Have people introduce themselves and share something significant about their experience visiting (or being visited), and what they hope to get from the training.
   c. Skills You Will Be Developing Along the Way (article distributed in class)
   d. Confidentiality (article distributed in class) – both in class and in visiting

II. Identifying Bikur Cholim and its components within Jewish tradition – text studies

III. Do’s and Don’ts – review of guidelines from the book.

IV. Empathetic Listening exercise
   a. Reading on silence
   b. Brief meditation exercise
   c. Lecture mixed with exercises – mirroring, reflective listening

V. Bringing one’s sense of spirituality to inform the visit
   a. Article by Rabbi Charles Savenor (article distributed in class)
   b. Jewish resources to be used in visiting
   c. How to introduce the issue of prayer into the visit
   d. Extemporaneous prayer

VI. Role Plays

VII. Evaluations
   a. Have people name one thing they have learned
   b. Written evaluations

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Each training session starts with a niggun and ends with some sort of closing prayer. Some synagogues have included this as part of Confirmation Class training. This program is open to a lot of creativity and input.

Surprises: The partnership between a Chaplain and a Jewish Healing Center Social Worker is an ideal training team. Each brings a complementary set of skills.

Lessons Learned: It takes significant amount of dedicated staff time to develop relationships with each synagogue. Out of those relationship which includes assessing the unique interests and needs of each community a collaborative relationship emerges. However, it is not a “one size fits all.”

Synagogues need a lot of support on organizing, establishing and marketing their program. The peer support at the semi-annual coordinator meetings in invaluable.

What It Takes: Sufficient staff resources to conduct the outreach, relationship building and follow-up. Gathering and tailoring the training resources and materials to the unique needs of each synagogue community requires community organizing and needs assessment skills.

For More Info: Tracey Lipsig Kite, LCSW 847-568-5216 TraceyKite@jcfs.org
**Visiting and Supporting the Visitors**

**Name of Program:** Rabbi Isaac N. Trainin Bikur Cholim (Visiting the Sick) Coordinating Council
Annual Full-Day Conference – Updated 2008

**Organization:** Jewish Board of Family & Children’s Services, NY, NY

**Description:** Each Fall we host an annual conference in New York City to engage, inspire and educate those interested in bikur cholim (visiting the sick) and to provide an opportunity for re-charging. This conference raises awareness of the importance of bikur cholim for the well-being of the individual and Jewish community and offers a structure for people/organizations to come together to learn and network. It enables synagogue based groups from around the tri-state area, many of whom have sought consultation from the BCCC, to network. Our conference attracts people from the tri-state, with a small national and Canadian presence.

**Content:** A strong keynote presentation or panel on a selected relevant theme is then reinforced in the morning and afternoon workshops. Learning focuses on skill-building and takes place through some didactic but largely experiential exercises. There are tracks for teens and committee organizers, new and veteran visitors. There are opportunities for networking during and after the conference. A midday individual/panel presentation recollects attention and expands on an aspect of bikur cholim. At recent conferences participants had the opportunity to view the bikur cholim documentary, “Turn to Me.” And the spirit of collegiality and warmth has been reinforced with live music (klezmer at the last year’s conference).

**Surprises:** (1) The people who come, where they come from geographically and in their lives, their determination and dedication to learning more. (2) The longevity of the conference, showing the growing interest in this mitzvah and deepening knowledge and skill; it’s a ‘sell-out’ crowd. (3) How grateful people are to have access to this learning opportunity.

**Lessons Learned:** People like to be engaged and involved. The most successful workshops are those that draw on people’s experiences and that also highlight what they know.

**What It Takes:** A spiritually inspiring and practical keynote presentation, committed and devoted facilitators, lots of PR-‘Save-the-date’ notification through flyers, newsletters, emails reminders beginning a few months before. Last minute outreach calls to individuals and groups of all sizes (including teens, students, past attendees, drawing on ongoing relationships in schools, synagogues, and community groups). Everyone counts.

**For More Info:** Vicki Rosenstreich, Director of Training
Robin Schoenfeld, Program Coordinator
212.399.2685 ext 212
rschoenfeld@jbfcs.org
Name of Program: How to Keep Volunteers Engaged Once the Initial Training is Over: Using Email Combined With Quarterly Meetings (Updated 2008)

Organization: The Twin Cities Jewish Healing Program (TCJHP), Minneapolis, MN

Description: Creating and updating an email group list and offering quarterly meetings for all 70 trained Healing Volunteers as a means of instant and postage-free communication. This has proven effective in making matches between volunteers and requests for volunteer visitors and drivers as well as helping the volunteers feel connected with the Healing Program on an ongoing basis following initial training sessions. (see information about quarterly meetings under Lessons Learned)

Content: Via email I am able to advertise new volunteer opportunities (in a general way while maintaining strict confidentiality) i.e. Need for a driver; need for a volunteer visitor in a hospital, nursing home or hospice; need for volunteers to deliver Jewish holiday items/resources to Jewish individuals in a healthcare setting or in a group home.

Surprises: When a particular volunteer request requires a team of volunteers I create a mini group email list so that volunteers can share pertinent information with each other as to their visiting experiences with the same clients. (This worked particularly well with a recent family who requested daily visits for a hospitalized teenager.) Thanks to our email group list each volunteer visiting this teenager was able to pick up where the previous volunteer left off. Also, with email communications to a large group list I can often find a volunteer match for a new request in minutes!

Lessons Learned: Volunteers appreciate ongoing weekly or bimonthly email contacts. Even when not available to help with a new opportunity, volunteers have expressed that these email updates help them feel like an essential part of the larger picture of our Healing Program. Also, this is an effective way of providing my volunteers with new in-service educational materials to enhance their skills as well as new Jewish spiritual resources for volunteers to share with those they visit. Email flyers can also advertise our quarterly volunteer in-service meetings. These meetings provide volunteers with an opportunity for ongoing training about such topics as: the special concerns of holocaust survivors, special needs of hospitalized children and their families...as well as an opportunity to share and problem solve volunteer experiences with their peers. Often over 30 volunteers attend our quarterly volunteer in-service meetings. In addition, regular email contacts are an effective avenue for expressing appreciation to our volunteers for all of the wonderful work they do.

What It Takes: Creating and updating an email list of all of volunteers

For More Info: Judy Marcus
952-542-4840
Jmarcus@jfcsmpls.org
**Name of Program:** B’Yachad: A Jewish Healing Gathering

**Organization:** Jewish Healing Network, Jewish Family & Community Services, Jacksonville, FL

**Description:** A spiritual support group for any individual in the Jewish community living with an acute, chronic or life limiting illness, a mentally or physically impairing disease or disability. This program is also open to their caregivers, family members, and friends, and is currently offered two times a year; once at a Jewish nursing home and once at a local HUD subsidized independent living residence facility. Participants share personal experiences, read prayers and inspirational readings in a supportive, caring environment.

**Content:** Prayers that provide comfort and healing, spiritual readings, and guided images are utilized. Taped music is also offered, and the room lighting is kept low; candles are often used. The focus is on creating a safe, quiet and relaxed atmosphere. The program is led by a rabbi, or a retired rabbi, who guides participants with prayer, readings and music and creates a supportive environment so that participants feel comfortable to discuss their individual situations and feelings.

**Surprises:** Participants connect with the spiritual component of Judaism and often say that although they were perhaps initially uncomfortable with the notion of “healing”, find the program to be extremely comfortable and helpful.

**Lessons Learned:** We learned that a Healing Gathering leader with knowledge of Yiddish (and, in the case of our Senior Housing program, also Russian) as well as Hebrew, was a “draw” for attendance which is often the elderly.

**What It Takes:** Meaningful supportive materials (prayers, readings, and music), an atmosphere of calmness and quiet, and a leader who helps participants feel comfortable and safe about sharing personal feelings.

**For More Info:** Beth Shorstein, LCSW  
(904) 394-5723  
bshorstein@jfcsjax.org
**Name of Program:** Team Leader Component To Volunteer Program

**Organization:** Jewish Healing Network, Jewish Family & Community Services, Jacksonville, FL

**Description:** A two-tiered volunteer management system, utilizing volunteers for the purpose of connecting with the volunteers on a monthly basis. They gather and share the following information with staff (JHN office):
1. the number of volunteer visits (contacts) to clients
2. the number of volunteer hours accrued by that volunteer (both of which information we are required to report to our agency), and
3. any other pertinent information that needs to be relayed from volunteer to staff or from staff to volunteers “in the field”.

**Content:** Team leader volunteer training by Jewish Healing Network coordinator; volunteer job description, procedures, and a form for reporting volunteer activity; and monthly communication with the Team Leaders.

**Surprises:** When we first began the two-tiered system, the Team Leaders often reported that they found it awkward to call someone they may have never met. However, over the period of a year, they have gotten to meet most of their volunteers, either at a volunteer function or Jewish Healing Network educational program, and now greet each other like “long lost friends”!

**Lessons Learned:**
1. We have had more success with volunteers “buying into” the two-tiered system who have come into our program after the Team Leader component was already built into our system, than with volunteers who started prior to being assigned a Team Leader.
2. Team Leaders have learned to be more flexible; i.e., they have had to learn to adapt different methods of communication with different volunteers. For example, some prefer telephone; some e-mail, etc.
3. And, lastly, staff has learn to modify procedures on incoming new volunteers as well. For example, following volunteer training when a new volunteer is interviewed and given a new assignment, they automatically receive the name and contact information of their Team Leader, with instructions to report their hours to them once a month. So they immediately understand that the assignment comes from the office, but that their day-to-day reporting and communication goes to the Team Leader, who relays their information to the office.

**What It Takes:** Volunteers who are interested in leadership roles, as well as making *Bikkur Cholim* visits. Good, consistent communication and training that provides a clear delineation of what are staff and volunteer responsibilities. Written procedures/guidelines for both staff and volunteers.

**For More Info:** Beth Shorstein, LCSW  
(904) 394-5723  
bshorstein@jfcsjax.org
Name of Program:  *Challah Program*

Organization:  The Joan Grossman Center for Chaplaincy and Healing of JFCS Philadelphia

Description:  Volunteers from the Joan Grossman Center for Chaplaincy and Healing of JFCS deliver challah every Friday afternoon to Jews in eight area hospitals. Last year, we provided challah to about 200 patients a week -delivering 9,865 challot-reaching thousands of individuals and their families.

The Challah Program provides a vital link to the Jewish community; reminding those who receive challah on Erev Shabbat that they are not forgotten by their community. Our trained Para-Chaplaincy Volunteers, live their Jewish values through gemilut hasadim (acts of love and kindness) as they offer spiritual and emotional sustenance to those facing life's challenges. The Challah Program touches the lives of Jews across the spectrum- young and old, affiliated or not, and of all denominations- giving them the opportunity to celebrate Shabbat and to draw on the spiritual strength of their tradition and community for healing.

Content:  The goals of this program are: to connect hospitalized Jews to their community and tradition, to offer spiritual and emotional support to Jews in the midst of life's challenges, and to provide meaningful volunteer opportunities.

Para-Chaplaincy Volunteers are trained, supervised, and placed by our Volunteer and Outreach Coordinator who works closely with both the volunteers and the Pastoral Care department at each hospital. Volunteers deliver challot to Jewish patients in 8 area hospitals on Friday afternoons.

Each challah is delivered with a beautiful card that contains wishes for healing, the traditional blessing, and concrete information about community services.

Surprises:  People love to receive challah from our volunteers. We receive dozens of thank you notes from people who were touched by this act of kindness at a difficult moment in their own lives. It is a simple, non-threatening way for Jews to feel connected and supported by the Jewish community.

Lessons Learned:  Even though the program is volunteer driven, it takes ongoing professional support to organize the logistics, recruit and train volunteers, and manage problems as they inevitably arise. Like many volunteer programs, without professional support this program would eventually run out of steam.

Our relationships with hospitals through our professional chaplaincy services provide the groundwork for this volunteer program.
Visiting and Supporting the Visitors

What It Takes: Staff: Volunteer Coordinator and Administrative Assistant.

On a logistics note, we arrange for the challah to be delivered by the bakeries each Friday. On Wednesday our secretary calls each hospital for a count and puts in delivery orders for each hospital. This allows us to purchase the right amount of challah, as well as centralize the billing. It simplifies the experience on the volunteers end, since they only need to go to the hospital and the challah is already there. As simple as this sounds we regularly have problems with the bakeries and delivery schedules and it is important to have a staff person overseeing.

For More Info: Rabbi Elisa Goldberg
The Joan Grossman Center for Chaplaincy and Healing of JFCS
7607 Old York Road (Lower Level)
Elkins Park, PA 19027
215-635-8909 x119
elisag@jfcsphil.org
Name of Program: Chaverim - New and Interesting 2008

Organization: Jewish Family Services, Durham-Chapel Hill

Description: A program for seniors held 4 times per month in 2 locations. The program provides a wellness component, lunch 2 times per month and a program on a range of topics from Jewish spirituality, Jewish arts – music, Jewish history of the south, holiday celebrations and more.

Content: In the wellness component we exercise mind, body or spirit in a session of gentle exercise or Jewish meditation. The physical exercise is led by senior adult exercise teachers and physical therapists. Jewish Meditation is led by the social worker. The Jewish meditation practice consists of a brief talk introducing Jewish Meditation, its history and its current practice, basic mindfulness meditation practice focusing on the breath or body sensations, and guided Jewish meditation using a prayer or chant. The session lasts 20-30 minutes.

We are also offering a hour program Speaking in Silence led by a local rabbi with many years of Jewish Meditation experience and leading. We hope to offer this more than once.

Surprises: There was an assumption that due to the generation of our seniors who may be more comfortable with traditional synagogue practice or Jewish home rituals that they might not enjoy Jewish meditation or that it might make them feel uncomfortable. When we have the sessions, the room becomes still and quiet, the group participates in the prayers or chanting. The feedback from the seniors is very positive and they request we continue to offer it.

Lessons Learned: It is worth it to try new programs and see the results, whether the program is tested out and then feedback is received or if there is an inquiry of the group’s interest prior to trying a program. From the positive feedback from our seniors, we have learned that they desire the opportunity to learn practices that enhance them spiritually and this spiritual practice gives them a skill to help deal with both emotional and physical distress as well as to appreciate the diverse range of Jewish practice.

What It Takes: The physical exercise component requires a trained, certified instructor. We have found volunteers willing to provide this service free of charge. We also have grant funding to pay a fee for the teacher/physical therapist.

The Jewish meditation component can be led by an individual with some experience in Jewish meditation. For those with little or no experience and those with experience, there are wonderful books introducing Jewish meditation with guided exercises and there are CD’s as well.
As the one leading the Jewish Meditation, I have found that my own learning and practice, primarily from participating in retreats at Elat Chayyim, helps me to feel grounded and to offer this from my neshama/spirit to our seniors.

Community: Durham-Chapel Hill has a Jewish Population of approximately 5000-6000. A functional Federation where our JFS is located. JFS staff of 2 fulltime - director and social worker both LCSWs. A JCC without walls. Three well established congregations (Conservative, Reform, Reconstructionist) with full time rabbis.

For More Info: Contact Cheryl Tarash
JFS Social Worker,
ctarash@shalomdch.org
919-489-5335 ext. 15
Name of Program: Kesher/Kesher 13 (Winner of the Goodman Award 2007) Update 2008

Organization: Healing Partners, JFS of Metrowest, Framingham, MA

Description: There are no assisted living facilities or nursing homes under Jewish auspices in our community. We identified over 300 Jewish elders who had no access to Jewish community connections, religious or cultural programming. Kesher works closely with area synagogues and community volunteers to bring Jewish cultural and religious programming to our seniors isolated in these residences. The Plan included: determining how many elders needed to be served, identifying key people in the various institutions and establishing relationships, developing and implementing Jewish cultural and religious programming.

In September 2005, a new component – Kesher 13 was added. This intergenerational program includes a structured 13 hour multi-dimensional experience for pre B’nai mitzvah children and their parents. Youth and their parent(s) are paired with a senior who is able to engage in a give and take relationship. Youth keep a journal of their experience and lessons learned though reflection on this experience and their B’nai Mitzvah portion.

Kesher 13 partnered with 4 area synagogues and assisted living and nursing homes where JFS of Metrowest, MA already had established collaborative relationships. A letter agreement about the partnership was signed by the JFS and each facility. Most facilities paid a stipend to the agency to participate in this service.

Out of this project, a Kesher 13 Manual was developed which includes copies of all administrative documents including job descriptions, 24 structured one-on-one visit/activity sheets, 10 journals, sets of materials for training, training curriculum and two hours telephone consultation. It is available for $500. (See contact information below).

Content:

Kesher

Jewish component: Monthly Kabbalat Shabbat Services—the only opportunity for many elders to say Kaddish; Yiddish Club; Jews in the News Current Events. Torah Study, Holiday parties; Nourishment for Body and Soul: Jewish Cooking; Jewish Sing a Longs; Mitzvah of honoring elders

Outreach component: Comfortable for interfaith families since included activities are not only religious but also cultural. Even though Jewish residents are targeted, activities are open to all residents of a facility and non Jews as well as Jews participate.

Community-building component: Kesher created partnerships with 40% of area synagogues. Kesher worked with social action committees’ mitzvah days to train service leaders, as well as created hands-on, interactive, inter-generational workshops for parents and children on how to visit elders and have joint holiday
Aging and Elderly

celebrations. These were not isolated programs but part of building ongoing relationships between a particular synagogue and a particular facility.

Kesher 13 - Training for parent(s) and children in visiting and an activities curriculum to facilitate interaction and exploration in the youth/elder relationship and journaling. (See description of Manual above)

Surprises: We are a suburban community with a low density Jewish population. Kesher was able to work with 13 synagogues and 31 assisted living and nursing homes in 13 different towns. One of our community partners is the JCC.

Kesher 13 worked with four synagogues and will add a new synagogue partner a year. The majority of youth and their parents who participated choose to continue in the program after their commitment period ended. Kesher 13 will increase the frequency of training and placement.

Lessons Learned: There is tremendous need for programming that reaching this population and interest among many community partners and volunteers in interested in being a part of the process.

What It Takes: It takes agency commitment to this type of programming, partnership with other agencies; dedicated staff, volunteers and clergy and/or students. Skills need by staff and volunteers: community organizing and building on existing relationships, volunteer management, Jewish culture, religious and spiritual care and knowledge of needs of the elder and their families.

For More Info: Malka Young, LICSW 508- 875-3100 MYoung@JFSMW.org
**Name of Program:** Spiritual Support Group for Older Women

**Organization:** Washington Jewish Healing Network

**Description:** A 4 - session group in which women look at aging through a Jewish lens. Group does some reading, sometimes does some writing, and a lot of talking. Each of the three groups has decided to continue meeting on their own after the four scheduled sessions, and has been meeting monthly. It is a combination of support group and spiritual autobiography.

**Content:** For the first four sessions, the topics were: Views of Aging; relationships with adult children; illness and death; what do I want to do for the rest of my life. Short readings were presented on the topics. After that, they were given a list of possible topics. Examples of readings include: views of aging from Shakespeare and Ecclesiastes; story about three daughters and aging mother called "Edict" from Tikkun Magazine; questions on ethical wills from Ethical Wills: A Modern Treasure, edited by Jack Reimer and N. Stampfer, Schocken Books.

**Surprises:** How easy it was to fill the groups. Two of them were posted on synagogue listserves and filled within a few hours! Although everybody resists writing about the topics, they all agree that, when they do write, they have much better discussions!

**Lessons Learned:** The fact that it was so easy to get these groups started shows how much older women are hungry to discuss their fears and hopes for their remaining years, and how Judaism can provide a comfortable and safe backdrop for doing so.

**What It Takes:** The structure of the first four sessions was important so that time was spent in bonding, rather than in discussing what to talk about.

**For More Info:** Carol Hausman, Ph.D.  
Washington Jewish Healing Network  
202-966-7851  
washheal@comcast.net
Name of Program: Congregation Connection Program

Organization: Jewish Healing Network of Chicago, a joint program of Jewish Family and Community Service, Council for Jewish Elderly, the Chicago Board of Rabbis and Jewish United Fund/Jewish Federation of Metropolitan Chicago.

Description: JHNC is the recipient of a grant from Retirement Research Foundation (based in the Chicago area) to provide support and funding to local synagogue to start/expand programs for the elderly in their communities. JHNC has helped congregations conduct assessments in their congregations to learn about the needs/interests of their elderly congregants. Congregations then developed programs to meet those needs and applied for funding (up to $8,000/year for three years) to run the programs (with support from JHNC). Thirteen congregations/programs applied for funding; ten were awarded grants (awards were given by an advisory committee created for the Congregation Connection Program).

Content: Programs focus on social activities and study and range from a ½ day adult day care program in an Ethiopian Congregation to study and field trips for older congregants to a program in an affluent suburb for grandparents to create and do Tikkun Olam programs with their grandchildren.

Surprises: As a social service agency, we expected more support/social service needs to be identified, but social programs were clearly what was requested. Through this process we have connected with some wonderful new people in the community.

Lessons Learned: There is a wide range of needs in our diverse Jewish community.

What It Takes: Money and the ability to work with congregations to help them through the assessment and application process, and then support them as they create the programming.

For More Info: Contact Carol Klein, Congregation Connection Program or Tracey Lipsig Kite, JHNC Coordinator
847-568-5200
JHNC@JFCSChicago.org
Name of Program: Kol Haneshama - End-of-Life Care Volunteer Program – Best Practice 2008
(Recipient of the Programming Award from the Association of Jewish Aging Services (AJAS).

Organization: Bay Area Jewish Healing Center (BAJHC), San Francisco, California

Description: Kol Haneshama is the end-of-life care volunteer program sponsored by the Bay Area Jewish Healing Center (BAJHC). Our primary training partner is the Zen Hospice Project and our primary site placement partner is the Jewish Home of San Francisco. As part of this pioneering project, we partner with the Jewish Home and local hospice agencies to provide spiritual and emotional support to residents who are at the very end-stage of life.

Kol Haneshama is a phrase from Psalm 150 and means “Let all that breathes praise God.” The motto of this innovative program of spiritual care is “Honoring the fullness of every soul.” Relationship is at the core of Kol Haneshama. The vision of Kol Haneshama is that any Jew, no matter their end-of-life-care choice, and regardless of their affiliation in the Jewish community, may have a Jewishly-trained end-of-life/hospice volunteer, if they wish.

There are no expectations about levels of religious observance, rather the focus is on our availability as a knowledgeable and compassionate resource. We also offer training to community members and employees from a diversity of agencies.

Surprises: One of the most interesting and unique aspects of this program is that staff of the Jewish Home and Spiritual Care Partners train together. This breaks down hierarchies and creates bonds between people with different kinds of commitments. For the Spiritual Care Partners, it means that they have mentors throughout the facility. For staff, it means they have a bond of trust as they work with the volunteers to provide this service to Jewish Home residents.

Lessons Learned: This can be a life-changing experience for the volunteers, both from experiencing the partnership collaboration and the regular time spent with people who are dying. Nuanced, multi-layered training contributes to volunteer effectiveness (i.e. in identifying different ways to meet the diversity of spiritual needs of the populations we serve, including those with dementia, mental illness, Russian speakers), self-care, and personal growth. Volunteer supervision and support is critically important in an ongoing way. Extensive planning conversations, buy-in, and advocacy from an advisory committee preceded the program’s launch.

What It Takes: Volunteers go through an intensive application and intake interview process before enrolling in the program. The rabbinic training team all have Clinical Pastoral Education training as well as direct client experience in serving those who are at the end of life; and each experienced the Zen Hospice Project training as a
participant before helping adapt the program for a Jewish setting and taking on a leadership role in the BAJHC-ZHP training itself. Our ZHP and Jewish Home training partners each have many years’ experience with both direct service and volunteer supervision around end-of-life care. The training supervisors have a deep knowledge of what is involved in being at the bedside of the dying, and are skilled at conveying tangible compassion including to the trainees. Our volunteers develop an amazing degree of trust in the training and in the trainers. This trust comes in part out of a sense of the trainers’ deep respect and compassion for the volunteers, and for the ultimate recipients of their care. In that spirit trainees are able to be present with the feelings that get stirred up in this setting; and respond when invited to reflect, even critically, as they are experimenting, role-playing, de-briefing, and learning this work.

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Name of Program: A Synagogue-Wide End – of - Life Initiative - Best Practice 2008

Organization: Congregation Rodeph Sholom, NY, NY

Description: In 2004, Rodeph Sholom, a large congregation in NYC, launched the End-of-Life Initiative: an ambitious and innovative project that aimed to change the synagogue culture with regard to end-of-life issues. The impetus for this endeavor came from congregants and clergy who recognized the need for the synagogue to offer people spiritual, emotional, theological, and practical resources to engage with these issues. Leadership also wanted to raise the communal consciousness, so that these issues were no longer unspoken.

Jewish Board of Family and Children’s Services and the Jewish Healing and Hospice Alliance of UJA-Federation of New York gave a generous multi-year grant which has supported this broad initiative. The clergy of this congregation gave their full support through teaching, counseling and preaching. Also vital to the creation and implementation was the dedication and leadership of lay people as full partners with the clergy. This is an ongoing initiative.

Content: (A Resource Guide on the evolution and implementation of this project is in development and will be available later this year through Rodeph Sholom.)

Key to the successful beginnings of this project was the development of a Planning Committee that included clergy and lay leadership, many of whom had been personally impacted by loss and were profoundly supported by their congregation. They wanted to make sure that all its members had access to this type of sacred and practical support.

The Planning Committee worked with a consultant to develop a focus group to explore attitudes, expectations, and needs of congregants. They also developed a strategy of outreaching to committee chairs and then committees to start the conversations about this initiative. Over an 18-month period, the planning committee developed a booklet entitled, Preparation and Consolation – A Jewish Guide to the End of Life which was distributed to all members of their congregation.

Program content includes:

- Educational Outreach – adult education, Shabbatons, study in committees, outside conferences
- Communal Support – systems of congregant to congregant support, [professionally led bereavement and other support groups], and Bikur Cholim
- Communication and Publications – newsletter articles, sermons, a Jewish guide to end-of-life], and advanced planning documents
- Resource Center – Library, 4 with wide range of materials including a binder of all the NCJH’s Outstretched Arm and other spiritual and practical resources, and website resources
**Surprises:**
The lay-clergy planning group was surprised to find how challenging it was to engage congregants in end-of-life issues and planning. For example, many people were resistant to taking the classes [which addressed advance directives, palliative care, financial planning and legal wills.] People who otherwise sign up for many of our adult education offerings were reticent to sign up for these classes. Though, ultimately the classes were well-attended, it was [often accomplished] through personal invitation and conversation. Community-wide forums on these topics, such as a Shabbaton and a dinner discussion on the Terry Schiavo case were, however, quite well-attended.

**Lessons Learned:**
While this continues to be one of the most important conversations to have within the walls of the synagogues, it often requires very gentle prodding on the part of those who are already committed to encourage others to join the conversation. It is also helpful to create multiple portals for people to enter and engage in these discussions in different ways and at different times in their lives.

Involving specialists from the various professional fields was very important in dealing with medical, legal, and financial issues. The participants were very appreciative of the opportunity to ask questions of experts, both about future issues as well as past experiences.

**What It Takes:**
First and foremost it takes the commitment of a clergy/lay team. Similarly, the lay people can be incredibly helpful in recruiting and encouraging congregants to engage these issues, get involved and utilize new resources.

It also takes work to identify who in the community or congregation can be co-teachers with clergy members. It is helpful to draw upon the expertise of medical, legal and social service experts within both the larger Jewish community and the congregation.

The commitment of the UJA-Federation’s Jewish Spiritual Care Task Force and the expertise within our JBFCS Healing and Hospice Initiative, Jewish Healing Center and Synagogue Consultation Program validated the importance of end-of-life issue, motivated us to take action and provided us with an important safety net in our beginnings.

**For More Info:**
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Name of Program: Jewish Hospice Network of Greater Philadelphia – New and Interesting 2008

Organization: Joan Grossman Center for Chaplaincy and Healing, JFCS of Greater Philadelphia

Description: The Joan Grossman Center for Chaplaincy and Healing has created The Jewish Hospice Network of Greater Philadelphia, a network of local hospices with whom we partner in order to serve the hospices’ Jewish patients and their families. Each hospice pays a yearly and hourly patient visit fee in order to receive the care we provide, which includes the services of our Hospice Rabbi.

To date we have 5 hospices in our network, with 4 others that are interested in joining when we have the resources to serve them.

We also provide:
- Consultation for rabbis, cantor, and other Jewish professionals.
- Community Education for synagogues.
- Programs and conferences that address End-of-Life care issues.

Content: Our services for our Jewish Hospice Network partners include:
- Visiting Jewish patients and their loved ones, regardless of affiliation.
- Bereavement support.
- Participation in each member hospice’s interdisciplinary team meetings.
- Participation in relevant staff training, offered by member hospices.
- Training for hospice staff about Jewish views on illness, death, mourning and related concerns.
- Participation in special events and programming offered by each hospice to their patients, families and staff members.

Surprises: - The work continues to be amazingly life affirming and affirming of the myriad ways people find meaning in “being a Jew.” The diversity is astounding! Chaplains provide critical peer support and de-briefing in periodic gatherings.

Lessons Learned: - Look for ways to keep the reporting and organizational elements as simple and consistent as possible.

What It Takes: - Chaplains that have specific, considerable hospice education and experience are needed for this very nuanced type of chaplaincy. Maturity and life experience really count!
- Chaplains need to have consistent communication with Hospice team members and administration.
- Regular “supervision” consultations with a trained chaplain are necessary for the well being of hospice chaplains.

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- A top-notch executive assistant is needed to assist the chaplain for the considerable amount of billing and other paperwork.

For More Info:  
Rabbi Tsurah August, Hospice Rabbi, taugust@jfcsphilly.org

Rabbi Elisa Goldberg, Director, the Joan Grossman Center for Chaplaincy and Healing egoldberg@jfcsphilly.org
Name of Program: Spiritual Care Services at JFCS: Palliative and End-of-Life Care - New and Interesting 2008

Organization: JFCS of San Francisco, the Peninsula, Marin and Sonoma Counties

Description: At one of the most difficult times for people, Seniors At Home, a program of Jewish Family and Children’s Services, can help support the lives of those who are failing or dying with a plan and services that address medical, psychosocial and spiritual needs. The Palliative and End of Life Care Program, which is designed to help relieve suffering and improve quality of life, is led by an interdisciplinary team of professionals and volunteers, including nursing specialists, care managers, clergy, caregivers, volunteer coordinator and specially trained volunteers, and a consulting physician.

This team can advocate for clients when working with their medical care providers. Since JFCS conducts comprehensive assessments and builds personal relationships with its clients, its care team is able to address important quality of life and treatment choices before illness becomes acute, while the client is still able to participate in making such decisions. When appropriate, the Palliative and End of Life Care Program will help facilitate the referral to hospice, and will continue to provide care for the client and family during hospice.

Spiritual Care Services at JFCS was created to address the emotional, psychological, and spiritual needs that arise for clients within our Palliative and End of Life Care Program. The fundamental values at the heart of our Palliative and End of Life Care Program are the mitzvot of Bikkur Cholim, or “Visiting the Sick;” Kavod HaMet, or “Honoring the Deceased;” and Nichum Avelim, or “Comforting the Mourners.”

While our Palliative and End of Life Care Program is innovative and responsive to contemporary needs, we look back to the Torah for our models in providing emotional and spiritual support during the dying process. Jacob prepares to die by speaking to each of his children and blessing them; God accompanies Moses up Mt. Nebo and does a kind of “life review” with him before burying him. A funeral in Hebrew is called a Levayah, which means “Accompanying.” In our Palliative and End of Life Care Program, we expand this notion of accompanying to include the dying process itself, helping our clients and their families navigate the emotional and spiritual issues that arise during this process.

Content: Spiritual Care Services at JFCS provides spiritual and bereavement support to JFCS clients of all faiths and backgrounds. We visit clients in our Palliative and End of Life Care Program at their home and support them during the various stages of illness and dying. We provide support for our clients’ family and friends during this time as well, offering a range of follow-up bereavement services for those suffering the loss of a loved one. We also welcome clients and their families to visit us in our offices.
Surprises: The majority of Jewish clients that we see are not affiliated with any formal Jewish organization. Many of these unaffiliated Jews would not initially think to request the presence of a rabbi during this stage in their lives. In fact, many of them have negative associations with rabbis and formal Judaism. Moreover, many clients associate rabbinic presence and spiritual support in fairly narrow terms – that is, they associate the rabbi with certain functions performed as opposed to the meaningful and relevant spiritual support that they might provide. As a result, these clients often decline a visit from the rabbi when it is initially offered to them.

Moreover, some staff within JFCS initially make this same association between a rabbi and the functions that he or she could perform – for example, offering blessings, reciting liturgy, performing funerals. It can sometimes take time for staff to recognize that spiritual care can be relevant and meaningful to people of many faiths and backgrounds, including those who aren’t overtly “religious,” and in many kinds of personal and family situations.

Lessons Learned: It is indeed possible to offer an experience of rabbinic and spiritual care that is more expansive than simply the functions that a rabbi can perform, one that is relevant to the lives of our clients and their families. It is possible to offer a view within the agency that reflects this more meaningful and dimensional experience. A shift in perception occurs once clients, families, and agency staff see the ways that spiritual and bereavement care can have a profound impact on peoples’ lives. As this happens, spiritual care can truly become integrated into the agency culture, and interdisciplinary teamwork, referral, and respect can flourish.

What It Takes: A successful Spiritual Care Services Program, which is truly integrated into the culture and workings of a social service and home care agency like JFCS, requires agency leadership and staff that trust that indeed dying is principally a spiritual event – and they want to support this discipline within the agency. It also requires a rabbi who is versatile and able to work with Jews from a very wide range of backgrounds. Such a rabbi would feel comfortable providing spiritual care to people of all faiths and backgrounds as well. It is helpful for a rabbi to have trained in the interfaith, medical-social model of care, in environments such as hospitals or hospices.

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Name of Program: The Shira Ruskay Center (SRC) - Updated 2008

Organization: Jewish Board of Family and Children’s Services, NY, NY

Description:
- This program, staffed by social workers and a rabbi, provides direct assistance to people faced with serious or life-threatening illness as well as loss, within the context of a Jewish culturally and religiously informed environment. Seen at home, in hospital or at our offices, clients may receive counseling, support, advocacy, spiritual counseling, information and referral to resources. Services are provided at no fee.

- Bereavement support groups organized according to the type of loss—spouse, parent, child etc. are co-lead by a social worker and a rabbi.

- Assistance to synagogues, Y’s, JCCs and other community institutions to increase their ability to function as mutually supportive caring communities with particular attention to encouraging volunteerism and lay leadership. The SRC provides program planning, speakers and workshops on end-of-life planning and care. Information and resources are provided for clergy, staff members and community leaders. To assist in meeting the needs of congregants and members.

- “Doula to Accompany and Comfort Program”, the only non-sectarian Shira Ruskay Center program, trains volunteers to serve seriously ill people at the end-of-life, especially those with limited available supports. Doulas provide comfort, companionship, emotional, spiritual and social support as well as advocacy. The training pays significant attention to cultural differences and to spiritual needs.

Content: The program serves the Jewish community in a culturally and religiously competent manner. It addresses the needs of all segments of the Jewish community, affiliated or not, while paying special attention to spiritual needs (defined broadly) as well as the needs of distinctive populations whether émigré or Ultra-Orthodox.

Surprises: The SRC is a Regional Care Center of the Jewish Healing and Hospice Alliance of UJA Federation of New York as are FEGS and WJCS. Each of the three sister Jewish family agencies serves a different geographical area in NY Metropolitan area. A very effective, cooperative collaboration has been developed among the three agencies who meet regularly to share their experiences. Staff education programs and systems and statistical reporting programs are only some of the areas of collaboration. The SRC trained a Doula for WJCS and also trained FEGS staff so that FEGS could develop its own Doula program in Nassau County. Our collaboration allows for an easy flow of referrals for clients with multiple family members across regional lines. We all treasure this opportunity to work with one another. It enhances the services we all provide.
Lessons Learned: We have found that developing a consistent flow of client referrals is a difficult task. The synagogues have not proven to be a significant source of direct referrals, and hospital staff are frequently too overwhelmed to consider referrals to non-essential services when making home care recommendations. Additionally, although always servicing the five boroughs of NYC from our Manhattan based office, we have learned that to more effectively serve the individual communities in NYC, we need to be community based. To that end we have so far, established two additional site offices across the city and hope to ultimately have five site locations. Our site offices allow for more personal relationships between our staff and the community providers, as well as an increased cultural sensitively and knowledge of the local community.

What It Takes: The UJA/Federation End-of-Life Care Task Force, consisting of lay and professional members, worked slowly and carefully to educate the lay membership so that they understood the totality of unmet needs, including spiritual needs, of those trying to cope with serious illness. This groundwork provided the necessary initial financial support as well as the encouragement of collaboration and careful planning that resulted in our SRC program. Going forward, we are always seeking out new funding streams including private donors, philanthropic foundations, and potential government funding streams.

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Programs Addressing Serious Illness and End-of-Life

Name of Program: End-of-Life Services/Hospice Program - Updated 2008

Organization: Jewish Healing Connections, a program of Jewish Family & Children’s Service of Greater Boston, Waltham, MA

Description: This program is a collaboration between JF&CS Jewish Healing Connections (JHC) and 8 area hospices in the Greater Boston area. JHC provides rabbinic support for unaffiliated Jewish patients facing life-limiting illness, and their families.

Content: Many hospices do not have access to a rabbi. The chaplain serving hospice patients is usually of the Christian faith, and most hospices are not able to pay additional fees for rabbinic services. If an unaffiliated Jewish patient or family member requests a chaplain, they usually wish to be visited by a rabbi. In order to meet this need, JHC provides visits by the JHC rabbi, at no cost. The rabbi sits with patients and families, prays with them, offers the final confessional prayer, if requested, (the vidui), and officiates at funerals. The rabbi also provides training on Jewish rituals surrounding death and dying for hospice volunteers, and participates in hospice interfaith memorial services.

Surprises: Unaffiliated Jewish families who request the presence of a rabbi may not only experience individual healing, but may also experience a sense of healing and re-connection to the Jewish community.

Lessons Learned: Hospices are appreciative of this free service from the Jewish community. However, Jewish healing centers must continually market this service, as hospices experience turnover and new staff may not be aware of this service.

What It Takes: Fundraising efforts in the Jewish community to raise awareness of the need for rabbinic support for unaffiliated Jewish patients at the end of life, and their families.

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Name of Program: M’kom Shalom: A Place of Peace – Best Practice 2008

Organization: New York Jewish Healing Center, a program of the JBFCS, NY, NY

Description: A monthly meeting for Jews who have lost a close one to suicide, a ‘safe, supportive healing network’ founded back in December 1999. Generally draws 12-16 people each month, all of whom lost a relative or close friend to suicide, whether in recent weeks or many years ago; roughly 8-10 are returnees and the remainder new participants. I – a rabbi and a social worker by training – have co-led this group with a lay volunteer, but we are now hoping to hire a mental health professional as a paid co-facilitator.

Content: Like any support group, M’kom Shalom follows the needs and concerns of group members, but with an underlying (and expressed) assumption that we must both grieve and heal together. Recurrent, common issues such as guilt, stigma, shame, the loss of close friends who cannot handle the tragedy, disbelief, and much more are approached in a safe and understanding environment. From time to time, Jewish teachings are integrated into the discussion, but generally in a very gentle and understated manner.

Surprises: Jews from Florida, Maryland, Israel, and elsewhere have joined this group, which is apparently quite unique. Routinely, we have had very traditional, ‘Orthodox’ Jews as well as Jews of every other denomination, together with secular Jews and several non-Jews of different ethnic, racial, and socioeconomic groups who have asked to join, since support for suicide survivors is limited and the healing long-term and complicated. Participants have ranged in age from 17 to 89. What is most stunning is how a deeply intimate and connected ‘extended family forms during the 90 minutes, with participants often hugging, lingering, and exchanging phone numbers at the end of a meeting.

Lessons Learned: There are many; to name just ten:

1. Suicide probably affects the Jewish community in roughly the same degree, and for generally the same causes/factors, as the general community;
2. The Jewish community, like the general community, has trouble facing/naming/addressing clinical depression and bipolar disorder, schizophrenia and other mental illnesses, substance abuse, job loss and socioeconomic status plunge, and more. The stigma and insult experienced by people affected by these and similar challenges further compounds to their isolation and despair.
3. There are some particular issues that might be said to be “Jewish” in nature: the traditional halakhah that a suicide may not be buried within a Jewish cemetery; the legacy of the “survival imperative” in Jewish history, particularly since the Holocaust; what “suicide” bombers have come to mean to Jews and Israelis; and more.
Spiritual Growth And Support Groups

4. No resource is as helpful as a sympathetic, understanding ear of a peer who has 'been there', particularly in trying to deal with crippling and relentless guilt and shame.

5. The standard group rules of punctuality, time management, self-monitoring, speaking from the “I,” confidentiality, and the freedom not to speak must be laid out each meeting, but with the right tenor, this group very much runs itself. Every now and then someone needs to be reminded of some rule, but generally, the group is in great measure, self-facilitating.

6. New participants, there for the first time, need to be given extra opportunity to speak, which they may or may not utilize.

7. Though we do not charge, a relatively simple attempt to raise money from the group this Winter (2007-8) yielded $ 2,500, including two large gifts from participants.

8. Though it is most natural for survivors to search for why s/he did this, and that can be healthy and important, ultimately, only the one who took his/her life truly could tell the complete story. Both parts of the previous sentence need stressing!

9. Although for our closed, time-limited groups, defining participants by the relationship (loss of spouse, loss of parent, loss of sibling, etc.) is critical, with this group dealing with traumatic, and often complicated grief/loss, the variety of relationships has emerged as a special asset. Thus, e.g. a middle-aged woman whose husband took his life is helped by the participation of adults who lost parents to suicide.

10. It was of great value to me to consult, back in 1999, with the leader of a similar group run by the Samaritans, to gain from his experience, insights, and wisdom.

What It Takes: Stick-to-itiveness/Uncompromising commitment of the sponsor – the first two months there were just two of us in the room;
Special outreach to the mental health and rabbinic communities;
Some courage and belief in the process and the facilitator’s general competence;
Availability to respond to inquiries and collateral issues/needs as time goes on.
Many people require some individual attention along with the group support.

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Healing Through the Holidays
Chanukah: A Candle In the Darkness and Passover: Freedom of the Spirit.
Based on holiday bereavement workshops of the National Center for Jewish Healing, run by Rabbi Stephanie Dickstein.

The Living Room at Jewish Family Service (JFS) of Bergen County in Teaneck, in cooperation with JCC on the Palisades in Tenafly.

As we all know, the holidays are a difficult time for someone mourning a loss. It does not matter if a loved one died three months ago, three weeks ago, three years ago, or three decades ago—there is always some void at holidays times. The purpose of this program is to provide the opportunity for those who feel that sense of loss at the holidays to find new meaning and comfort in the holiday, and to be able to explore and express their feelings in a safe, professionally-guided environment with others who are bereaved. Many people do not feel they need an ongoing bereavement group, but find meaning in an occasional program like this to address their feelings of loss. Participants in these programs have ranged in age from early ‘40s to ‘80s, and have included widows and widowers, children, and siblings who experienced a loss.

This is a series of holiday programs for bereaved Jews. The goal is to provide those who are at any stage of bereavement an opportunity to explore and experience themes of the holidays as they relate to comfort and the grieving process, through music, prayer, study, and group discussion. The ninety-minute program is comprised of two parts. The first is a ritual and study component, led by a rabbi; the second is a bereavement group facilitated by a JFS clinician. Depending on the number of participants, multiple groups and clinicians are utilized. This program was done in collaboration with the JCC, and involved staff from both JFS and the JCC.

When participants came into the room, holiday refreshments were available and they had to opportunity to socialize with each other. The first half of the program, led by a rabbi with the participation of staff clinicians and the attendees, included music, readings, and ritual. Participants joined together in song, prayers and readings related to the holiday.

The ritual for Chanukah was candlelighting, since the program took place on the sixth night of Chanukah. For Pesach, the ritual was four cups and foods based on themes of Cleansing, Brokenness, Memory, Renewal, and the Future. Each section had readings and songs related to the theme, as well as food. For each program a booklet was created and distributed to each participant, including songs, readings, and the text for study.
The brief text study was interactive, to help break the ice and encourage participants to begin to express their own feelings and experiences as they related to the themes of the text. After the text study and a song, the participants separated into bereavement groups for a half hour, facilitated by a JFS clinician. The groups then came back together as one large group, for a concluding reading and song. A group of attendees stayed for approximately one half hour after the end of each program, providing the opportunity for informal conversation with each other and with the staff.

Set up Notes:
- Holiday Refreshments, tea and coffee set up on periphery for when people came in
- Table with sign in sheet and information about other Healing Center programs
- Chanukah: chairs in a circle, tables in back with menorahs. There were Chanukah decorations throughout the room, and the tables were decorated with Chanukah confetti, gelt, and dreidels.
- Passover: tables set in a U-shape with chairs, with matzah (egg since it was already Rosh Chodesh Nissan), grape juice, parsley, Pesadik chocolate [we did chocolate for sweet memories], and paper goods.
- Flowers on all tables
- Booklets at every place, with extras by the front table for latecomers

Surprises: The biggest surprise was the large turnout—there were 30 participants in the first program, 25 in the second. Many more people came than had RSVP’d.

Lessons Learned:
- Since you do not know how many people might show up, it is good to have at least two clinicians present to facilitate multiple groups if necessary. For the Chanukah program we actually could have benefited from three, given the larger than expected attendance.
- For the Chanukah program, the tables with the menorahs should be set up right where the participants are sitting, instead of in the back of the room. The older adults in the group had difficulty walking to where the lighting was taking place, and it was a bit crowded. The set up used for the Passover program, with participants sitting at tables set in a U-shape, was more successful. Also, it would be good to incorporate ritual activities throughout the first half of the Chanukah program, similar to the Passover program. Having concrete ritual things “to do” at their tables interspersed with the songs and readings made the participants more comfortable and engaged.
- It is important to have either a large enough room or the potential to use separate spaces for the groups, so there is not too much noise interference when the multiple bereavement groups are meeting.

What It Takes: Significant pre-planning and organization, advertising, and attention to detail, and good staff who can collaborate well.
Spiritual Growth And Support Groups

You need a rabbi who has some experience with bereavement and the ability to connect to that community, and at least two clinicians with expertise in running a bereavement group. It is a great way for a healing center Director to work with his or her own agency staff in a different way—clinicians that may not normally run groups might appreciate the opportunity to do a one-time group. We had wonderful interdepartmental collaboration, between our Clinical Services Staff and our Senior Services Staff.

It is also a perfect opportunity for community networking and interagency collaboration. We worked very closely with our JCC, and this became the first of a number of collaborative programs between that JCC and The Living Room at JFS. Also, it is a good opportunity to connect with the synagogue rabbis in the area. For advertising, in addition to the newspapers, e-mail lists and other regular venues, flyers were sent to all of the congregational rabbis in the area. Several rabbis personally sent the flyer with a note to congregants who had experienced a recent loss. The professionals who run bereavement groups in the community also distributed program information to their group members. The JCC advertised the program to their members as well.

Follow-Up: For this type of program, it is important to have information about bereavement groups in the community available to the participants at the program, and ideally to have the potential for ongoing follow-up at your own agency. Some people came to these programs who had never attended a group, and wanted and needed more. JFS received a couple of requests for a young widow/widowers group which came out of this program, and was able to provide a six-week ongoing support group in the weeks following the Passover program.

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Name of Program: Kumi Ori: Rise and Shine -- Morning Walk and Prayer/Meditation Group
Updated 2008

Organization: Westchester Jewish Community Services Healing Center

Description: We meet at a different woodsly location in Westchester each session (every other week in fall and spring), beginning with a short meditation, prayer, or song before taking a brisk 60-minute walk together. Sometimes we walk in silence, having been offered a kavannah to contemplate during the walk. Sometimes our walks are more social. We conclude each walk with blessings for the day.

Content: The walk itself is the heart of the program, though the kavannot/meditations/prayers/songs and personal sharing frame the experience at beginning and end. The Torah portion, an upcoming holiday, or the sefirat haOmer might all be brought to bear on the content of the introductory meditation/kavannah in addition to prayers like Modeh Ani or offering up our own morning blessings. Before holidays, we will share our personal kavannot or prayers. After holidays, we will share our experiences. After our walk, we will conclude with a blessing for the day and, typically, a song.

Prior to the High Holy Days, we do a special labyrinth walk. By virtue of a labyrinth being a slow, contemplative walk, we are able to invite people in who may not be able to keep up with the speed of our usual walks.

Surprises: Despite our best intentions to read maps, we have gotten lost on the trail more than once. This has turned out to be a wonderful lesson in faith and trust in ourselves and each other to get us back to the starting place safely.

Lessons Learned: Bringing people together in the out-of-doors is healing. People needn’t be overtly suffering to experience the healing power of nature; and those who are suffering find a diverse community of fellow Jews who are choosing to infuse their early mornings with Jewish prayer, ritual, and the great outdoors.

What It Takes: The willingness to start your workday at 7:00 AM! To find appropriate trails (without parking fees). To be willing to get lost and stay calm. To photocopy sheets that vary from week to week with different readings, kavannot, songs, prayers, etc. To be able to read the bleary-eyed group early in the morning to sense if silence or social time (or, typically, a combination) is more appropriate for that day’s walk!

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Name of Program: Meditation and Middot – Updated 2008

Organization: WJCS (Westchester Jewish Community Services) Jewish Healing Center

Description: This four-session workshop combines contemplative practices and Mussar/\textit{tikkun middot} ("refinement of soul-trait") practice, with the goal of learning how to act wisely with compassion and justice. We include study of texts related to particular \textit{middot}, qualities of heart and of behavior. Between sessions participants are offered texts to study (in paired hevruta) to sustain their practice and deepen their sense of observing change in themselves.

Content: The first session of each “semester” is a general introduction to the history of mussar and an introduction to the featured middah for the month ahead. Meditation, chanting, text study, meeting with one’s chevruta partner, and setting an intention for one’s work with that middah are all contained in the first session. Text study with questions for contemplation and suggestions for further practice are given out – with different materials to sustain the practice for each week. Students are encouraged to speak or meet with their chevruta once a week to discuss their practice/pitfalls, to receive encouragement to meet their intention, perhaps to study a text together, but most importantly, to reinforce the presence of the middah at the forefront of their experience for the week – perhaps to reflect on their week through the lens of that middah.

Subsequent sessions beginning with a group check-in on where the practice took each participant in the previous month, how chevruta was going, whether the texts were useful to the practice, what practices they took on (meditation/prayer/journaling/chanting). Then the next middah is introduced, and we start again…

Surprises: How this practice works to really change people’s relationships with others and with God.

Lessons Learned: Transformation happens through practice and commitment.

What It Takes: A LOT of preparation time to get the texts together.

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Name of Program: Rosh Hodesh for Women Living with Illness – Updated 2008

Organization: Joan Grossman Center for Chaplaincy and Healing of JFCS - Philadelphia, PA

Description: Monthly spiritual support group for women living with illness explores the emotional and spiritual challenges of living with illness and looks for ways to find hope, meaning, and wholeness. Group members celebrate renewal and explore topics of common interest in the context of the spiritual themes of the season. Participants share stories, learn about Judaism, and have fun. Lead by a Jewishly knowledgeable mental health provider who is also a survivor of a serious illness.

Content: Groups utilize a variety of tools for exploring spiritual issues including art, music, text study, and discussion. The themes of Rosh Hodesh and the cycle of Jewish time and the holidays become the focus for personal exploration. Participants often discuss themes of living with limitations, quality of life, and learning to focus on what is truly meaningful. It focuses on renewal and strength.

Surprises: This group has been successful because the focus is on learning about spiritual resources on Judaism and not only processing their experience of illness.

Lessons Learned: Attendance is often low because the women in the group are often sick. We found that we need a group of about 12 women to consistently have 5 or 6 participants per meeting. The group is in hiatus and a new cycle will start in the future.

What It Takes: A Jewishly knowleagble survivor with counseling/mental health training. Needs to be a celebrator of Rosh Hodesh and have an understanding of the resources in the Jewish holiday cycle. It takes about $5,000 for PR materials and outreach, administration and some stipend for the facilitator. This includes a staff person who coordinates publicity, does intakes, and takes care of all other practical aspects of the program.

For More Info: Director - Rabbi Elisa Goldberg
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Name of Program: Drop-In Spiritual Support Group For Those Who Have Lost A Loved One


Description: Monthly group available to all who are bereaved on a drop-in basis. Takes place in a different synagogue each year, and is led by a psychologist and a clergy person from that synagogue.

Content: Use of many tools of Jewish healing in each session -- music, prayer, study, use of text to stimulate discussion, awareness of blessings, tie-in with themes of holidays

Surprises: How attendance varies -- for three years we had at least 10 people at each session; this year we have many fewer.

Lessons Learned: Many people prefer a group that meets more frequently. Need to be flexible and change the format to meet consumer demand. Some groups are time-limited others are drop-in.

What It Takes: A large amount of outreach, largely through a mailing list and synagogue list serves. Providers who are committed to offering this type of service in the Jewish community

For More Info: Carol Hausman, Ph.D.
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Name of Program: The JACS* Teen Network – Best Practice 2008  
(Jewish Alcoholics, Chemically dependent Person and Significant others)

Organization: JACS, a program of the JBFCS, NY, NY

Description: The JACS Teen Network is made up of teens interested in prevention and education regarding substance abuse in the Jewish community. The Teen Network hosts events and retreats in which Jewish teenagers come together to express their concerns about the abuse of alcohol and drugs and to learn how to deal with these issues. Many have been affected by alcoholism and drug abuse, either personally or through a family member or friend who is abusing.

Content: The JACS Teen Network offers the following;
- Encouragement, support and guidance for teens in recovery or who need to get into recovery
- Support for teens who have grown up in a home with an addicted or alcoholic family member, whether recovering or not.
- Weekend retreats for mutual support, connection to Judaism, and interaction with longtime JACS members.
- Workshops on self-esteem, self preservation, peer relations, the effects of substance abuse and interventions.
- Information for teens concerned about the spread of substance abuse among their peers.

Teens are also trained as public speakers and serve on a Speakers’ Bureau to day schools, synagogues and other venues where they can help break the silence and support prevention and early intervention.

Surprises: The power of a Jewishly infused 12-step peer group to help teens and young adults get and stay sober and get on track with their lives. The first groups of teens has now grown into our Young Adults Network, who have become the own affinity group. For this age range (18-26).

What It Takes: Dedicated lay leadership, support of an organization to assist with fundraising and administration and very committed professional staff who understand and has worked the 12-steps and can teach this and other empowerment skills to youth.

For More Info: Shaon Darack, JACS Program Director  
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Name of Program: Substance Abuse in the Jewish Community – Best Practice 2008

Organization: Deutsch Family Shalom Center, Temple Chai, Phoenix

Description: With support from a grant from the Jewish Community Foundation, the Shalom Center planned and implemented a conference on Substance Abuse: A Jewish Response with Hope and Compassion. This program featured Rabbi Mark Borovitz, the spiritual leader of Beit T’Schovat, and three representatives from JACS (Jewish Alcoholics, Chemically Dependent Persons and Significant Others). We also held a round-table focus group session with professionals and developed an action plan based on conference discussions. (2006)

Content: The objectives and content for this program included:

1) Organizing a coalition of professionals and volunteers to develop a compassionate and effective response to substance abuse in the valley-wide Jewish community.

2) Conducting a community-wide educational conference, followed by focus-group discussions. Approximately 235 individuals attended our conference and about 70 professionals, including psychologists, physicians, clergy, and community leaders attended the round-table, focus group discussions.

3) Brainstorming methods and assessing community resources needed to identify the scope of alcohol and chemical dependency among Jews in the valley-wide community. The Development committee and attendees at the focus groups identified a list of volunteer leaders and a resource inventory as the foundation of future needs assessment work.

4) Forming a committee to begin implementing guidelines developed at the conference. Five focus groups were created in the areas of: individual treatment and support; family issues; prevention/education; Jewish professional response; and 12-step response. Each focus group addressed the resources available today; who needs attention and what are the unique needs; what is lacking in our current Jewish response; and what is the best way for us to assess the community’s needs in this area.

5) Developing an action plan for education and support of Jews throughout the valley, including our youth, alcoholics and addicts in recovery, family members, specialists in recovery, our clergy, and community members who care. An action plan is presently being developed using as input conference discussions, commitment forms, a resource inventory created at the conference, and feedback from the JACS group.

Surprises: Our youth group leaders were very interested in having the conference speakers address the teens within our community. We added this to our conference agenda and they were extremely receptive, as they listened to Rabbi Borovitz and the JACS representatives. A JACS meeting was held after the conference, which was very well-attended. JACS meetings began in the community shortly after the conference and have been attended by approximately 12 to 25 individuals, even
before our publicity has begun. A community-wide dialogue has also re-introduced a parent-oriented support group that failed when it was attempted several years ago. We were also pleased to learn that participants were eager to be part of a list of Jewish persons willing to talk to others about addiction issues and we will make this list available to clergy and therapists. Furthermore, the synagogue will now provide a location for A.A. meetings.

**Lessons Learned:** The effects of substance abuse in the Jewish community are very far reaching, affecting Jews of all ages and backgrounds. The issue has been notably neglected in the Phoenix community, with denial and shame contributing to the problem. We must face the challenge and begin to move toward acceptance of substance abuse as a problem that affects individuals, families, and our community.

**What it Takes:** Funding is necessary to bring in speakers from around the country. Strong professional leadership and active committee volunteers are also very important for planning, publicity, relationship building, and follow through of goals and objectives. This committee needs to compassionately reach out to all areas of the community…but we learned that if you plan it, they will come. The need for this programming is definitely there!

**Addendum:** A JACS group is now being run in the community and an alcohol free Seder was very well attended this Spring 2007.

**For More Info:** Sharona Silverman, M.P.H. Deutsch Family Shalom Center Temple Chai, Phoenix 602.971.1234 ext. 280 shalomcenter@templechai.com
Name of Program: Spiritual Retreat for Jews in Recovery from Alcoholism and Chemical Dependency and Significant Others - Updated 2008

Organization: JACS [Jewish Alcoholics, Chemically Dependent Persons and Significant Others], JBFCS, New York, NY

Description: Semi-annual weekend programs are held at a fully kosher facility out of the metropolitan area for recovering Jewish addicts and their families/loved ones at which the spiritual resources within Judaism which may strengthen and enhance their recovery are explored. Attended by Jews across the religious spectrum from secular to Hassidic, Shabbat is celebrated at communal meals and prayers - two services are run: traditional and egalitarian - and open discussion sessions on topics related to issues around spirituality and recovery are held throughout.

Content: Planned and largely run by adult volunteers within the organization who select specific themes for each weekend and then find others to lead and speak at the large and small group meetings. Rabbis attend and interact with participants to provide resources and support as well as speak about topics such as reconciling the 12 Steps of Alcoholics Anonymous and Narcotics Anonymous with Jewish tradition. Rabbinical and cantorial students from all denominations attend as part of an educational and training program.

Surprises: The most powerful aspect of the weekend is the manner in which all participants, representing an age range of 18 to 85 as well as multiple levels of religious observance, interact together. It is warm, non-judgmental, open and accepting with innovative ways of handling sensitivities such as touching or hugging.

Lessons Learned: Attendance has grown to about 250 people each weekend but the balance between Orthodox/Hassidic and the more liberal in observance has tilted towards the former. As trust and credibility took time to be established in the traditional community it is equally important to maintain an active outreach to other segments of the community.

What It Takes: An active, engaged volunteer committee supported by administrative and policy oversight by the professional leadership of JACS.

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Jewish Healing/Spiritual Care Programs: Best Practices  
Updated April 2008  
www.ncjh.org  
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Name of Program: Chemical Dependency Program of Jewish Healing Network of Chicago – Updated 2008

Organization: Jewish Healing Network of Chicago (administered by Jewish Child & Family Services, in partnership with CJE Senior Life, the Chicago Board of Rabbis and Jewish Federation of Metropolitan Chicago)

Description: The Chemical Dependency Program of Jewish Healing Network of Chicago seeks to provide the same supportive services to those struggling with issues of addiction that are available to people dealing with other illnesses. We offer assistance to people who are in the process of determining whether a problem exists, making assessments, finding spiritual and social services on the path to healing and recovery.

Contents:
- Spiritually based Recovery programs with a Jewish connection including:
  - An annual Spirituality Day to which the Jewish Recovery community and anyone struggling with alcohol, drugs, and other addictions and their family members are invited for discussion, sharing and fellowship.
  - An annual Recovery Seder which provides an opportunity to explore and deepen the connection between finding spirituality in Pesach and one’s Recovery program.
- Assessments
- Information and referral
- Support groups for family members:
  - Living With the Alcoholic/Addict: Finding the Path of Hope and Recovery
  - Substance Abuse in the Family?
- Prevention services
- A community resource library
- Support to the community in starting and sustaining 12 Step Torah groups
- Maintain a list of 12 Step groups held in synagogues throughout the area – this list has consistently grown.
- Starting a speaker’s bureau to get people in Recovery speaking about their experiences from the bima.
- Training for a wide range of staff on recognizing and responding to addiction issues.

We also produce the following publications:
- HELPING A FRIEND WHO IS USING ALCOHOL & DRUGS: It’s a matter of life or death
- Chemical Dependency & the Jewish Community: Yes, it is our issue too!
Surprises: I suppose we should not have been surprised by the tremendous amount of denial in the Jewish community. But it is there. Also there have been times when the turf issues and denominationalism of our community have gotten in the way of our efforts. But we also have been touched by the gratitude of those whom we have touched and helped. We have raised the profile of addiction and recovery issues in the Chicago Jewish Community.

Lessons Learned: One person, no matter how talented, cannot do the job alone. Also we can find creative ways to get out our PR as well.

While members of the Recovery Community want programs that are “Recovery only” they are not always so willing to run them, which leaves agencies in a quandary – how to provide programs that are run by staff, not people in Recovery, that still feel safe to people in Recovery.

What It Takes: Persistence, commitment, patience, lots of homework, and a constant awareness that that the issues are ongoing. Also increased staff and funding. We are hoping to hire a second person to focus on teen addiction issues.

For More Info: Marcy Cohn, Chemical Dependency Specialist 847-568-5200
Or Tracey Lipsig Kite, Director or Rabbi Joe Ozarowski, Chaplain, Jewish Healing Network of Chicago 847-568-5200 JHNC@jcfs.org
Name of Program: Addressing Mental Health Issues in the Jewish Community – New and Interesting 2008

Organization: Deutsch Family Shalom Center, Temple Chai, Phoenix

Description: This goal of this project is to develop and hold a community-wide conference to increase awareness regarding our need to address mental health issues openly and to provide community members with specific resources and guidance. This would be accomplished by creating a steering committee; developing an assessment tool for clergy, educators, and synagogue administrators; synthesizing the responses toward developing an outline of the conference; and organizing a full day conference toward:

1. increasing awareness of the prevalence of mental health issues;
2. promoting community-oriented programs and services currently available within the Jewish community;
3. sharing resources among attendees;
4. identifying gaps in service within the community and taking steps to develop needed resources.

Content: A full-day conference is being developed based on our assessment of needs and is being held in May 2008 open to clergy, educators, professional and lay leaders, psychotherapists, and mental health consumers throughout the community. Keynote lectures include Rabbi Richard Address of the Union of Reform Judaism Department of Jewish Family Concerns. Ten workshops (participants will choose 2) will be offered during the day on topics including mental health as we age, psychopharmacology, coping with addictions, living with depression, and spiritual teachings on emotional health. The program will close with a Healing Circle of music and prayer.

Surprises: We are very pleased with the caliber of speakers for the conference. They have great passion for the subject and are eager to share their time and expertise without receiving compensation. They are assisting in the marketing of the conference and are always available for suggestions and advice.

Lessons Learned: Lessons that have been reinforced in this process include beginning early; utilizing volunteers on a committee from different backgrounds, professions, and affiliations; and marketing the program through many different venues (face-to-face, emails, newsletters, phone calls, articles, etc.). Our Mental Health Committee members played a vital role. They came to the meetings monthly as it was an opportunity to receive support and camaraderie among kindred spirits who were either working in the field or challenged by the issues of mental health and illness.
What It Takes: It takes a supportive community of professionals to work with and a committee of passionate volunteers.

For More Info: Contact Sharona Silverman, Director, Deutsch Family Shalom Center, Temple Chai ssilverman@templechai.com 602-971-1234
Name of Program: For Our Daughters (in Hebrew Lamed, bet, nun, vav, daled)  
Means both “For our daughters” and “To build” - New and Interesting 2008

Organization: Jewish Family Service of Metrowest, MA

Description: A dual program for 5th and 6th grade girls and their mothers. In partnership with Multi-service Eating Disorders Association we are developing a Jewish Guide to their 4 session Curriculum, “Building Body Confidence” While the girls meet with two facilitators (social worker and rabbi) the mothers meet in their own group with two facilitators. Mothers focus on raising resilient girls, using Jewish resources to enhance their parenting skills, learn about eating disorders in the Jewish community, warning signs, and best practices in preventing the same in their daughters. Workshops take place in synagogues. We work closely with youth and family educators and the religious school principals to implement this program in their community.

Content: Three 90 minute workshops for girls  
Three 90 minute workshops for Moms  
1 community meeting for youth and family educators

Surprises: How compelling this topic is for the mothers. They have an intense need to talk about parenting emerging adolescent daughters and use the groups to deal with their own issues around body image and food.

Lessons Learned: Jewish Healing model can be applied to parent education: mental health professional and clergy person working together to integrate best practices with Jewish spiritual component

What It Takes: Funding for staff. Expertise in both eating disorder prevention and treatment and parenting education; Strong partnerships with synagogues; Time intensive to create integrated curriculum

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Name of Program: The Twin Cities Jewish Healing Program Email Newsletter

Organization: The Twin Cities Jewish Healing Program, Minneapolis, MN

Description: A quarterly email publication for health and spiritual care professionals in the Twin Cities, MN. This email newsletter is designed to educate hospital, nursing home and hospice staff of the needs of Jewish patients, as well as resources available for both patients and providers. It also serves as a reminder of The Twin Cities Jewish Healing Program’s on-going services.

Content: Information about Jewish holidays, traditions/rituals and perspectives on Jewish healing.

Surprises: The health care community is eager to learn about Judaism for purposes of serving Jewish patients as well as for personal familiarity with the Jewish religion.

Lessons Learned: Keeping the text to a single-page format with an attachment containing pertinent supportive Jewish material makes the information accessible.

What It Takes: An updated email mailing list, knowledge of the Jewish tradition, awareness of the needs of health care professionals who are serving Jewish individuals and their families.

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