We dedicate this issue of Sh’ma to the life and work of Debbie Friedman, z’l, whose music has inspired hopefulness in the face of despair and perseverance in the face of challenges that embattle the spirit. Much of what appears in these pages touches on Debbie’s gift for creating music and deep connection. We explore the power of prayer — in particular, the Misheberach, the prayer for healing. We also look at ritual and its capacity to effect healing, at strategies for maintaining a realistic sense of hope in facing illness or any number of challenging situations, and at the relationship between hope and suffering. We trust that this issue will inspire reflection of a deep sort and offer an opportunity to consider how we assess the measure of a life. Sh’ma greatly appreciates the generous contributions of the Opaline Foundation and the Kalsman Institute on Judaism and Health at the Hebrew Union College–Jewish Institute of Religion in Los Angeles, sponsors of this issue on health, healing, and hope. — S.B.

Prayer and the Courage to Heal

JULIE PELC ADLER

This morning I received a text message from my Aunt Linda saying, “I am doing well… love being home after three weeks in the hospital and rehab.” I almost replied, as if on rabbinic autopilot, “I’ve been praying for your recovery,” but instead wrote, “I’ve been thinking of you a lot! You’re so strong!” Some might argue that my aunt was able to recover from the infection in her hip replacement, to heal from the surgeries to remove the new hip and clean the prosthesis, and to begin rehabilitation again because God heard the prayers of the many individuals and communities praying for her health and healing. But then, what about those who don’t have the strength or courage to persist — those whose infections, diseases, or disabilities pressed them past the point of healing? Does God deem them less worthy of renewed health? Do their families and friends pray less zealously? Aunt Linda, by her actions, not by her words, expressed gratitude for the prayers that sustained her. I am not sure what statements like “Great job!” or “You are so brave!” would have meant to her. In essence, prayers for healing can be transformative. But they’re not magic; I do not believe that prayers alone can heal.

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Julie Pelc Adler
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In the Digital Edition

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Book Review by

Jason Weiner
When We Pray, We Are Talking to God

DEBORAH KRAM

In the last years of his life, my paternal grandfather would repeat a particular teaching to each of his grandchildren whenever we talked with him. After his death, we realized this was not forgetful behavior on his part, but that he had left each of us with a special message. Mine was: Tefilah b’li kavanah, k’guf b’li neshamah, prayer without intention is as a body without a soul. I have ruminated on and struggled with my grandfather’s departing message throughout my adult years. While I have embraced Torah study with unbounded enthusiasm, embracing the associated joys and challenges of wrestling with text, my mind and heart work appreciably harder at connecting with God through prayer. Perhaps this is due to the realization that when we study Torah, God is in conversation with us, but when we pray, we are talking to God. The classic dialectic of placing one’s humble human self in intimate conversation with majestic God has led me not to complete discouragement or abandonment, but to a continual struggle to engage fully.

In times of need, beseeching God on behalf of others presents no obstacle in my prayerful intentions. Godly praise and thanksgiving come without hesitation. The siddur offers meaningful scripts of poetry and prose to express my awe and gratitude. But I am repeatedly challenged when the focus of my petitionary prayer is my own self. As I have faced some of life’s more dramatic scenarios, I’ve begun to conquer my reticence to pray meaningfully on my own behalf without being overwhelmed by a sense of audacity.

The weekday Amidah, the pinnacle of the prayer service, opens with blessings of praise. It delineates our relationship to God and then moves from blessings of a spiritual, ephemeral nature — acknowledging God as the source of insight, repentance, forgiveness, and redemption — to blessings of a physical nature — blessings for health and sustenance. The Amidah then turns to blessings pertaining to national concerns, and concludes with blessings of thanksgiving and peace.

As with the Amidah’s other blessings, the blessing for health and healing is addressed as a collective concern. Most unusually, according to the Tosefta1 and subsequent commentators, the composers of this prayer changed the wording of the verse in Jeremiah 17:14 from a singular plea, “Heal me, O Lord, and let me be healed,” to a plural form, “Heal us, O Lord, and

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1 Tosefta, Megillah, 3:41.

At the other end of the spectrum is what some call “humanistic effectiveness.” This type of prayer elevates and inspires a community to action; it helps people bond and feel comforted in the face of suffering. We confront our own fears and awareness of mortality, appreciating the very tenuous and fragile nature of our human bodies. This type of prayer, I know, works. It can generate the very results it seeks. Between those two kinds of prayer is a huge gray area of possibilities. There might be a “metaphysical effectiveness of human agency” (“I’m sending you healing energy”) or any variety of responses from God (“God hears us and offers us compassion, even if God does not intervene to solve the problem”). And I don’t know yet what I believe about the many possibilities that inhabit this gray area.

I know I believe that prayers for healing can be transformative, even if only at the level of humanistic effectiveness. But I don’t think prayers are magic; I do not believe that prayers alone can heal, or that they can necessarily compel God to heal us. For that matter, I don’t even believe that healing is necessarily a complete return to life as it was before the accident, illness, or disability. Healing requires coming to terms with life as it is now: life with struggle (and sometimes chronic pain or discomfort), and life with the memory of what came before. Healing requires work, strength, and courage. Healing is a partnership among body, spirit, and soul — between humanity and the divine, the individual and the community.

To tell Aunt Linda, “I’ve been praying for you” would be inauthentic, not because I wouldn’t pray for her but because I couldn’t — not without explaining all of this, and clarifying all of the understandings about what I think it might mean to pray for someone, so that she would be clear on what I did and did not mean by what I said.

Since many people do not wish to hear — especially in a time of trouble — that prayer may not be effective in the way they think it ought to be, I am beginning to find that it’s best, in general, to just not say, “I’ve been praying for you” at all.

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Rabbi Julie Pelc Adler will begin working at the Aitz Hayim Center for Jewish Living in Chicago, Ill., this summer. She also serves as the director of the Berit Mila Program of Reform Judaism and the executive director of the National Organization of American Mohalim. She is co-editor of the anthology, Joining the Sisterhood: Young Jewish Women Write Their Lives, which was published by the State University of New York Press in 2003. She found deep personal and spiritual meaning writing and researching her rabbinic thesis on the book of Job: “Talk to Me: (Or, When More Bad Things Happen to Good People).”
let us be healed.” Homiletically, the plural form allows us to include others who are ill and in need of our prayers without privileging anyone. We are also given an opportunity to insert a personalized plea.

While the central Refa’enu blessing concentrates on our health, the addendum calls upon God to specifically grant both refu’at hanefesh and refu’at haguf, spiritual healing and physical healing. This expanded language acknowledges the mind-body connection and recognizes mental wellbeing as an arguably essential ingredient of overall health.

Insecurity and doubt about her contributions to life and their meaning plagued Debbie Friedman’s soul.

The burden and worry that so many of us seem to bear as we come closer to death struck me more intensely this past January at the funeral of Debbie Friedman. Debbie contributed so significantly to Jewish worship renewal, and her prayers and songs are sung in every quarter of the world. The outpouring of love and appreciation for her, both in life and after her death, made clear just how profoundly she touched the lives of tens of thousands of people in the most intimate ways. By every reasonable standard, hers was a life of outstanding accomplishment and unquestionable significance.

Although no one had more reason to “rejoice in her portion,” insecurity and doubt about her contributions to life and their meaning plagued Debbie’s soul. In a message she wrote to her friend Alice Shalvi in Jerusalem just two months prior to her death, she confided: “I think we are frightened of our own death for a few reasons. First of all, we wonder if we have given anything to the world; [have we given] enough that we will be remembered? Then, we are terrified [that] we are going to be forgotten. That we will have lived and worked hard to make a difference in the world and it will all have been for nothing because...”

This connection is hinted at in the central blessing, for after requesting healing we then ask for salvation: Hoshe’anu v’nivashe’ah, save us and we shall be saved. Within yeshu’ah, salvation, is the kernel of yesh, “being.” We are praying for God to grant us a refreshed and renewed self, in body and in soul.

My late grandfather chose to teach me decades ago that a life of meaningful devotion requires intention. Being mindful in prayer cannot ensure good health, but it can serve to gently nurture our spirit and deepen our relationship with the divine.

The Confession of One’s Soul

DAVID ELLENSON

W hen my friend Susan Berrin invited me to write for Sh’mma, she asked that I respond to two very significant existential questions: How do we assess if we have done enough during our lifetime? And, how do we measure the import and significance of a life? Rather than answer abstractly, offering a philosophical reflection upon the meaning of life, I will respond personally, describing the complexity of the human situation as I experience it.

I am fully aware that I write as a public figure, having served for a full decade as president of the Hebrew Union College–Jewish Institute of Religion. Although I much prefer the life of a scholar — the control and order such a life affords as well as the passion and joy that full-time engagement with ideas and thought evokes — there are public and private dimensions of this position that I enjoy. While I often “rejoice” in my life, I know that however much I accomplish, it is never enough. I feel the weight of yearning constantly to do more, and the satisfactions that accompany my work seem fleeting and transitory in comparison to the enormity of the necessary tasks that are yet to be completed.

This is my “confession,” an attempt to look honestly at my life — its accomplishments and shortcomings. These reflections are born out of my character (a contemplative and sometimes even disconsolate personality) and more generally out of my pervasive personal angst about not doing enough. Even our Jewish funeral liturgy suggests this tension: “O Lord, what is man that You have regard for us? What are we, that You are mindful of us? We are like a breath; our days are like a passing shadow; we come and go like grass, which in the morning shoots up, renewed, and in the evening fades and withers.” (verses from Psalms) Macbeth’s poignant soliloquy acknowledges that doubt and frustration — such as the despair that marks my own life — are universal aspects of the human condition: “Life’s but a walking shadow, a poor player that struts and frets his hour upon the stage and then is heard no more, it is a tale told by an idiot, full of sound and fury, signifying nothing.”

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it is forgotten and we are forgotten. That, in fact, we are nothing more than dust and ashes.”

In her creativity and passion for life, as well as in her profound doubt, Debbie embodied the essence of the human spirit. Her capacity to inspire the world with her transcendent music had as its foundation a unique insight into the depths and pain, the hopes and fears, of the human soul. Her music and her questions remain a powerful and honest legacy for us all.

These are the questions with which we wrestle — and there is no nechemta, consolation, that can completely remove the angst associated with such reflections. Rather, it is through such confession and in the personal scouring and examination of the depths of one’s soul that I find a modicum of relief from the doubt and uncertainty that characterize questions about how to measure the fullness and significance of a life.

A Prayer for Healing: The Misheberach

WILLIAM CUTTER

Debbie Friedman understood the dual direction of the Misheberach prayer. For some people — usually — and for all people some of the time, it is a prayer for divine intervention: “God, do something!” For others and almost all of the time, it is more of a communal and public affirmation of hope — binding people together in a sharing of each individual’s particularity. It was Debbie’s genius to bring those two distinct intentions into one explicit expression through a beautiful melody. And when we conclude the prayer with “And let us say, amen,” moist eyes in the congregation affirm that the sacred but sometimes flat routine of prayer has been leavened by personal engagement, gratitude, and outreach to others in the room.

The aspiration for healing and even cure was disappointed this past winter by Debbie’s suffering in a little hospital in Orange County, Calif. But the second direction of the “Misheberach” — the communal affirmation — was not disappointed; people came together in an expression that mirrored the re-creation of Debbie’s prayer. And we continue to honor her memory by examining what it is we do when we pray, “May the One who blessed our ancestors, bless [a certain person] with a complete healing… and, while you are at it, God, soften the lump in my throat.” The hope for intervention is a vertical approach, a directional description of the clunky word “theurgy” (influencing God’s actions). Engagement with one’s community is the horizontal piece; it’s about shared, participatory and, ultimately, cultural bonding. Because you blessed Abraham and Sarah, O God, bless my cousin who is ill. We cite the biblical patriarchy to affirm that we belong to this community. Two directions are built into the prayer itself: We invoke the ancient community (horizontal) in the hope for divine intervention (vertical). But over time, an attachment to ancestors may have lost strength in our upwardly aimed petition. It may no longer mean that one’s hope is justified by precedent. Now we add a vertical historical connection to the already horizontal and contemporaneous support we find in the communal setting. We may not believe that God will choose to make a Jew in Pittsburgh well, while ignoring a little girl in India; but we know how we hope when our backs are against the wall.

Understanding the Misheberach prayer received a boost in the mid-1950s when Avraham Yaari (and two important scholars after him) published major essays in Kiryat Sefer, (the official research organ of the National Library of...
The communal experience remains especially powerful when one embeds a current hope in a contemporary variation on an original form, or matbeah. This has been Debbie’s gift, and it was her quest — especially as she matured as a performer, worshipper, and musician. When we studied this prayer more thoroughly, Debbie was thrilled to learn of each newly discovered nuance: the association with tzedakah, the ability to improvise, the spontaneity permitted within the matbeah, and even the occasional criticisms of those within the community who felt the prayer lacked authenticity.

As we remember Debbie Friedman, the prayer she fashioned with Drora Setel remains a symbol of disappointed hopes, a prayer unanswered, but a prayer that binds us to each other. Her ultimate wish for us was to remain a community, even when our aspirations weren’t realized. And so, while many of us remain skeptical and disappointed in our hopes for divine intervention, her dream has been satisfied by the way in which thousands have held on to each other since her death.
Musical Midrash

I became acquainted with Debbie Friedman’s music while I was a camper and participant in the National Federation of Temple Youth group during the 1970s. Her music, which touched the soul and heart, provided the soundtrack for much of my adolescence. Only more recently have I begun to understand the technical aspects of the art she created: an intricate musical tapestry of lyrics, melody and supporting harmony. Debbie’s “L’chi Lach” illustrates this fusion of text and music particularly well.

This piece of music functions as a midrash on the biblical story of Abraham’s journey. A continually rising vocal line provides us with a sense of direction and a feeling of moving forward. The story of our ancestors is also one of perseverance; such a vocal line demands just that perseverance from the amateur singer. The musical range pushes the natural limits of what might be considered appropriate for congregational singing. And yet, as it is sung, we don’t give up; rather, we journey forward.

A particularly salient feature of the song is the juxtaposition of the masculine “lech l’cha” (which is the name of the Torah portion) with the feminine “l’chi lach.” While the phrase “l’chi lach” ignores the natural Hebraic word stress — giving the words almost equal value — “lech l’cha” more closely mirrors the Hebrew text rhythm. Why did she set these texts this way? Why does she seem to purposely defeat the natural word stress? Perhaps, Debbie is making a radical statement as she announces that the biblical text has been re-imagined, re-envisioned. While the textual proximity of “l’chi lach” and “lech l’cha” indicates similarity, Debbie is informing the listener that the two phrases are not the same. In a seemingly simple yet extraordinarily elegant musical phrase, Debbie indicates that although these phrases function grammatically in the same way (second person, singular, command), the feminine form is a midrashic construct. In a powerful, fleeting musical moment, we are transported back through the millennia; we hear our matriarchs called by God to journey forth — even though we know little of their lives from our sacred texts.

This is the power of Debbie’s music — to provide voice to the voiceless and bring those from the margins of society into the larger communal tent of Jewish worship and life. A simple phrase like “l’chi lach,” set as eloquently as only Debbie could, tells the listener that we all belong, that we all have a place in our communal storytelling.

The conclusion of each verse of the song reinforces this sense of community:

“And you shall be a blessing / You shall be a blessing / You shall be a blessing, l’chi lach.

Debbie’s choice to exclude “and” from the last two lines of the verse strengthens the message. By leaving out a simple “and,” she acknowledges the imprecise nature of the English language; in turn, she highlights “you.” In Hebrew, the grammar clarifies the subject. But the English “you” is less clear. It is as if Debbie is constructing concentric circles of blessing. The first “you” of “And you shall be a blessing” speaks to the individual. The next “you” extends the blessing to the greater community. And perhaps the final “you” extends across space and time as we are joined together with all those souls who seek blessing.

“L’chi Lach” not only exemplifies Debbie Friedman’s gifts as a composer; it also demonstrates her desire that we all recognize the power we have in creating moments of sacredness and blessing in each others’ lives as we journey forward.

Evan Kent has been the cantor at Temple Isaiah in Los Angeles since his investiture from the Hebrew Union College–Jewish Institute of Religion in 1988. Now serving as director of the cantorial music program at HUC-JIR, Kent is on the editorial advisory committee for the new machzor being developed by the Central Conference of American Rabbis. He is currently pursuing a doctoral degree in music at Boston University, where his research focuses on informal Jewish music education and its impact on the development of Jewish identity.

Chanting: A Mishkan for Healing

Shefa Gold

Chanting, the repetition of a sacred phrase, transforms the words of liturgy into a doorway that becomes an entrance into an expanded state of consciousness. From those expanded states, we have access to the fullness of our power to bless and to heal both ourselves and others. The sacred words light up our inner treasures; the unique medicine that we each carry may be revealed. Rabbi Abraham Joshua Heschel said, “It is only after we kindle a light in the words that we are able to behold the riches they contain.” We kindle a light in the words through careful and loving attention to breath, intention, meaning, sound, melody, harmony, tone, rhythm, and the will to repeat a phrase long enough to allow a shift in consciousness to occur. Energy that is generated in the chant can then be focused and refined for healing.

The art of chanting in community requires a double focus — on the ever-deepening center of one’s being and on the group energy that is emerging. With each repetition of the phrase, the chanter has an opportunity to strengthen and refine both these points of focus. By opening the heart, the chanter finds within herself more to give to the group. And by becoming a servant to the group, the chanter is given access to the deeper realms of her own heart.

When the sound of a chant has ended, the most subtle, transformative, powerful part of the practice can begin. By entering into the silence after a chant, we can receive both the divine influx and the gifts that bubble up from the soul. The silence after a chant is a double focus — on the ever-deepening center of one’s being and on the group energy that is emerging. The stronger, more spacious, and clearer the mishkan is, the more energy it can receive and transmit.

When we chant, we are building a mishkan at four distinct yet interconnecting levels: at the level of the group, in relationship, in the body, and in the heart. During a chant for the purpose of healing, we call on the fullness of our passion and generosity to build and strengthen the mishkan at all levels.

In Kabbalah, four worlds exist: the physical world of action; the emotional world of expression, feeling and creativity; the world of knowing; and the spiritual world of being and interconnection. A chant becomes a healing force when all four worlds within the chanter are engaged. The chant vibrates through the body, opening up and enlivening the physical world. The emotions are engaged through the building of intention. The world of knowing is engaged through learning about the content and context of the sacred phrase. And the spiritual world is activated as our sense of separateness dissolves and we open up to God through expanded states of consciousness.

Through the practice of chanting, we can activate all of our disparate parts at once and become the vehicle for God’s healing power.

Discussion Guide

Bringing together a myriad of voices and experiences provides Sh’mi readers with an opportunity in a few very full pages to explore a topic of Jewish interest from a variety of perspectives. To facilitate a fuller discussion of these ideas, we offer the following questions:

1. Are there connections between belief, spirituality, physical health and mental health, and, if so, what are they?
2. What is your vision for a community-based multifaceted program in healing and health? That is, how might our institutions — both teaching and communal membership organizations — be transformed to offer healthier, more vibrant opportunities to address illness, suffering, health, death, etc.?
3. Are healing circles helpful? How so? What role does the Mischeberach prayer serve? Does it add to the healing of the individual? Is it recited for the benefit of the person praying?
4. What are the legitimate expectations of our communal leaders who serve people facing illness and loss?
5. What roles do the cultural and expressive arts — music, painting, dance, etc. — play in the process of health and healing?
Rethinking Music Making: 
A Teshuvah for the Conservative Movement

ELIE KAPLAN SPITZ

“Proclaim your love each morning; tell of your faithfulness each night, to the music of the lute and the melody of the harp.” Psalm 92

These words are from the psalm for Shabbat. During Temple times, a pilgrim would hear sounds of the Levite musicians as he came upon the Temple Mount. Those musical sounds ceased to exist as Shabbat worship — in memory of the Temple’s destruction and also as a preventive measure, lest the playing of musical instruments lead to fixing (shema yetakein), a task that is prohibited on Shabbat and Yom Tov.

The Conservative movement permitted use of the organ in 1959, a response to the creation of the State of Israel and the decision that it was no longer necessary to mourn the Temple’s destruction.

In the aftermath of the destruction of the Temple, all music was forbidden. Third-century Babylonian rabbis are recorded in the Talmud as saying, “The ear that listens to music should be torn off; when there is song in a house, there is destruction on its threshold.” (B. Sotah 48a)

So great was the fear of repairing an instrument on Shabbat during the first centuries of the Common Era that the early rabbis of Israel even forbade clapping or slapping the thigh on the holy day. (Mishnah Beitzah 5:2) But because of the natural desire to celebrate, and to do so with music, the observance of the blanket prohibition eventually waned. Clapping during moments of active singing or deep emotion was a natural response, and hard to monitor. In the 12th century, the Tosafot commentators of the Rhineland wrote, “For us, who are not experts in making musical instruments, it is not appropriate to make this decree in our days.” (B. Beitzah 30a) thereby removing the protective decree, at least for clapping. The major codes continued to forbid the playing of musical instruments on Shabbat, because of the concerns about fixing and public carrying. Consequently, for much of synagogue history, Shabbat liturgy was sung a cappella.

For the past five years, Rabbi Elliot Dorff and I have worked on a teshuvah, a legal responsum, revisiting the question of whether instrumental music is permitted on Shabbat and Yom Tov. Our responsum seeks to define the permissible uses of a broad array of instruments, prescribing certain limitations (which many may feel are too restrictive) and offering permission for others (which will disturb some).

The Conservative movement’s Committee on Jewish Law and Standards (CJLS) was scheduled to vote on the 50-page teshuvah as Sh’mi went to press in mid-May.

In the Conservative movement, the CJLS permitted the use of the organ in synagogues in 1959, a response to the creation of the State of Israel and the decision that it was no longer necessary to mourn the Temple’s destruction. The organ did not raise questions of “carrying” or even “fixing.” In 1970, the minutes of the CJLS expanded the organ ruling to include the use of guitars without an analysis of the different violations of Shabbat that portable instruments might entail. During recent decades, the use of musical instruments has grown among synagogues in the movement. Although most Conservative synagogues still forbid musical instruments on Shabbat, some synagogues affiliated with the movement have introduced instrumental music, feeling that the music fosters communal singing, offers beauty, spiritually uplifts, and draws participants. Some argue that the introduction of musical instruments may put a damper on introspection and communal singing. But these dangers are also present with cantorial music and choirs, which are commonly accepted.

The key concerns in our teshuvah are whether instruments may be played on Shabbat and, if so, how to protect the sanctity of the holy day. We conclude that music making, itself, is not forbidden; only making an instrument or fixing it is prohibited. In that regard, the sources forbid replacing a musical string on Shabbat but may permit tuning. We encourage synagogues to provide for instruments or storage for instruments in order to avoid the need for musicians to carry their instruments from a private to a public domain. And we ask that stage set-up and electrical equipment be put into place before Shabbat. Our goal is to provide a balance between enabling music and honoring Shabbat.

As pointed out by Rabbi Bahya ben Asher...
Abby,

I’m delighted to be in conversation with you about the role of ritual in healing. I’m particularly interested in hearing about healing rituals you’ve facilitated and how this both intersects with, and is influenced by, your many years as a physician and mind-body therapist.

When broaching the subject of ritual (not prayers per se) with people who are ill, more often than not I encounter resistance: “Are you some kind of shaman?” “That’s so Berkeley!” Or, “What I have is terminal. I’m not going to heal from it.” The latter is one of the reasons I don’t usually use the term “healing ritual.”

I prefer to use rituals to help people be present in the moment, and one of the most effective ways to do that is to use ritual objects. Objects, such as the Amphora Album or Chemotherapy Siddur (see explanation in margin), which Jewish Milestones developed, or a few stones or a cup of water, can be used to evoke substantive, tangible evidence that we are, and always will be, so much more than our illness. (I was once corrected by the mother of a child I was tutoring for his bar mitzvah: “He is not autistic. He has autism.”)

The ritual objects also serve another purpose: No matter how much of a support network someone may be blessed to have, most people undergoing medical treatment spend a lot of time on their own. Having an Amphora Album to hold, read, or stare at is a reminder that we are not alone — even when we are literally all by ourselves.

I look forward to hearing about your experiences,

Rachel

Dear Rachel,

Reading your letter, I started thinking about the confusion between healing and curing, which are often assumed to be the same. They aren’t. Curing is about ridding the body of illness and returning to one’s former state of physical health. Healing, however, is the process of finding emotional, psychological, and spiritual wellbeing, and using the experience of illness to help redefine what it means to be fully alive. Healing is a process toward something larger than merely returning to a former self. A person might let go of unhelpful patterns and beliefs, which could put the body in a much better position to repair itself — hence, the “mind-body connection.” Even when cure is not an option, healing is always possible.

I lead healing rituals that are meant to evoke a sense of wholeness, or shleymut — for all participants — through community and intention. In the Talmud, Brakhot 5B, the healer Rabbi Yohanan realizes that he needs the help of Rabbi Hanina in order to be healed himself. He can’t do it alone. “Give me your hand,” is the primary teaching. We need one another. I use this image both literally and/or metaphorically in all healing rituals.

I love that you have created the Amphora Album, which helps people remain connected to themselves, their community, and the sacred. The objects you mention — stones and water —

Shabbat is a palace in time, then there is a need for an architecture of restraint in which to craft holy space. Such an architectural plan is subject to review and reconfiguration, while keeping in mind the ultimate goals of setting aside holy time and permitting the removal of unnecessary barriers. We honor differences in our movement, while retaining a commitment to Shabbat as a time set apart from the remainder of the week for spiritual uplift.
represent God’s presence, whether or not it is acknowledged. It doesn’t matter, because in touching these objects, the connection is made.

But getting back to the issue of language, what words do you use to introduce a healing ritual to someone who might need it? How have you encouraged someone who might be reluctant to try such a ritual? How have you seen ritual help in healing?

... Bivrakha, Abby

Abby,

The distinction you make between healing and curing is very important. I wish professionals — doctors and clergy — would make it more explicit, delineating the possible and managing hope.

You asked how I broach the subject of a healing ritual or how I might encourage someone to consider participating in one. My approach is rather simple: Listen carefully; don’t make assumptions; share examples of rituals other people have found helpful; offer the gifts of acceptance and creative thinking. I try to be careful not to become attached to any particular outcome — for the ill person, for their interest in ritual, their connection to me or my own idea of success in that setting. Perhaps the most important part of the conversation is in understanding what the ritual needs to accomplish, what will be different after it takes place, and how that transformation (however small) will be measured and held.

While “curing” has no part in my ritual lexicon, healing isn’t always explicitly present either. I think the two concepts are often conflated in people’s minds and, in my experience, it’s not always the goal. Perhaps if we talked this through at greater length, we’d find that we’re saying the same thing and that the differences are primarily semantic.

I do know that we have both been privileged to see the transformative power of ritual in action and that the impact, like the person, is present long after the moment is past.

L’vreoot — to your good health,
Rachel

Managing Hope

MICHAEL AGUS

"House officer to bedspace six — stat!"

During my first month as a doctor, on my first rotation in residency, I was roused from sleep in the call room via an overhead announcement and summoned urgently to the bedside of a sick child. The patient was a six-month-old girl who had suffered a severe asphyxial brain injury. She had been found lifeless by a babysitter who, along with an emergency response team, brought life back to the baby girl.

Although the etiology of Sudden Infant Death Syndrome (SIDS) is still not fully understood, progress has been made in identifying and mitigating risk factors in order to prevent it. No real progress has been made, unfortunately, in helping the brain to regain function after sustaining such a severe insult.

We had a meeting with the parents to explain that the child was largely no longer "there." On exam, we were not able to elicit any signs of normal brain function. She had occa-

I have struggled to get parents and, occasionally, patients to have just the right amount of hope. At some level, this represents the arrogant side of our profession. But ultimately, it comes down to distinguishing between hope and expectation.

Michael Agus is a physician specializing in pediatric critical care medicine and pediatric endocrinology at Children’s Hospital Boston. An assistant professor of pediatrics at Harvard Medical School, he is president of the Kehillah Schechter Academy of Norwood, Mass. (formerly, the South Area Solomon Schechter Day School), and medical director of the Hearts and Noses Hospital Clown Troupe in Boston.
brain activity one can have.

The father and grandfather arrived at the bedside only seconds after I had. I could see in their faces that they were also initially fooled into thinking that the little girl’s muscle movements might represent improved brain activity. As they continued to process the scene, it dawned on them that there was nothing positive happening. When I explained that she was having seizures, the father looked up at me with tear-filled eyes and said, “I still have hope.”

I returned his gaze and affirmed, “It’s important to have hope.”

The grandfather’s eyes darted to me and he excitedly asked, “It’s okay to have hope?”

Since that moment in the first days of what became my career in pediatric critical care medicine, I have struggled to get parents and, occasionally, patients to have just the right amount of hope. At some level, this represents the arrogant side of our profession. But ultimately, it comes down to distinguishing between hope and expectation. High hopes are productive in healing and in allowing loving, supporting interactions with the sick child. For when a child looks in his or her parents’ eyes and sees hopelessness, there is nothing left to fight for. Hope is an essential ingredient for quality of life.

Physicians have an obligation to ensure that parents understand their child’s illness and its prognosis to the best of their ability and medical knowledge. If a parent hopes for and expects a full recovery when one is essentially impossible, then the physician has failed in an essential duty. The physician must ensure that the family understands, through whatever means possible, the likelihood of survival, or cure, or success of the procedure. Sometimes this requires bringing in other family members, clergy, or friends, or presenting the information in a clearer fashion than had been done to date. Other times, it may require daily meetings and conversations, using clear language that includes the word “death.”

But on occasion, expectations are more clearly understood by the family than by the health-care team. A mother whose baby was suffering from an inborn lethal illness that had reached the critical state recently chastised me, now sixteen years into my career, to please stop being so sad and morbid when I came in to examine her baby each day in the ICU. She understood her child was not long for this world, but she wanted every day that remained to be one filled with positive energy and hope. The boy died ten days later, warm in his mother’s arms, with the rest of the family in attendance — with dignity and crushing grief, but hope.

Sh’má-BJPA Launch Archive
Our 41-year Sh’ma archive is searchable and available free at www.shma.com or www.bjpa.org. The archival collection, launched jointly by Sh’má and the Berman Jewish Policy Archive @ NYU Wagner, spans more than four decades and features the work of a vast array of leading intellectuals, rabbis, scholars, educators, and lay leaders.
Suffering Is Part of Life: Getting Closer to the Balm of Acceptance

SHARON SALZBERG

In Buddhist teaching, suffering isn’t considered redemptive. What is redemptive, and healing, is our transformed relationship to suffering. Each element of our experience provides its own challenges and opportunities for a new relationship. When we are in pain or distress, we can hold that pain in bitterness or in compassion, in isolation or in connection to community. We can respond to the helping hands that might be reaching toward us, or we can refuse to believe that we deserve any support at all.

In Buddhism, we use meditation to train our minds so that we can open more fully to our situation. Rather than close down and withdraw, we open to the pain.

In contrast to the ways most of us have been conditioned, Buddhism emphasizes the naturalness of suffering in a world of constant change. Buddhists try to address the assumptions we carry that define suffering as a betrayal, as something blameworthy that we should hide or be ashamed of, and we work to loosen those habits of mind.

When my friend Meg faced death after an intense, eleven-year effort to overcome ovarian cancer, she took morphine. “I don’t want to take more than I need. I don’t want to be foggy minded. But I don’t need to be a hero about it either. If I hurt, I’ll take it. I don’t think you get extra points for suffering.”

Meg was a warm, compassionate, caring person, even through the difficulties of her illness. She developed an openheartedness to others through the relationship she fostered to her own pain. One day, I experienced a very moving encounter with her on the phone. I had just undergone exploratory surgery to determine whether an ovarian tumor was benign or cancerous, the same kind of cancer she had. I had learned the results of my test only a few days before, and when I told her that the tumor had proved to be benign, Meg said to me with such joy, “Sharon, I have been praying for you. I am so happy for you.” Her response went beyond ordinary kindheartedness. In her offering of concern, she didn’t take center stage; her own situation was not the reference point. In the intensity and purity of her caring, she was simply delighted that I was healthy.

At a time when she was suffering herself, it must have required a great effort to include another in her concerns. But she gave me the gift of her wholehearted prayers and joy without a hint of comparison or struggle. I am sure that if I had commented on how extraordinary I found her generosity of spirit, she would have been quite puzzled. Meg’s response arose out of how she viewed life — not as something free of suffering if you do all the right things, but as something filled with happiness and pain in the natural course of events. Neither is left out.

Through the Buddha’s teaching, we learn that suffering isn’t aberrant, but inevitable; death is not a personal failing, but the result of being born; and hostility toward our condition only isolates us and brings us further from the balm of giving and receiving kindness. In Buddhism, we use meditation to train our minds so that we can open more fully to our situation. Rather than close down and withdraw, we open to the pain — which is a natural part of life — that helps us inevitably care for ourselves.

The process of learning to let go, however, isn’t a linear one, where we suddenly “let go.” Rather, it happens in fits and starts, where we open but then close down; we release clinging and then somehow forget that it is that very release that actually makes us happy. We need to remember to begin again after getting lost or overwhelmed; we learn to do that and return to what is happening in the moment with less judgment, more kindness toward ourselves. Being discouraged or blaming ourselves for not being perfect is a natural part of a genuine path, part of how transformation happens.

While some people will begin training when faced with a health crisis or a situation of extreme suffering — and I do know people who do that and still find benefit — it is certainly far better to begin in ordinary times, when conditions aren’t so hard. Then, when we really need it, that inner strength has been cultivated, and our ability to exhibit love and compassion for ourselves and others is much closer at hand.
Unintended Consequences

KATE ALKARNI

I began painting furiously about nine years ago while in rehab for heroin addiction. I was 23 years old, and I had rediscovered a yen for art. Even strung out on heroin for five years, I hadn’t forgotten everything about myself or reality. Each painting I created that first year was unplanned — emotionally raw and swiftly executed, in a matter of hours. Over the past years, as I’ve become more thinking and feeling as a person, so has my voice as an artist.

My current work includes a series of photographs about the women in my life. The piece “Ill” is a photograph of a friend of mine who suffers from anorexia. A meal consists of a ketchup packet mixed with a cup of hot water, which she jokingly refers to as “tomato soup.” The photograph “This is my plan” captures another friend — someone who suffers from body dimorphic disorder. Because of her illness, she lifts up her shirt to reveal an emaciated, tattooed torso.

Here’s what disturbs me. I took these photographs in an attempt to show my friends that they were too thin. But then, honestly, I thought to myself, “They look great.” I even took it a step further and decided to go on a diet, thinking I needed to lose weight. I had been keeping on an extra 30 pounds to prove to women that beauty comes in all shapes and sizes, like a Dove soap campaign.

Now, I’ve become my photographs. I weigh 116 pounds and wear an extra-extra-small. I know it’s crazy, and I am struggling to stop dieting.

This was not my original plan when I started this photography project, unless it was subconscious. So I feel like a beautiful failure. I think it might be time to change media again.

Kate Alkarni, known also as Kate McKinney, lives with her husband Ali and their three Siamese cats in Los Angeles. Her career as an artist began at age fifteen, when she wrote and starred in Common Bonds, a film shown at the 1997 Sundance Film Festival. Since then, Alkarni has studied film, fashion, and art around the world, and she has become a prominent member of the arts community. Her work has been shown at the Hebrew Union College-Jewish Institute of Religion, the Platt Gallery, and many other small galleries. Primarily a visual artist, she still works as a screenwriter and director, and she is currently directing a one-man show for comedian Joey Diaz.

Above: “This is my Plan.” Below: “Ill.”
Giving up on Peace Is Not an Option

MAAYAN RAVID AND STAV BAR-SHANY

We are young students in Israel and each year we hear stories passed down from generation to generation with the unrelenting message to “never give up.” For more than 60 years, our families have struggled to live here — freely, safely, and peacefully. We can easily become disheartened, realizing that today we are not much closer to a peaceful, normal existence in the Jewish homeland than our parents or grandparents before us. The obstacles today are clearly different. The state is firmly established; it has grown and developed; its accomplishments are world-renowned. Israel has fulfilled some aspects of the Zionist vision — such as a homeland and safe haven for world Jewry — while sideline others — such as the ethical commitment to social justice and coexistence with our Arab neighbors — along the way. Today, in addition to the ongoing security issues, our struggles revolve around the state’s moral composition and identity — how we treat others around us and among us.

In the last decade, as young Israelis, we have actively worked to improve our country. We participate in countless events, protests, initiatives, coexistence seminars, political discussions, media interviews, and arguments with family and friends. We know that a desired peace — a suitable solution — is yet to be found or agreed upon. We continue to hope and work, only to be disappointed time after time by our own politicians and their counterparts, by one conflict or military operation after another, by an ongoing occupation of a neighboring people. At the end of the day, the reality in Israel is both difficult and complicated.

How do we maintain hope and avoid despair in the face of multiple failed peace efforts? Activism is a Sisyphean effort, but as we take stock of the broader historical picture, considering our partners and the stakes involved, we know we must prevail.

First, we look back: We stand on the shoulders of many who worked and struggled for the state and for the Jewish people, often in more dire and extreme situations. Following them, we have no choice. This is the only country we have, with its distinct Jewish character, historical ties, intensity, and never-ending challenges. We must continue striving to live here safely and peacefully. We cannot give up on their hopes and dreams.

Second, we look around: There is a wonderful and inspiring group of active people who share our passion and yearning for peace, understanding that it is crucial not only for us but also for our neighbors. Young people on both sides of the political and cultural barrier are tired of fighting and they fear the encroaching extremism. We understand that there must be another way to ensure safety and promote a livelihood for both sides — to create a viable future for two states, to better the economies of both peoples. We realize that solving our conflict might radiate throughout the region and even the world. We cannot give up on each other.

Third, we look ahead: We want to continue living in this country. Our ancestors struggled for it in the past and we struggle for it today. But we do not want our children to need to continue that struggle further. The Zionist dream is not to continue living on the sword while preventing another people their own sovereignty. The Zionist dream is to be a nation among nations with many achievements, aspirations, and a sense of moral integrity. We cannot give up on the future.

Considering where we come from, who our partners are, and where we set our vision going forward, the option of despair and disillusionment is simply nonexistent. Like our grandparents, we believe that we have a responsibility to shape the Jewish future. We feel privileged to have been born at this complicated time and in this special state. We feel privileged to be a part of the Jewish people and culture. We do not have the privilege of giving up on all of its potential, on what our grandparents — who founded the state — dreamed it could and should be.

Frustration and disappointment can lead to disillusionment. But they can also lead to a sense of urgency and responsibility. Our call is to sustain hope and resolve in the face of an enduring external and internal crisis. The stakes are just too high for us to give up. Sixty-odd years after the founding of the state, its ability to live in peace with its neighbors is as crucial to its future as any security consideration. We just cannot afford to give up on it.
Training for Caring Communities: A Roundtable

Michele Prince: There has been a recent explosion of attention to the field of pastoral care. Let’s start this discussion with a question about how best to train our future Jewish leaders to meet the needs of the community. What are the legitimate expectations of the community — of our synagogues and organizations — for our leaders who serve people encountering illness and loss?

Mollie Cantor: I hear that question posed often. We’ve all heard this story: When my mother died, the rabbi came to our house and spent two hours with us; or, the preschool teacher called us and it was really great to feel connected — but that was it.

Sara Paasche-Orlow: Rabbis serving large congregations need to have some basic good listening skills and sensitive responses to real life issues. But they cannot be the only ones responsible for all the care needs. A rabbi’s role is to create the fiber of a caring community, where there are many people in place to respond to need. Some rabbis who have been in the pulpit a long time have set themselves up in some way to be the caring souls for the whole community; some need and want that role. A much more effective approach is to create a community committed to chesed with a group that is charged with learning better how to care for individuals in need. Rabbis might think about how their teaching, their resources, feed into an environment where people are cared for and where they inspire other leaders to emerge.

Michele Prince: An entrepreneurial opportunity exists to place clinical pastoral education (CPE) students as interns in synagogues and other Jewish organizations beyond the standard health-care sites. I imagine multiple tiers of what our students need to learn. First, they need to learn how to assess an individual, a couple, or a family — and then to understand when to ramp up that response. As Mollie mentioned, we also need to help our leaders anticipate the needs of the community — creating, as Sara mentioned, a fiber of connectivity so that both the lay leadership and individual members know that they need to step up when someone is in need. Everyone knows how much counselling goes on in the hallway or at a kiddush. It contributes to compassion fatigue in our professionals. We need to teach our students about enduring strategies for self-care.

Michelle Friedman: Students in any Jewish leadership training program need to understand themselves as fully as possible. A facilitated process group offers opportunities to explore experiences that touch Jewish professionals in both negative and positive ways. Students can then better confront their own vulnerabilities as well as recognize that everybody’s got core vulnerabilities, strengths, feelings of frustration, outrage, dismay, disappointment, and delight.

Sara Paasche-Orlow: Rabbis can become incredibly lonely down the road in their careers. They need an ongoing safe place with colleagues where they can open up and share the struggles and range of emotions. Rabbis are viewed as though they inhabit the top rungs of the ladder and can’t seek supervision or guidance, which is unfortunate. Those with CPE training can arrange for an ongoing group with a CPE supervisor to continue to learn and grow as a pastoral counselor.

Mollie Cantor: One of the fascinating aspects about seminary education is that students spend so much time in their heads poring over Jewish texts. But when we’re faced with somebody who is dying, or a mother who’s just had a pregnancy loss, or an individual who has just heard a devastating diagnosis, it’s very hard to reach into a text to find the right pastoral response. We don’t learn a practice of just being spiritually available to the sufferer. Many students in CPE training begin to suffer at that moment.

Michelle Friedman: Rabbis and caregivers really need to appreciate the power of being quiet and present. They generally think in action terms: “What can I do? What text do I pull out? What shall I say?” But being present is incredibly powerful. People are nourished by that presence.

Bruce Feldstein: About strategies for self-care — when I started out as a chaplain, I received the advice of a rabbi that has served me well. To stay openhearted and avoid burnout, one needs to maintain five key relationships. I wish I had learned this as a medical student. The first is a relationship with one’s self; we can only do what we can do, even though we really can do quite a bit. We must recognize and accept our limitations. Second, is a relationship with a soul friend, someone with whom we can speak about anything, who will listen without judgment. Third, is with a therapist, to process the range of emotions and grief we inevitably encounter.
Fourth, is with a colleague or mentor, who can appreciate what we’re going through, having been there themselves. And finally, a relationship with the Transcendent, however we may engage, whether through worship, text, a walk in nature, moments of solitude, or other activities.

Sara Paasche-Orlow: We also might want to acknowledge that we can’t deal with all patients. Sometimes, leaders fall into the trap of thinking they’re irreplaceable, and they’re not. Part of caring for oneself is to recognize a situation in which we are not the appropriate caregiver.

We must be able to move from a sad funeral to a moment of simcha and then to an intellectually involved teaching. What do we do to avoid emotional whiplash?

Michele Prince: Bruce suggested that a relationship with a colleague or mentor could be an opportunity to revisit issues that surface. Do your programs include guest speakers who have modeled positive coping strategies while sharing their expertise?

Michelle Friedman: In Manhattan, there is a tremendous pool of experts. But our students really want continuity in supervision — a makom and z’man kavuah, a place and time that is fixed.

Mollie Cantor: Last summer, we invited [Jewish Theological Seminary] faculty to talk to our CPE student groups. The professors didn’t talk about their own fields of expertise, but rather shared their relationships with prayer, sharing moments of transcendence that weren’t always easy. The experience gave our students permission to have doubt. When they are in the field and faced with challenging congregational or hospital ministry, they will know it is okay if it doesn’t feel just right to pray. They’ll also know that one can still maintain a relationship with God.

Michelle Friedman: I’ve found that bringing in musmachim, graduates and rabbis, from the field to teach from their personal experiences in the rabbinate is very helpful. The visiting rabbis talk about what they found hardest personally and how they overcame their challenges — what Jewish resources they turned to, what personal resources. The students appreciate hearing about what happened and what was learned through tough pastoral situations.

Bruce Feldstein: At a luncheon celebrating the ten-year anniversary of our Jewish chaplaincy, rabbis from across the religious spectrum in our community gathered and shared their experiences, their best practices in bikur cholim, visiting the sick. It was very well received. In another type of group experience, I gather every six weeks for a “Chaplaincy Chat” with our Jewish spiritual care volunteers who visit patients at the hospital. We reflect on visiting patients, the impact upon us, experiences of holiness, doubts about faith, etc. These two hours in sacred space are rich with learning and mutual support.

Sara Paasche-Orlow: We offer an ongoing monthly supervision for any alumni of our program that has been quite effective. It creates a safe space for people in the field to come back to — a place where they can share challenging experiences and understand themselves as continuous learners and reflectors. I also want to put in a plug for CPE placements in long-term care, rehab, and continuing care communities. Hospital placements don’t necessarily give students clinical experience in longer term relationships. This skill development is more applicable to the pastoral care needed in most congregational communities.

We do rounds where the full team comes together to review the social, health, and pastoral aspects of a complicated patient case. It’s been a very useful tool — not only pedagogically. It also allows people to share their emotions and get support, and it provides a measure of closure so they can be ready for the next case.

Michele Prince: We spend a lot of time in pastoral education thinking about illness and responses to illness, and while we need to ensure we are training our leaders to do that well, we also must embrace the concept of health and wellness. How might our communities approach wellness to create vibrancy and health in our schools, among congregation staff, and in chaplaincy and hospitals?

Michelle Friedman: Rabbis can make powerful interventions. An example is the place of alcohol in Jewish life. We hear about problematic kiddush clubs in synagogues as well as the use of alcohol to lure young people to programs. Rabbis can be change agents in bringing the complex issues of alcohol to the fore by speaking, teaching, and also attending to pragmatic details, such as making sure that grape juice is available for people in recovery at events where kiddush is made.

Mollie Cantor: In New York, the culture is to be busy — rushing and always on the move toward accomplishment. Is this the healthiest model? The Jewish spirituality movement and meditation groups are bringing healthier habits into our lives.

Bruce Feldstein: Busyness is so pervasive. I am struck by the Chinese word for “busy” which is comprised of two characters: “heart” and
“killing” — “heart killing.” Doesn’t that hit you in the *kishkes*?

In preparing for this call, I asked several rabbis in my community: “What do you wish you knew as a rabbinical student that you’ve now learned about spiritual care, pastoral care, and self-care?” One responded: “Am I taking care of myself, exercising, eating healthy? Am I processing my emotions? Am I venting in a healthy way?” Another pointed out, “We must be able to move from a sad funeral to a moment of simcha and then to an intellectually involved teaching. What do we do to avoid emotional whiplash?”

This brings us to the practice of making healthy transitions and grounding ourselves.

**Mollie Cantor:** We might also look toward interdisciplinary teams with other professionals.

**Sara Paasche-Orlow:** We cultivate public images and protect our inner self. But we need a more integrated self. How do we protect someone’s integration of self through this particular career path?

**Michele Prince:** The interdisciplinary team concept resonates so strongly with me. My clinical area of practice is oncology social work, and through that work and chaplaincy, I’ve had such positive team experiences that are not being embraced within Jewish communal life.

**Bruce Feldstein:** There is another model from medical education that may be useful to adapt to rabbinical education — a course for medical students called *The Healer’s Art*, developed by the physician and author Rachel Naomi Remen at the University of California, San Francisco and offered now at more than 70 schools. It is a discovery model of learning that explores topics not covered in the standard curriculum: Discovering and Nurturing Your Wholeness, Sharing Grief and Honoring Loss, Beyond Analysis: Allowing Awe in Medicine, and Care of the Soul. The process is facilitated by practicing physicians who participate in the course right along with the students.

On another note, I wonder how we could teach students to articulate the Jewish values that guide and ground us in providing spiritual care in different settings. I’d also like to hear about the practices others use in such settings, and the array of responses to different situations including acute care, aging, addiction, and trauma as well as other kinds of loss.

**Michele Prince:** That certainly makes me think about modalities of teaching. What works in your settings?

**Mollie Cantor:** A model of peer working groups that come together during a clinical experience to discuss what’s happening, the space to discuss theological issues. We ask our students to write theological reflections and think theoretically about the different fields that influence the pastoral care encounter. I would love to see every rabbinic student, or every potential Jewish leader, do a unit of clinical pastoral education.

**Sara Paasche-Orlow:** CPE training is essential for rabbis who will serve as pastoral counselors. We need to get to a place where those hiring rabbis understand that it should be a requirement for jobs with pastoral care responsibilities. Currently, many of those hiring do not yet understand that rabbis do not necessarily have pastoral care training.

**Michelle Friedman:** We also need to help our community support our rabbis and other Jewish professionals in the field. In addition to parsonage and a pension plan, communities should offer clinical pastoral supervision. A candidate for a Jewish communal job must feel free to say, “I take counseling my congregants seriously and I want to make sure this is supported by the community.”

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from Israel, was interrogated about her visa and her intention to stay here only temporarily. It is hard to justify interrogating an Israeli Holocaust survivor on the pretext of security or law enforcement. Even as a lawyer who practices in this field, I am intimidated by the behavior of our government officials. This feeling of intimidation must be so much more personal and frightening for Jews who have experienced persecution.

Rabbi Bonnie Koppell’s October *Sh’mi* column suggests that we should have confidence in our law enforcement officials. And yet, in the immigration context, coercive abuse of power by various agencies is commonplace. Torah wisdom about boundaries also does little to advance our analysis. We need broad, sweeping immigration reform. Punitive state laws, such as Arizona’s AZ SB 1071, which would require law enforcement officials to collect racial and ethnic information from each pedestrian or driver of a vehicle they stop, are driven by populist sentiments and angry voters, not by justice. These laws target primarily Latino communities and are unconstitutional. Instead of repairing a problem, these laws are costly, and they produce litigation. Our community needs to speak out against these laws. We should do so as Jews and as fair-minded Americans, and especially on behalf of the invisible illegal Jewish immigrants who have no voice.
also understand the “cup” both as a reminder to be grateful for abundance, and also as a source of strength from which to draw when I feel most depleted. The cup is a reminder that there is a constant flow of divine presence that can replenish my soul energy. At times, I need to shift my perspective to find it. It’s a little like standing shivering in the corner of the shower; if I just moved slightly, I would find myself under the flow of warm water raining down.

Our cup can be refilled by others. Sometimes, we find unexpected strength when we reach out to offer a kindness to another. The mesianic reference to being anointed with oil brings to mind a Hassidic teaching about moshiach consciousness that expresses this: If you always assume that the person sitting next to you is the messiah waiting for some simple human kindness, you will soon come to weigh your words and watch your hands. And if the messiah then chooses not to appear in your time, it will not matter.

—Rachel Gurevitz

In his book, *The Lord Is My Shepherd: Healing Wisdom of the Twenty-Third Psalm*, Rabbi Harold Kushner notes that the psalmist refers differently to God — depending on whether we are being told about God, early in Psalm 23, or whether we are encountering God, later in the text. When we encounter God, we speak directly to “You” but when the psalmist speaks about God, he uses the third person.

The Baal Shem Tov included Psalm 23 at the end of the evening service — perhaps hoping that we would encounter God’s healing presence as night descends. The Talmud teaches that sleep is 1/60 of death — that is, it is a small taste of what death may be like. Jewish tradition offers a comforting daily practice as we enter the scary places that can be evoked by darkness and uncertainty. At bedtime we recite the Sh’mi’a, the prayer we also say just before death; upon arising in the morning, we recite Modeh/Modah Ani, a prayer of thanksgiving: “I thank You, God for returning my soul to me.” By reciting this prayer of gratitude, we affirm that even in the face of illness and when we face other challenges, we may experience our “cup overflowing with divinity.”

—Marjorie Sokoll

Psalm 23 is popular as a psalm of comfort. Sensing God’s beneficence can be of help to people who are suffering illness. But the phrase “my cup overflows” may be dissonant with the actual experience of suffering.

Rabbi Meir tells us in Pirke Avot, “Do not look at the vessel, but what is in it…” Our “cup” may well be full of experiences that give us a sense of awe and thankfulness. For someone in a terminal state, however, the “cup” may be overflowing with trepidation.

This is why, if sharing this psalm, we should be sensitive when counseling the sick. For those with terminal illnesses, perhaps the phrase, “Into Your hands I commend my spirit” may be more consistent with the peaceful acceptance necessary to help transition from life to death. For those facing less serious illnesses, reflecting on “my cup overflows” may indeed provide awe, thankfulness, and hope. The effective use of literature depends on the stage of illness and the emotional and spiritual maturity of the patient.

—Stuart I. Forman
Our Vision

Each month, Sh’má creates a “conversation” — in print and online. It brings together an array of voices that cross the spectrum of Judaism: secular and religious, communal and nonpartisan, engaged and dispassionately scholarly. We raise relevant questions thoughtfully and wrestle lovingly with Jewish concerns as we attempt to navigate the intellectual, communal, and spiritual challenges of contemporary Judaism. Our focus is on ideas — their complexity, their range, and their power. Sh’má is a vibrant intellectual arena that hosts intelligent and creative conversations about ideas that reside outside of any particular institution. Our readers open Sh’má to find what they cannot find elsewhere — the concise, accessible, informative, and intelligent discussion of Jewish issues. Sometimes focusing on personal belief, other times on communal policy issues, we look to Sh’má for incisive articles that illuminate a range of opinions.

Who are Sh’má Readers?

“They are deeply committed to Jewish tradition and Jewish continuity; spiritually curious and at times adventurous; at home, at least to some extent, with the world of Jewish texts and the texture of Jewish rituals; appreciative of the many genuine intellectual, ethical, and political benefits of secular modernity, though not unaware of its fraught relationship with Jewish life; people for whom their Jewish identity is a vital component in an ongoing process of self-creation and expression by the light of their understanding of morals, community, and spirituality, a process they share with other families of humanity, and with concerned individuals everywhere.”

Yehudah Mirsky, fellow at the Jewish People Policy Planning Institute

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Note: Sh’má does not publish in July and August.
When Illegal Immigrants Are Jews

DOUGLAS HAUER

Over the course of this year’s Sh’ma conversation on the ethics of immigration — and in the larger national discussion — there is a reflexive assumption that the debate is primarily about illegal Mexican and Central American immigrants who entered the United States for economic reasons. Some have defined illegal immigrants as strangers who live among us, citing the Jewish tradition of tolerance toward outsiders within our gates. The anti-immigrant camp, on the other hand, turns to generalizations to define illegal immigrants as criminal and impoverished. Either way, illegal immigrants are “others” in a charged and polarizing policy debate.

What both sides of the debate seem to agree on is that illegal immigration is not specifically a Jewish problem. Illegal immigrants are, by definition, strangers outside our community. Few associate the names Bernstein or Cohen with being an illegal immigrant. But we should. Although little is written on illegal Jewish immigrants, they exist. They are also invisible.

As an immigration lawyer, I have met Jews who are living without lawful immigration status. They are from Israel, Romania, Russia, Latin America, Canada, and other places. What they share in common is an inability to become legal residents of the United States. A future green card is precluded. Many came lawfully on visas, but lost their status after a layoff or the breakup of a marriage. There are no statistics on illegal Jewish immigrants, they exist. They are also invisible.

Illegal immigration cuts across racial, national, religious, economic, and social lines. Jews comprise only a tiny portion of the 12 to 13 million illegal immigrants. While their numbers are small, their stories are compelling. I have met elderly Jews who worked for 30 years without lawful immigration status, only to learn later that the system does not permit them to collect Social Security benefits. I have met accomplished professionals who were brought to the United States as young children by parents who lost their immigration status. These Jews grew up culturally as Americans, but they are illegal. There is no mechanism for curing that status. While America is the only home they know, they live with a sense that their existence here is fragile.

I have met many young Israeli who underestimated the severity of the consequences for working without proper visas, only to learn later that they are accused of fraud or misrepresentation and that they face a lifetime ban against coming back to the United States. And I have met Jews who were oppressed in their native countries and who then came to the United States for a vacation — only to extend that stay for health or family reasons and then fall out of status.

Absent from any statistical data is important information about the subjective fear of bureaucracy that inhibits some of these individuals from seeking any resolution to an expired visa. Jews also get unwittingly swept up into the net of aggressive enforcement initiatives. This combination of unforgiving laws and increased enforcement has scarred many people who find themselves in our system without lawful status.

Our U.S. Customs and Border Protection officials have become especially zealous in the past few years. Just last month, I spent many hours at an airport while my client, a Holocaust survivor

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