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Attending to the soul

The Marpeh program turns laypeople into spiritual caregivers

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Not just for rabbis: Spiritual caregiving in Israel

• RIVKAH LAMBERT ADLER

When the body is ill, people routinely turn to medical doctors. When emotions become overwhelming, people go to see psychologists and therapists. But where does one turn when it's the soul that needs attention?

For those who have an existing relationship with a rabbi, *rabbanit* or other clergy member, that might be a partial answer. But not everyone whose soul needs support has such a relationship, and not every clergy member is trained to offer personal spiritual care.

To fill this gap, the discipline of spiritual caregiving was developed in Israel, beginning in 2004. One of its strongest advocates, Dr. Einat Ramon, is the founder and director of the Marpeh Pastoral Care Program, which began at the Schechter Institute of Jewish Studies in Jerusalem in 2012.

The name of the program is taken from a phrase in Proverbs 12:18, *leshon hachamim marpeh*, which Ramon translates as “the language of the sages can heal.”

Ramon earned a bachelor's degree from the Hebrew University, a master's from the Jewish Theological Seminary in Jewish studies and a doctorate in religious studies from Stanford University. She was an ordained Conservative rabbi but no longer identifies as such. Today, her focus is on educating the world about spiritual caregiving.

What is spiritual caregiving?

“Spiritual care focuses on the spiritual dimension, as different from the emotional dimension. Sometimes they overlap. Spiritual distress or spiritual discomfort or need has to do with issues of faith, crisis of faith, or lack of faith or lack of meaning in life. All of those things are spiritual issues,” Ramon elucidated.

“People's sense of loneliness comes from lack of community, lack of meaning in life. Different stages in life evoke those challenges. When we come to the person, we do a spiritual assessment. What is the spiritual world of that person? What gives that person meaning in life? To talk about God? To look at art? Music?”

Ramon further explained that spiritual caregiving, referred to in Hebrew as *livui ruhani*, is an “expansion of *bikur holim* [the mitzvah to visit the sick]. A sick person needs someone to visit him or her, to listen and see what would give that person hope, meaning, purpose of life, comfort. We're looking for spiritual resources to bring to the client and help them find their own resources.”

In some respects, pastoral care is similar to chaplaincy and the related discipline of pastoral counseling. Its distinctiveness lies in three primary areas. The first and most obvious difference is that most of the students in the Marpeh program are lay people, not clergy members.

Ramon explained, “It's a great Israeli innovation to uncouple spiritual care from clergy. The Israeli model makes a lot of sense and could work in other multicultural societies.”

Furthermore, she noted that a significant percentage of the Marpeh students are their 50s and 60s. None are younger than 35.

“This is a time of life where people reflect on issues of



MARPEH FOUNDER and director Dr. Einat Ramon. (Itai Nadav)

meaning of life,” she commented, explaining why a focus on spiritual caregiving would resonate with mature adults.

LAURA SPERBER, who made aliyah from New York in 1977, has completed the Marpeh coursework and is busy amassing the required 400 hours of practicum. She is one of the founding members of Kibbutz Yahel in the Arava.

Twenty years ago, Sperber studied shiatsu massage and held a number of social service positions on her kibbutz, but studying to be a spiritual caregiver is an otherwise complete departure from her career as a systems analyst and computer programmer. She noted that students are admitted to the program on the basis of life experience, and that the field is dominated by women, a significant percentage of whom are trained nurses.

Shai Kubitsky who was born in Israel and lives in Zichron Ya'acov, is in his fourth semester of the training program, which he is pursuing as part of a master's in Jewish studies at Schechter. He also works full-time as a software engineer.

“Over the years, I studied all kinds of alternative therapies. I thought I might become a therapist, but I didn't. I do have the personality. It did take me a while to be both an engineer and do this. That's who I am, even though it doesn't fit intuitively,” he reflected.

Sperber and Kubitsky are typical Marpeh students, mature adults who have accumulated significant experience in other disciplines and made a midlife decision to train to accompany people on their spiritual journeys through illnesses or other difficult hardships.

The second unique feature of Marpeh is that it's an academic program, based at the Schechter Institute, an

‘People’s sense of loneliness comes from lack of community, lack of meaning in life... When we come to the person, we do a spiritual assessment... What gives that person meaning in life?’

institution of higher education. Besides the Marpeh program, Schechter offers a master's in Jewish studies, a rabbinical seminary for Conservative/Masorti rabbis, pluralistic Jewish studies in Israeli public schools, adult Jewish education for Hebrew-speaking Israelis and Russian immigrants, and more.

The third distinction is that the Marpeh program integrates a wide range of Jewish sources, from Halacha (Jewish law) to Israeli literature, in its training. “We really emphasize the Jewish part of spiritual care, through a pluralistic lens,” Ramon explained.

An example of this integration of the program's Jewish foundation is found in the opening statement of the professional Code of Ethics for the Association for Spiritual Care in Israel, which Ramon helped to draft.

The Code of Ethics states, “Spiritual caregivers in Israel must act with integrity, decency, consideration and respect toward any person in all their professional and social contacts. They must aspire to ‘judge every person to the side of merit,’ to ‘say little and do much,’ and to ‘receive every person with a pleasant countenance’ (Mishna, Ethics of the Father, chap. 1).”

Kubitsky commented, “It was important to me to study this in a place like Schechter, where Judaism is the foundation, because that is my foundation. When I know who I am and what my foundation is, I can meet anyone wherever they are, as long as they know who I am.

“Last semester, we had a course on end-of-life law and philosophy. There are plenty of Jewish resources about how they deal with things. I'm not an observant Jew, [and the training] gives you resources to understand the Jewish point of view, to see how much thought, sensitivity and wisdom the Sages put into these issues. I'm

not an expert on Halacha. Marpeh helps me find my own foundation in Jewish thinking over the years. It gives me tools, perspective and foundation.

“In my case, chances are [clients] will be Jews. I want to work in my community, and my community is Jewish. If circumstances are such that they aren't Jewish, then that's fine. I can communicate with them wherever they are.”

MOST SPIRITUAL CARE is associated with the terminally ill, the dying and the elderly. Marpeh does that and more. Students fulfilling their 400 clinical hours might work with sick people or people who are depressed, the homeless in Tel Aviv, drug addicts from the Bedouin community, African refugees, Arabs from Gaza, and more.

Regardless of the cultural background of the client, the caregiver is encouraged to honor the worldview and religious background of the client.

“Our students train in the community,” Ramon elaborated. “They train through *kupot holim* [health funds] to do home visitations. They work with many nonprofits with sick people like those who have severe genetic diseases, who are intellectually intact but primarily homebound.”

An example of such a partnership is discussed by Vered Oleinik, a social worker with the Israeli Familial Dysautonomia Organization. She spoke to *In Jerusalem* about how spiritual caregivers help her agency's clients.

“Familial dysautonomia is a severe genetic disorder that affects the autonomous nervous system. It is a rare and chronic disease with no cure. In Israel there are approximately 100 individuals coping with the disease, which has an average lifespan of 24 years. Their quality of life is extremely compromised due to grave physical limitations and lack of social and occupational placement.

“As part of my role, I provide support to these 100 families, many of which face life-threatening situations on a daily basis. This entails in-depth handling of various aspects of their lives, which is why the collaboration with the [Marpeh program of the] Schechter Institute is so valuable.

“[T]he spiritual caregiver understands the ramifications of dealing with a life-threatening disease. They [the caregivers] speak openly about death and coping and on function loss. Not everyone has the emotional strength to assist them [the clients]. Their social isolation is difficult, and that's why spiritual care is so important.

“Families coping with FD have a deep understanding of their [the patient's] condition; and death, being a constant and daily threat, is not a taboo subject. Simultaneously, those caring for FD individuals wish to provide them with motivation for life, aspirations and a horizon to look forward to. In this, the spiritual caregiver is instrumental, by providing support to the family, allowing everything to be discussed with no limitations, including fears regarding the future.”

Oleinik concluded her comments by noting that spiritual caregiving creates a unique kind of relationship. “There are magical moments between the FD families and the spiritual caregivers, that don't come from pity or condescension. In fact, caregivers often feel that they receive as much in return from FD individuals and their extended families as they give,” she commented.



AT MARPEH'S annual conference for caregivers at the Schechter Institute of Jewish Studies. (Schechter Institute for Jewish Studies)

To Sperber, spiritual caregiving means “being present, to be with someone who is going through a difficult period, not just at the end of life.” Individuals going through illness, addiction or other challenges “require more support and attention than at other times. We are not psychologists or doctors. We are not there to cure, but to be there for you.

“You can be in a hospital and see a whole variety of specialists. Nobody is relating to you as an entire human being with physical, psychological and spiritual aspects. That's really what *livui ruhani* tries to do: accompany a person through a difficult experience.

“You're not an illness. You're a person. [Spiritual caregiving is] a way of relating to situations, to try to see the whole person and be with the person where they are, without judging them or changing them or fixing them. Just supporting them.”

Kubitsky called attention to one of the most challenging aspects of spiritual caregiving. “Sometimes we are called to face an end-of-life situation, and even the most compassionate people tend to ignore the elephant in the room in such situations.

“Marpeh gives us the opportunity to talk about death and dying so when you are with a person who is dying, it becomes possible to talk to them about death, if they want to. Not everyone wants to talk about their own death; but if they do, I am prepared to do so.”

Spiritual caregivers in Israel work in a wide variety of settings, including hospitals, senior centers, private homes, schools, hospice units and private social service organizations. Besides to the clients themselves, the work sometimes extends to supporting other caregivers, including family members and professional staff in hospitals, helping them maintain their perspective and sense of balance.

The range of activities a spiritual caregiver will engage in is equally broad and can include text study, talks about finding meaning in life and in death, meditation, music, recitation of Psalms, playing games with younger clients, arts and crafts, even baking together as a therapeutic activity. Sperber said she will do anything with her clients “that helps them feel constructive and positive. There are no strict limits to define what the activity is.”

Kubitsky explained that a spiritual caregiver needs “to be prepared for ethical dilemmas. This is where the

supervision comes in. You have someone to call, if you're not quite sure what to do.”

“You need to want to do this kind of stuff. You need to be able to be sensitive to other people's problems, needs, desires; to be present with other people's pain, without going nuts; to separate their pain from your own. Ideally, you need to be the kind of person who can reflect on his own situation and his own pain, so you don't mix the two.”

Training to be a spiritual caregiver

According to Ramon, the field was founded around 2004. In 2006, it got a major boost when the UJA-Federation of New York invested \$7.5 million over 12 years to help develop the discipline. Marpeh was one of the recipients.

Marpeh evolved out of the field's earliest beginnings and became “an academic training

program for everyone – secular, religious, lay leaders, rabbis, nurses, teachers, therapists – anyone who wants to do 800 hours within an academic program. We take 10 people a year,” Ramon explained.

Since the program's founding in 2012, 70 students have gone through the full program. Additional students have been exposed to the principles of spiritual caregiving through the academic classes without doing the clinical work.

The program is a two-year course of study that includes required and optional courses. It can be integrated with a master's in Jewish studies from Schechter or taken independently as a certificate program. Graduates of Marpeh can apply for certification through the Israel Association of Spiritual Care.

Graduates from other helping professions, such as education or nursing, can include spiritual caregiving as one of many tools in their professional toolbox, or they can be full-time spiritual care providers.

Sperber explained that “the studies are accompanied by a 400-hour clinical practicum done with a mentor who guides you through the process. A great deal of class time is spent processing cases with fellow students.”

At this stage, the Marpeh program is not offered in English, and students need a very high level of Hebrew to deal with the material. In spite of its pluralistic nature, Marpeh attracts a number of haredi students.

“Because Judaism is the basis of our material, they feel more comfortable coming to study with us. Non-Jews usually pick other programs,” Ramon explained.

Ramon believes that “Israel is the perfect place for the growth of the field of spiritual caregiving,” because the pluralistic nature of the field matches the pluralism of Israel society. Spiritual caregiving “really gives room for each theology,” she noted.

Although there are a few other places in Israel where people can train in spiritual caregiving, given its unique features, Ramon believes the Marpeh program is “really paving new roads of this professional training in Israel.”

Reflecting on her long-term goals, Ramon noted, “I want to spread the tools and perceptions of spiritual care, which can be provided by volunteers and family members, not just professionals. Spiritual care is a way of looking at life. What is the existential meaning of our lives and faith? It can be done by anyone.”

“I would love it to spread everywhere,” she concluded.