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Living together when the shadows grow long

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As the casualties mount in Gaza, and as our young soldiers fall and their families pay the ultimate price – our nerves are getting very raw.

I was a young department director at ALYN Hospital Pediatric Rehabilitation Center a decade ago when I first learned of the concept of “cultural sensitivity in health.” We can take better care of our patients, I learned, if we understood better their cultural concepts of sickness and healing, their faith and their folklore. Together with the Jerusalem Inter-Cultural Center we developed a curriculum which helped us make ALYN more geared toward our patients’ families.

This might be a well-established concept in the United States, but it was pretty novel in Israel. It was a huge undertaking, the crux of which was to convince the hospital management that a problem of which they were not aware was now worthy of some attention and budgeting. We needed to change. We participated in workshops and simulations, translated forms, and created opportunities for learning about the different cultures. We improved the Shabbat conditions for the halacha-observers among our patients.

We added foods to suit the palate of Russian families and Ethiopian immigrants. Many of the professionals learned Arabic, and medical translators were added to the staff. We made sure that all the signs and noticeboards throughout the hospital carry messages in three languages and that the patients’ daily therapy schedules be printed automatically in their mother tongue.

We became one of the first hospitals to add a prayer space for Muslims, and we renovated our synagogue.

We changed the seasonal office toasts for New Year and Passover to alcohol-free events, so as not to exclude our Muslim personnel. Eventually, our hospital protocols became the basis for a directive issued by the Health Ministry to all hospitals in Israel, and contributed to the implementation of these concepts throughout the Israeli health system. It became one of ALYN’s signature programs, and it is still evolving.

For me, not only is this project dear to my heart, it was also my entry ticket into the Wexner program, and propelled me toward my current position as general director. I am honored and humbled to hold this position, and very proud of our staff.

ALYN, equally serving children of Jewish and Arab descent, Orthodox and secular, olim from Ethiopia and Russia, provides cutting-edge rehabilitation for injured children or those with congenital or degenerative conditions. Almost half of our patients are non-Jews, and our staff reflects Israeli society: unabashed uncovered heads like mine working together with wearers of kippot and hijabs.

Anyone who knows Israelis can attest that we are quite hopeless in recognizing boundaries – no political pun intended. We tend to share our private lives with our co-workers, and we bring our work home.

We wear the same clothes for work and for play, and we use the same language in and out of the office. This means that we have difficulty in putting aside our personal identities and donning professional uniforms of

attitude at work. Cultural differences jar and stand out unabashedly in ALYN. In order to succeed in making ALYN a “culturally sensitive environment,” the staff has to be trained continuously. It isn’t easy. Every new worker or group of young volunteers bringing its own agenda into our space can rock the boat.

So when the three teenagers – Naftali Fraenkel, Gil- Ad Shaer and Eyal Yifrah – were abducted, we had to address moments of tension among some of the Jewish workers who did not feel that there was “enough empathy” from their Arab colleagues. The news of the boys’ cold-blooded murder worsened the stress. The heat rose when Muhammad Abu Khdeir was brutally murdered in retaliation. The fact that Naftali was one of our doctor’s cousins and that Muhammad was the cousin of another worker made it all even more personal.

While many people in Israel, including the families of the murdered teenagers themselves – tried desperately to calm the situation, gangs of right-wing vigilantes attacked people on the streets of Jerusalem for speaking Arabic or wearing a hijab. At the same time, the shelling from Gaza began, and within days ALYN Hospital, like all of Israel, became a place where emergency protocols, air-raid shelters, drills, sirens and explosions are part of the work-day. Our patients are as safe as they can be. Jewish and Arab children, Israeli and Palestinians, children from Gaza and Gush Etzion dream similar dreams at night and go through their therapy sessions during the day.

For us adults, however, things are more complicated.

The atmosphere in the hospital reflects every nuance. As the casualties mount in Gaza, and as our young soldiers fall and their families pay the ultimate price – our nerves are getting very raw. Squabbling between co-workers has been reported. Inappropriate or insensitive reactions of some family members to TV news reports anger other parents. Slurs on our Facebook pages (equally from Israel bashers and anti-Arab hate-spewers) aim to inflame and provoke.

The therapists and doctors are nagged by the constant need to react carefully to edgy and snappy people.

It is as if we are all wearing our skins very thin.

Every word out of place, every inkling of disrespect for another’s feelings, threatens to blow up the bubble of cooperation and co-habitation.

The conflicts surrounding us are huge and make our problems seem trivial in comparison but we stand firm that if we succeed in keeping ALYN a safe place, it can once again be an example and a beacon to other parts of society.

What we have created inside ALYN is an ecosystem which is amazingly vibrant and promising, but it is young and vulnerable as well. Our bubble of tolerance and normalcy is threatened by the ongoing strife.

I am optimistic that we can hold the fort, and keep ALYN a haven of tolerance and diversity. My senior team needs to invest considerable effort in this balancing act. It isn’t easy, but we will overcome. I hope the leadership of both sides realizes the need for healing and tolerance, and prays for the day when ALYN will not be unique in its striving for coexistence.

The author is the director general at ALYN Hospital Pediatric and Adolescent Rehabilitation Center.

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