

Bikkur Cholim (Visiting the Sick)

In each morning's davening we are reminded of the sanctity and, incredibly, the pay-offs - of the mitzvah of bikkur cholim. There is a great richness of these rewards - we are reminded in Chassidus that G-d does not remain in debt. I remember one patient I visited many years ago. He'd been on the hippy trail since the sixties that had led him from the United States and then throughout Asia. It had been a very long party that was not over. He had a nasty infection which he needed intensive intravenous therapy. He was not amongst those visited by available relatives or friends. He expressed joy when I introduced myself.

I asked him how he was and he replied expressively, "The doctors are frightened - that I might survive", which reminds me of a saying of the Breslov Rebbe. The Angel of death complained that he was given too big a job to do - that it was too much for one being. Therefore he was given assistants: the doctors.

When we perform the great holy mitzvah of bikkur cholim we are all like doctors. The Torah tells us that the visit diminishes the illness by one sixtieth. There might be a case

then to make for leaving a hefty bill.

One of the early trials of Avraham was his bris. G-d Himself then made the first "friendly visit". These visits continue. An interesting law is that we are not permitted to sit on a patient's bed, G-d's presence, the Shechina rests there. We are reminded then of the Shechina resting in the Beis HaMikdash, where one could also not sit.

Bikkur Cholim is generally a neglected mitzvah. Illness can be hidden, especially mental illness with its lingering cruel stigma. There is no discrimination of stigma in the halacha concerning visiting of the mentally ill. One can argue for there being more of an obligation of Bikkur Cholim for the mentally ill. The suffering of the patient and those around them can be more severe, disabling and consuming them for many of those suffering physical illness alone. Not unusually the two are combined.

Viktor Frankl's fantastic life work was to extol the virtue of a self transcendent meaning focus as a moment-to-moment goal in a person's life.

Lorraine Levy and those supporting her Wings of Care together with those visited



Viktor Frankl

achieve marvellous self-transcendence. And G-d will fill the bill!

Wishing a a sweet peaceful healthy successful and joyous year for all associated with Kanfei Chesed, the Jewish Mental Health Network and all of Klal Yisroel.

Dr. Mat Gelman

Jewish Issues in Mental Health

It is common knowledge to many consumers, service providers, or friends/relatives of consumers that it's alright for an evangelist to talk about conversations they have with G-d but to watch out if you're in a mental hospital that you don't let anyone hear you say that you did converse with Hashem.

If we cut to the chase - Just what is there to be said about the close tie-up between mental wellbeing and a good spiritual connection?

There is a new science being developed that identifies a part of the brain that is held responsible for our spirituality called Neuro-theology.

I remember reading one of Rabbi Z Pliskin's books - it may have been 'Growth through Torah' and discovering him saying that one's mental health can be improved through learning Torah. I was impressed by this and found it easy enough to check out as I was in therapy at the time, finding the benefit of Torah learning.

Planning the launch of 'Wings of Care' I found myself closely drawn to the advice of our rabbinical leaders. In my case it was the orthodox community I pivoted to and I got an amazing amount of support, untiring time spent with me, and encouragement to go ahead with the venture. I also noticed various other denominational bodies focusing on supporting their congregants, Prahran

Mission for one as well as the Catholic communities' facilities. I had been given good advice by an experienced social worker at the then Jewish Community Services to talk to our Rabbis.

We decided to hold education programs for the community and in those early days of our existence I remember being amazed when our speakers brought Jewish texts to support their points. With our help-line, people often ring up because they've read about us in the Australian Jewish News.

Around the Yom Tovim family problems that make people anxious, seem to surface sometimes.

Our latest group formed, the Mutual Support Group, is proving beneficial just as much for its Jewish content as anything else. This program was developed out of a need by consumer members of our community to get together for a chat once a fortnight. We now have a qualified occupational therapist giving of her time to help us with talks on a variety of topics that we decide on as a group, all to do with our mental health. One of our sessions was on Chol Hamoed Succot and so we had supper in the Succah. A spiritual discussion followed. We are planning sometime soon to develop a hospitality component to our programs where consumers will be invited to community members' homes for a Shabbat and/or Yom Tov meal.

Our 2002 training program for volunteers

for 'friendly visiting' had a spiritual component to it, when one of our trainers read a piece from 'Understanding Troubled Minds' (Authors Bloch and Singh), chapter on 'The History of Psychiatry' - an excerpt from Psalm 34 alluding to mental illness. We had talks by Dr Paul Brown "Unification Spiritual and Psychological" and Rabbi Gideon Fox. The function was well attended. It was no small coincidence that the topic connected these two issues. I am told that there is a new wave in psychiatry to start to recognise the connection between these two components, Jewish issues and mental health. I for one am an advocate of this theory mainly because I have experienced it!

Going back to the paradox that the evangelist is heard and the mentally ill is discredited when it comes credibility pertaining to prayer and conversation with G-d. Many a truth is dressed up in jest.

Maybe one day the mentally ill will be credited as much as the evangelist in his or her desire and ability to converse with G-d.

Lorraine GRUMD Levy
President Wings of Care
(Kanfei Chesed) Inc.

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Caulfield South
613 Glenhuntly Road
Caulfield South 3182
Phone: 9532 8417
Email: caulfieldsouth@snapprinting.com.au



JEWISH MENTAL HEALTH NETWORK (VIC)

Mission Statement

Victorian Jewish Mental Health Organizations linking together as a Network, participating as a resource with each other and to the community by the process of referral. We are also providing a forum for sharing knowledge and professional expertise with each other and the community.

Aims. To provide

1. A raising of consciousness of mental health issues in the Jewish community.
2. Improved services for the Jewish community resulting from organizations being more aware of each other's roles through networking. To investigate solutions for the filling of gaps in the service and avoid duplication.
3. An increase in community awareness of Jewish mental health organizations and professionals as well as of other individuals and organizations acceptable to the network, and how to access these.
4. An opportunity to exchange mental health information and expertise between participating organizations.
5. Liaison with Jewish mental health bodies from interstate and overseas.
6. A public advocacy role for improved mental health services in relation to the Jewish community.
7. An opportunity for wider community mental health professionals to access Jewish mental health professionals and organizations.
8. To publish a newsletter publicizing services, projects and concerns of the network and to compile and update lists of recipients of the newsletter.

On 14th July 2000 Dr Mat Gelman, an associate of mine in Wings of Care gave me a client to "friendly visit" in my capacity as co-ordinator of the volunteer program. Her name was Virginia - Sarah bat Rut.

I took it upon myself to keep in touch with her for about two years. She suffered with a mental illness and breast cancer. Although somewhat isolated from the Jewish community, she would at times attend Waverley and Kimberley Synagogue. I was new to this area of service - I sensed a need in her, and responded to it. At first it was hard-going - she spoke in a low, slow, depressed voice and I had difficulty getting any enthusiasm into our conversations.

I remember deciding that she probably didn't feel she had anything currently to be enthusiastic about.

She would talk though with pride, about her son Dan and her happy memories of volunteer work on a Kibbutz in Israel. Through the generosity of one of our volunteers she received "shallach monos" lollies on Purim and honey cake on Rosh Hashanah. She lived in Glen Waverley and I am in Caulfield, I'm without a car and have limits to my time available so we kept this relationship going sharing our experiences and feelings over the phone. I gave her a Jewish calendar, one year, at her request. She explained that this way she would be able to know when the festival times came around. I remember a lovely birthday card she gave me in the first year and I wrote to her when I was in Israel for one of my son's weddings.

She started asking me more about Wings of Care and became privy to and supportive of our activities including the conference launch of the Jewish Mental Health Network (Vic) April 28th 2002. This was rather incredible because, you see, she had been in and out of Peter Macallum Hospital around that time, getting weaker and weaker. She was, though, coping bravely and well.

Over the two years that I was privileged to know Virginia a cheerful, warm and supportive atmosphere developed in our relationship. It was a transformation from those early days. The last conversation that we



Virginia Frances Halloran
13/9/1958 - 13/6/2002

had was full of fun. We were laughing and joking and she was initiating it. About four weeks before she passed away I invited her to my place. She came with her devoted husband John. Her lovely son Dan is an outstanding young sportsman and mensch. I was away in Israel when she died. I felt a sad loss when I heard the news.

I want to dedicate this first copy of our Jewish Mental Health Network Newsletter to the blessed memory of Virginia - Sarah bat Rut.

She reminds me of Wings of Care's beginning and its increasing maturity. Through our chats I believe she came incredibly 'out of herself' including becoming interested in what our organisation was doing. It was her way of giving back what she had obviously gained from our connection, I suppose.

So thank you Virginia for the privilege of knowing you and for your support, friendship, cheerfulness and bravery.

I hope that these newsletters will be filled with information and anecdotes that will interest and help consumers like Virginia, our esteemed volunteers, professionals and the general public for many years to come - with G-d's help.

MEMBER ORGANISATIONS OF THE NETWORK

Australian Jewish Psychologists
Chesed
Chevra Hatzolah
H.E.L.P.P.
The Holocaust Centre
Institute of Judaism & Civilization Inc.

J.E.M.P.
Jewish Care - Sydney Guest of Honour
Jewish Care - Melbourne Inc.
Jewish Chaplaincy
Jewish Taskforce Against Family Violence
Wings of Care - (Kanfei Chesed) Inc.

Conference Date: Sunday 20th October
572 Inkerman Road Caulfield 10:30am - 2:30pm

International Symposium on Psychotherapy and Spirituality

Perhaps the first use to which the Network was put, after its inception, was the dissemination of publicity for a symposium on psychotherapy and spirituality. The symposium was hosted by the Institute for Judaism and Civilization and had the participation of two international scholars, Professor David Guttman, formerly Dean of Social Work at the University of Haifa and now at Bar Ilan University, and Professor Kate Loewenthal from the University of London.

The topic was particularly germane to a Jewish setting, since Judaism is, of course, not simply a cultural but (pre-eminently) a spiritual phenomenon. Professor Guttman, a world expert in gerontology (the study of caring for the aged), and a student of the late Victor Frankl, author of *Man's Search for Meaning*, stressed the role of meaning

in life for psychotherapy. He was very enthusiastically received in a number of Victorian and interstate venues. Professor Loewenthal is the author of the important introductory work, *The Psychology of Religion*, which broaches many crucial issues on the religious matrix of mental health. Papers from the

conference should soon be ready, and may be obtained from the institute (Tel 03 9527 5902 or email ijc@mail.com)

Rabbi Dr Shimon Cowen,
Director, Institute for
Judaism and Civilization



From
Left to Right:
Professor Kate
Loewenthal,
Rabbi Shimon
Cowen,
Professor
David
Guttman.

Advocacy

I would like to comment on the fact that the service of advocacy was mentioned at our Jewish Mental Health Network launch earlier this year. The outcome of this discussion at the conference was that on advice from Emmy Elbaum and consultation with Ben Bodna the later has agreed to provide special training for some of our volunteers in this field. This training will take place in a month or so and will be part of our program, offered to suitable applicants on an ongoing basis as part of our volunteer training program for "friendly visitors" in Wings of Care.

Lorraine GRUMD Levy
President Wings of Care
(Kanfei Chesed) Inc.



**PSYCHIATRIC
OUTREACH**

Jewish Holocaust Museum Professional Development



Holocaust survivors in our community are getting older, becoming more frail and some are developing dementia. They are once again experiencing losses such as the loss of loved ones and the loss of many of their previous abilities. They generally have more time available to think about the traumatic experiences of their past.

The Jewish Holocaust Museum, often in conjunction with Jewish Care's Holocaust Survivor Program, provides workshops and seminars for professional groups in the helping professions who work with survivors, to help them understand the people they care for. The Jewish Mental Health Network

conference formed a valuable environment for forming the linkages to promote this. Over the last few months a number of programs have been organised for staff from Jewish Care, student nurses and various other groups.



**Jewish Holocaust Museum and
Research Centre.**

FOR FURTHER INFORMATION PLEASE CONTACT:
Education Department
Jewish Holocaust Museum and Research Centre
13-15 Selwyn Street, Elsternwick 3183
Phone: (03) 9528 1985 Fax: (03) 9528 3758
Email: education@holocaustcentreaustralia.org.au

CHEVRA HATZOLAH MELBOURNE INC

A SCENARIO CASE STUDY – PATIENTS WITH "HEAD PAIN" - LET'S EDUCATE

Hatzolah Responder 8, please respond to a 65-year-old patient with central chest pain. Unit 8 received and on my way. As I make my way down the street to this emergency, I play over in my mind all the relevant questions I will need to ask this patient. I arrive at the residence and collect my emergency kit, defibrillator and thoughts and make my way into the residence. A distinguished looking lady greets me at the front door and we exchange pleasantries. She identifies herself as the patient and we sit down and I begin my assessment. She is complaining of heart palpitations and appears



worried. I continue my assessment and as another Responder arrives we begin treatment of a patient suspected of having a heart attack. I query the patient on her medications and she shows me a box full of cardiac related drugs.

As my training has taught me I reassessed in my own mind the situation in front of me and something worried me.

Upon questioning the patient as to when the palpitations started and what the patient was doing at the time, she advised me that she was on the phone and that the call had upset her immensely. She suddenly became extremely emotional and advised me of some of the issues that were upsetting her. I then asked her whether she was upset often and she replied yes. The penny then dropped and all the medical equipment was put away and the listening equipment was turned up. She then went away and handed me her box of medication that no one other than her psychiatrist knew about. We spoke about how it was "okay" to have "chest pain" but not to have "head or heart pain". The phone call had caused the distress that led to the palpitations

and the associated medical problems. The key in this case was to deal with the cause of the palpitations not the symptoms. We spent over an hour at the residence chatting and left satisfied that the distress had been resolved and surprisingly the medical symptoms had disappeared.

I have been to lots of similar cases and believe that whilst educating the public is a critical task, we need to spend time educating people with Mental Illnesses that it is okay to have "head pain", and that they need to be honest and upfront (as hard as I know it is) with Emergency Service workers.

I am not naïve enough to believe that I will walk into an emergency and hear the words, "Hi I Mr Goldstein and I have Bipolar and I am currently depressed, however once a little bit of trust is gained, I hope that the patient should feel comfortable enough to discuss all their medical problems.

Danny Elbaum
Operations Manager
Chevra Hatzolah Melbourne Inc
Emergency Contact Ph: 9527 5111



THE OTHER PEOPLE IN OUR COMMUNITY

As a psychologist, I consider the most pressing social welfare concern in Melbourne's Jewish community to be the belief that people with social welfare issues are different from us, that they are "other". By being "other" people, we then make it easier for us to believe that it is the responsibility of other agencies, other individuals to help these "others". For example:

- Our lives are difficult so others can help the "others", or
- We have worked hard to get where we are despite our problems, so why don't these "other" people with problems work hard as well?, or
- The social problems are too big for us to do anything about, so let others do something, or....

This description of the "other" is a common tool for politicians to use to isolate a small group in society eg the Jews in Europe in the 1940s. We personally use it as a way of distancing ourselves from people with mental-health problems, physical disabilities, from people or non-frum people, etc.

How would our beliefs change if we saw these "other" people as having the same humanity as us, with the same hopes, needs and feelings?

Nathan Kotler
H.E.L.P.P.

This article was first published in the Australian Jewish News May 23 1997

Living with the Holocaust

Visiting Swedish Psychologist and Holocaust survivor Heidi Fried tells Margaret Safron why it is so important to talk about the Shoah.

If Holocaust survivors do not work through their trauma, the problems will be carried on to the next generation, Swedish psychologist and Holocaust survivor Heidi Fried, told the Australian Jewish News last week.

And if the second generation then do not work through the issues, the trauma will be carried on to a third generation, she said.

"I want to make people understand that by talking, they get it out of their system" Mrs Fried said.

"Of course it is painful and you can never get rid of the memories but you can learn to live with them and find something meaningful to do with your life."

Mrs Fried, who works as a psychologist and therapist at a centre in Stockholm for Holocaust survivors, visited Australia to attend an international trauma conference in Sydney. A support group she developed for Holocaust survivors in 1984, "café 84" was used as a model for a similar group in Sydney.

Mrs Fried with her sister Livi, has also established a group for child survivors and a dialogue group to facilitate communication between the first and second generation.

Although this article appeared in the Australian Jewish News in May 1997 it reflects issues that are still relevant today and suggestions for the future are significant.

For future publications readers are invited to submit to the Reader's Forum comments they wish to air on social/welfare issues that concern them in our Jewish Community.

The issues that are encouraged to be raised can cover the life cycle from the care of children and adolescents with emotional disabilities to adult psychiatry/psychology and care for the aged with Dementia.

**Please send your letters to Jewish Mental Health Network (Vic)
c/o Post Office Box 524 Elsternwick 3185**