

Careful Speech

Metzora contains lessons in ethical communication / 8

Healthy Legs

How to prevent or alleviate a holiday-prep charley horse / 10

Ancient Surprise

Tel Motza excavations unearth early religious practices / 11

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In the face of great tragedy

Marc and Chantal Belzberg created OneFamily.

NICOLE GRUBNER FINN PARTNERS

In the summer of 2001, Jerusalem-ites Marc and Chantal Belzberg were busy planning their daughter Michal's bat mitzvah. Relatives from Vancouver and New York were booking their flights to Israel in anticipation of what was to be a huge and festive family gathering. Then, on Aug. 9, 2001, just one month before the bat mitzvah celebration, a suicide bomber entered the Sbarro pizza shop in Jerusalem and executed one of the most notorious terror attacks of the Second Intifada. The family was faced with an uncomfortable question: How could they possibly celebrate in the face of such great tragedy?

The Belzbergs decided to cancel the party and instead committed themselves to a bat mitzvah project. They would visit and console the injured and bereaved families of the Sbarro bombing, and the money that Michal's extended family would have spent coming to Israel for the celebration would be collected and turned into a fund for these victims of terror.

Less than a week later, another suicide attack wounded 15 Israelis in a café. The needs were clear, and the Belzbergs felt that they had to try to assist these latest victims of terror, as well.

"It turned into a family project, a long-term commitment that we took on after several months of working with the victims," Chantal Belzberg, now the executive vice-chair of OneFamily, recalled. "We came to the simple conclusion that if they need help, they are our family. We wanted to help every one of them."

The small family project quickly blossomed into a large nonprofit operation. From the tragedies of the Second Intifada, OneFamily, a national organization dedicated to the rehabilitation of victims of terror attacks and their families, was born. Though maintaining the organization was a daunting task, a strong family history of commitment to the Jewish community prepared them for the challenge.

The Belzberg family has roots in Vancouver that go back 46 years, when they moved here from Edmonton in 1968.



Marc and Chantal Belzberg with Member of Knesset Danny Danon, centre, at OneFamily's August 2013 launch of *Longing for a Hug*, an exhibit of original works of art created from the personal stories of bereaved Israeli children.

"I went to Eric Hamber High School but, for Grade 10, my parents sent me on a program called Haddasim," Marc Belzberg recalled, referring to the program sponsored by Hadassah-WIZO that sent groups of Canadian teenagers to Israel for the year in order for them to serve as youth ambassadors upon their return. Along with the deep connection he forged with the land of Israel, he also developed a love for philanthropy, a familial commitment he picked up in his youth.

"My father, Samuel Belzberg, was involved with and actively supported so many institutions and programs, both in Vancouver and throughout North America. He supported Simon Fraser University and started a leadership program called Action Canada for the 15 best and brightest future leaders in the country. In the Jewish community, he supported the Conservative synagogue Beth Israel and [an] Orthodox synagogue, Schara Tzedek. He invested in Jewish education in Vancouver through his work with Vancouver Hebrew Academy, Vancouver Talmud Torah, the former Maimonides [Secondary School], and now King David High School, as well as NCSY, and he helped preserve Jewish history, contributing to the foundation of the Wiesenthal Centre and the Museum of Tolerance in Los Angeles."

Imbued with a sense of communal responsibility and a love for Israel, Marc and

Please see **FAMILY** on page 2

Teaching with a lasting impact

Dr. Neil Pollock will train doctors in Haiti in circumcision.

BASYA LAYE

Dr. Neil Pollock specializes in circumcision, from newborn to adult, and adult vasectomy. As a leading expert in circumcision, he has traveled around the world to train physicians and, this summer, he will head to Port-au-Prince, Haiti, to teach a team of doctors in medical newborn and infant circumcision.

"After carrying out 50,000 infant circumcisions and traveling recently to Turkey, China and Africa to exchange ideas, I have evolved my technique to make it applicable to infants, children, teenagers and adults," Pollock told the *Independent* in a recent interview. "I have developed a technique to do circumcision in this older age group under local anesthetic without using sutures and using, instead, a cyanoacrylate skin glue that closes the wound. Being able to do the procedure under local anesthetic and with skin glue instead of a general anesthetic in hospital provides for a much simpler, easier, quicker, safer and improved cosmetic outcome for patients."

This method, he said, is unique. "I'm unaware of this approach being used anywhere in [Canada] except in my clinics. The older age group is currently requesting circumcision for reasons like reduction in disease transmission, preference of their partners and improved hygiene."

In 2008, Dr. David Patrick was the head of the B.C. Centre for Disease Control. Pollock said he was asked by his colleague "to teach my surgical techniques for circumcision in Rwanda, where they were using scissors and stitches, without anesthetic, and their surgeons desperately required training in an alternative quick, safe and painless infant circumcision technique that would be accepted by their population. In coordination with their surgeons, I planned with my team a five-day surgical training mission that year and flew to Rwanda. I have been in contact with these surgeons by email since my trip and they have informed me that they are using my technique effectively and safely throughout the country now."

"The impact of our humanitarian effort became known in the international medical community, which led to Dr. Jeffrey Klausner, professor at [the University of California, Los Angeles] Medical School, contacting me recently and asking me to essentially replicate the work I did in Rwanda, but this time in Port-au-Prince, Haiti, where they are being overwhelmed by the number of patients requiring treatment for AIDS and would receive huge benefit from introducing a preventative strategy to reduce AIDS transmission, such as infant circumcision, which will reduce the risk of their circumcised infants lat-



Dr. Neil Pollock instructs a team of surgeons in Rwanda on carrying out his technique of circumcision.

er contracting AIDS when they hit sexual age, by over 60 percent. Its impact and effectiveness has been referenced metaphorically to be like a vaccine." Circumcision, he added, "works to reduce AIDS by removing the portal of entry of the virus, which is the foreskin."

Klausner, a professor of medicine in the division of infectious diseases and the program in global health at UCLA, is an advocate in the use of medical male circumcision for the prevention of sexually transmitted diseases and HIV. He volunteers with GHESKIO, an organization run out of the Centre for Global Health at Weill Cornell Medical College in partnership with the Haitian government. Operating primarily in Port-au-Prince, their work is supported by Haiti's first lady and has a mission to combat HIV and improve conditions of maternal and child health. GHESKIO will host Pollock's training in Port-au-Prince.

Raised in Winnipeg, Pollock explained that he decided to become a doctor "because I had a strong interest in sciences, medicine and surgery from a young age." Early in his career, he decided to create a special focus on circumcision and vasectomy, and built a highly focused practice and a well-tested – and respected – technique.

"My interest in developing a safe, quick and painless approach to circumcision for the medical community in B.C. arose initially from some of the rabbis approaching me approximately 20 years ago and encouraging me to become a mohel in Vancouver," Pollock said.

The benefits of newborn and infant circumcision are many, but the rates of the procedure vary from region to

Please see **HAITI** on page 11

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HAITI from page 1

region, and remain contentious to those opposed to what's seen as elective (non-consenting) surgeries for babies.

Pollock noted, "The most important change recently in how the medical community has come to view circumcision is expressed in the ... consensus statement from the American Academy of Pediatrics released in late 2012 declaring that 'the medical benefits of infant circumcision outweigh the risks.' This is the strongest statement of support ever issued by the American Academy of Pediatrics."

"The benefits of circumcision are multiple; they include reduction in the risk of urinary tract infection, which can lead to kidney infection and renal failure, reduced risk of cancer of the penis, cancer of the cervix in partners, reduced risk of balanitis (which is infection of the foreskin), and other foreskin-related problems, like phimosis." As well, circumcised males also experience a "reduction of multiple sexually transmitted diseases, like HPV, herpes and AIDS transmission. The latter is exponentially more important in places like Haiti and Africa, where a large number of the population has AIDS in comparison to other regions of the world where AIDS is less common." Possible risks include "bleeding and infection," he added, "but, in experienced hands, risks are extremely low."

Rwanda and Haiti share a history of national trauma, which has led in both countries to poor health outcomes. In 1994, at least 800,000 Rwandans were massacred by their countrymen in a genocide. In 2010, Haiti, already the victim of more than two centuries of extreme poverty, dictatorships and U.S.-led military interventions, experienced a 7.0 earthquake that resulted in the deaths of more than 100,000, and displaced 1.5 million of the tiny country's 10 million people. Since then, Haitians have been hit by serious outbreaks of preventable disease, including cholera, tuberculosis and AIDS. According to the United Nations, life expectancy is 61 years for men and 64 for women.

The health challenges that Haitians are very similar to those experienced in Africa, and the training is seen as critical in addressing those obstacles. "Like there was in Rwanda, there is a need to train surgeons in Haiti to carry out a quick, safe and painless infant circumcision technique," Pollock explained. "In regards to what accounts to gaps in circumcision rates, there may be a deficiency in trained surgeons to carry out the surgery in an acceptable manner, along with variations in social and cultural norms that influence the choice to have circumcision."

The ultimate intention of the training, Pollock said, is "to set up a national program

accepted by the population, to introduce infant circumcision safely and effectively, and have it evolve to become a widespread practice throughout the country, thereby reducing the transmission of multiple diseases, including AIDS."

Pollock's visit to Haiti will involve intensive training. "My goal is to carry out a similar plan to what we executed in Rwanda. I worked with physicians there weeks ahead to set up a surgical schedule of 20-to-30 infants per day, over four-to-five days of operating. After working with doctors on models that I brought to demonstrate the technique and do the primary teaching, they moved to assist me with the surgeries and eventually carry them out under my supervision on the infants booked for circumcision."

The training in Haiti, part of a non-governmental public health initiative, will be partially supported by charitable donations. "The commitment from my end for Haiti will include a week away from my practice and the commitment to help raise the \$25,000 for the mission to take place. The plan is to raise \$25,000 from the Vancouver community in the next seven days or so as to be able to launch the teaching mission in Haiti by the end of the summer. During the week in Haiti, I will train two physicians, who will then train other physicians once our team leaves. I will maintain follow-up with these physicians to help them manage any issues that should arise." The goal is to create a sustainable public health campaign and donated funds not only will go towards covering the costs for the week, but also for "the next 500 infants once we leave."

Readers who would like to donate to the effort "will support an initiative, which will undoubtedly over the years save thousands and thousands of lives," Pollock said. "It's intended that Haiti will become a training centre for circumcision in the Caribbean. It is likely that my technique, once taught in Haiti, will soon be shared with multiple countries throughout the Caribbean, multiplying its effect to save lives throughout the entire region. So, I'm asking readers and members of the community to reach deep and consider making a financial donation to help us raise \$25,000 in the next [several] days to allow this mission to proceed." ■

To make a donation, contact Dr. Neil Pollock at 604-644-5775 or drneil@pollock-clinics.com. "We will make it very easy for people to donate, and make arrangements for their cheques (made payable to the Vancouver Foundation) to be picked up by our team," he said. Donations can also be mailed to 4943 Connaught Dr., Vancouver, B.C., V6M 3E8.

Ancient practices unearthed

Excavation at Tel Motza points to a "pagan Yahwism."

RON CSILLAG

One might think that a significant archeological find a few hours' walk from Solomon's Temple in Jerusalem would turn up artifacts we would recognize as Jewish. But since the Judaism of the day was not what we know, the find yielded ritual objects that seem vaguely pagan, almost heretical by today's standards.

Shula Kisilevitz, the archeologist who was part of the team that excavated the site at Tel Motza, about seven kilometres west of Jerusalem, prefers the phrase "pagan Yahwism" to describe the religion of the era.

Last December, Kisilevitz and three fellow archeologists announced what they called an "unusual and striking" find, unearthed in construction for a highway: the 2,750-year-old walls of a temple, along with a cache of ritual objects that included a pedestal decorated with lions and sphinxes, pendants, pottery and vessel fragments, and figurines – two human and two animal – that may or may not have depicted deities.

The dig provides "rare archeological evidence for the existence of temples and ritual enclosures in the Kingdom of Judah in general and in the Jerusalem region in particular," the team announced.

The uniqueness of the find is even more remarkable, the archeologists said, because of its proximity to the First Temple, built, according to the Bible, under King Solomon in 960 BCE. But archeologists know little about the period's religious practices because there are hardly any remnants of ritual buildings from the era, according to Kisilevitz.

While more study is needed, the find provides valuable insights into what those rituals might have been, she said in an interview prior to her recent talk on the subject at the University of Toronto. While those practices may seem strange and un-Jewish today, they were in keeping with the rules of the time, Kisilevitz said.

Previous excavations showed that Motza functioned within the royal administration of the Kingdom of Judah, she said. "It was very

much connected to Jerusalem. [It couldn't] create its own religion. The people of Motza didn't wake up one morning and say, 'Oh, we want to create something new.' They couldn't break off so easily."

The artifacts are important because they reflect a formative time for Judaism, she noted, adding they show that the ancient Israelite faith was not always centralized in Jerusalem

and its practitioners may have used ritual objects now forbidden as graven images. "There are all these presumptions we have which we project

onto the early formation of religion," Kisilevitz said. "This temple finally shows us how the religion started out and what it really looked like at the time. They [were] doing what was common in the period."

The find also conforms to biblical accounts, which mention local religious precincts outside Jerusalem, she added. And "Motza" is mentioned in the Book of Joshua as a town in the tribal lands of Benjamin, which bordered Judah.

Kisilevitz, who works for the Israeli Antiquities Authority and is in Ontario for several months on an exchange with the University of Toronto, said the team does not know whether the human and animal figurines served a religious purpose. "It's kind of tricky and a little bit hard to say," she noted.

The archeological team believes the temple at Tel Motza must have functioned before religious reforms enacted in the times of kings Hezekiah and Josiah, which abolished all ritual sites outside Jerusalem and concentrated religious practices solely in the Temple.

Kisilevitz believes the artifacts do not conflict "at all" with modern understanding of Judaism. "We just have to change the way we think of the religion at the beginning." ■

Ron Csillag is a Toronto freelance writer. A version of this article was originally published in the Canadian Jewish News.



Above: Shula Kisilevitz

Right: A horse figurine is evidence of early Jewish ritual practice.



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