

Tazria-Metzora

Tazria-Metzora is a unique parsha, one that often elicits a groan, especially from bar mitzvah students forced to find something meaningful to say about skin diseases and genital discharges. In reality, it is the only parasha in the whole Torah that deals extensively with disease and specifically contamination and quarantine, subjects that, at least the latter two, never seemed all that relevant to me, until now.

The disease in question is tzara'at and although it is often translated as leprosy, most commentators agree that there is no clear disease with which we can identify this condition today. If a person has a nega — a sore — the priest is to examine it and might quarantine the patient for seven or fourteen days depending on the course of healing. However, if it is found to be tzar'at a more serious and pervasive condition as opposed to an individual sore, the person is made to dwell outside the camp until they are healed. When the priest determines that healing has occurred by examining the afflicted individual, a sacrifice of two birds is offered — one is slaughtered and the other bird, still living, is dipped in the blood of the dead bird before it is released — the individual, after waiting an additional seven days, shaves his head, washes his clothes, bathes, and offers an additional sacrifice.

If all of this sounds very strange, it is. As the Torah probes into the details of white blotches on the skin, and white blotches with hair, and birds, and the placing of the blood of the sacrifice on the right ear, the right hand and the big toe, one feels that one has entered some strange and bizarre world. It is striking to me that even today, thousands of years later, in a world replete with medicine and technology and vaccinations and respirators and CAT scans, disease is still very much a mystery. There is not only the priesthood of doctors and the exactness of prescriptions, which reads like this parsha does, but the sense that there is a great unknown lurking behind and beyond, that for all we know there is so much more that we don't know, that in a matter of months a disease no one ever heard of can lay the world flat and lock us at home as scientists and doctors struggle to understand a whole new virus and how it works. Whether we are thinking about the quiet of the ICU, machines pumping, or the mysteries of disease — who lives and who dies, who recovers and who does not, whose case is mild and whose is severe — or the rituals of handwashing, quarantining, mask wearing, social distancing, each with its seeming arbitrariness, its strangeness, the feeling of doing something life-giving and hence sacred — it all evokes a similar mystery to the one invoked in Leviticus thousands of years ago.

A person who does not simply have a sore that will heal but is found by the priest to have chronic tzar'at must not simply quarantine but dwell outside of the camp until they are healed. He literally must bare his head, rent his clothes, and walk through the camp shouting, "Impure! Impure!" presumably to warn others to stay away. This is so painful to read and imagining this sick person, isolated, outside the camp, calling out their infirmity to all who see them feels so beyond. And, in the same moment, I think about cancer patients with heads covered, or that tell-tale tuft of hair, or people walking

in hospital corridors in those unflattering and uncomfortably revealing gowns, hooked to IV poles, and the ways we pull away from the sick, the ways they announce themselves and the ways we shudder internally. We don't literally put people outside the camp, but to be in the hospital for any length of time, to be home, even, but sick, unable to go out, disconnected at some level from the rest of the world, is to be outside the camp.

Susan Sontag writes, "Illness is the night side of life, a more onerous citizenship. Everyone who is born holds dual citizenship, in the kingdom of the well and the kingdom of the sick. Although we all prefer to use the good passport, sooner or later each of us is obliged, at least for a spell, to identify ourselves as citizens of the other place...Any disease that is treated as a mystery and acutely enough feared will be felt to be morally, if not literally contagious."

To leave one's home today and to venture into a supermarket is to project that fear of the sick outward, to imagine that everyone is potentially contagious, morally and physically, and to place painful barriers between ourselves and others. In addition, when we imagine that this is somehow a Chinese disease or if we imagine that it will affect other people who are not us — they're older, they're sicker, they're brown or black, they're poorer — we are engaging in an equally painful and ultimately harmful thought process. Physical distance may be necessary and lifesaving right now, but the psychological distance that accompanies it, and generally accompanies all serious illness, is horrific. In a time when illness is in our face all the time, our fear of illness and distancing from it is worthy of examination.

By contrast, the priest in the parasha, functions not as a healer — his rituals never heal — but as a diagnostician. He comes to the sick person, he looks at the lesions or the skin, he decides what the appropriate quarantine is and when healing has been effected. I am struck by this image of the priest drawing close to the sick person when others shun him. Here we are told that tzara'a't is not physically but spiritually contagious, that it contaminates the altar and anyone who is in contact with a person with tzara'at is similarly barred from the holy place, and yet we have the priest himself, the very representative of holiness, visiting the sick person, intimately examining his skin, pronouncing the feared or welcome diagnosis.

Perhaps isolation is necessary then as well as now. But the priest, the exemplar of all that is sacred and holy, draws close to the sick person. Like doctors and firefighters, he runs to the fire. He presumably puts himself in harm's way. He brings no healing per se to the afflicted individual, but he brings himself, his presence, and that must have meant quite a lot. Ironically, although tzara'at is a spiritual contagion, contaminating the holy place itself, the holiest person of all draws close to the sick person, seemingly unharmed. Holiness it seems means stepping into the breach, running toward the fire, bringing holiness to the situation rather than fearing contamination. I think all of us right now are keenly aware of the holy work healthcare workers are doing. Some of the most healing words I utter to sick people are to tell them that the whole congregation is holding them in prayer. When I say that, I see them visibly relax and release, as if they

are not quite so disconnected anymore, as if the knowledge that they are still cherished and noticed by the community, as the tzara'at is noticed and attended to by the priest, comforts them.

I want to pick up now on a particularly beautiful commentary on verse 3 of chapter 13 regarding the priest's examination. The verse reads: **ג וְרָאָה הַכֹּהֵן אֶת־הַנִּגַּע בְּעוֹר־הַבָּשָׂר וְשֵׁעַר בְּנִגְעַת הַפֶּה | לָבָן וּמֵרְאָה הַנִּגַּע עֲמֹק מֵעוֹר בְּשָׂרוֹ נִגַּע צָרְעַת הוּא וְרָאָהּ הַכֹּהֵן וְטָמָא אֹתוֹ:** The priest shall examine [ra'ah] the affection on the skin of his body; if hair in the affected patch has turned white and the affection appears to be deeper than the skin of his body, it is a leprous affection; when the priest sees it [or him], he shall pronounce him unclean.

Noting the double usage of the word to see — when the Cohen see the affection, and again, when the Cohen sees it — and the ambiguity of the direct object — him or it — Rabbi Israel Joshua Trunk of Kutno writing in the 19th century noted that when checking a person, one must not only see what they lack, that is the place of affliction, v'ra'ah hakohen et hanega; rather one must see them in their entirety, as it says, and the priest will see the person. Trunk argues that the text prescribes that the priest must both look at the spot on the skin, but also see the whole person, see them in their entirety. One can only dismiss a person or even curse them, he argues, when one sees only part of them.

How often does a doctor walk into a hospital room, open up a computer screen, ask about symptoms, and make some pronouncement without ever truly seeing the person in front of them. When I was a hospital chaplain in the late 80's at SloanKettering, it was not uncommon for doctors to refer to the liver in room six or the lung in room 10 as if there were disembodied organs, not people, in the beds. When Hallel was injured, most of the doctors were truly fabulous. One resident came in, however, within minutes of her knee surgery, and proceeded to tell us how her knee would never be the same again, how gangsters bust people's kneecaps because it is ruinous, how she might not walk or run again. Did he not see a frightened 19-year old lying before him who had undergone two serious surgeries in a matter of days after a grievous accident? Did he not see our widening eyes and our inability to take in more bad news at that moment? Did he also not see that she was 19-years old, otherwise healthy, strong, and determined, and that he had no business nor was he even able to put a ceiling on her healing? Today, thank God, four months after her accident, Hallel walks, dances, and runs.

We also fail to see. We see the IV, the scarf, the gaunt face; we see the walker, the wrinkles, the cane, the wheelchair — we fail to see the whole person before us, a person who is so much more than their illness. Alan Morinis, in a book called Everyday Holiness, writes, “What appears before us when look at another with eyes of judgment are that person's accumulated deeds and habits as they stand right now, which we judge from our own vantage point. When we lower or transcend the boundaries of self, however, and draw closer so that we can feel within us the truth of that other person's experience, and so see with eyes of compassion, ...we will see more deeply to

perceive the untainted soul that is the kernel of that being — the image of the divine that is reflected in ourselves as well.” Some of the most important work I get to do, is sitting with sick or old people, hearing their stories, and seeing the fullness of their lives, their loves, their passions, their quirks, their habits. In direct opposition to being excluded outside the camp, the sick person is seen and visited by the priest. We too must see and learn to see with softer eyes.

Finally, I am struck by the very strange sacrifice made upon the priest’s declaration of health. According to the text at the beginning of chapter 14, the priest orders two live birds, cedar wood, crimson yarn, and hyssop to be brought before him. He orders one of the birds slaughtered over fresh water in an earthen vessel. He then takes the live bird, along with the cedar wood, the crimson yarn, and the hyssop and dips all of it together in the blood of the slaughtered bird. He sprinkles the mixture seven times onto the afflicted person, and then he sets the bird free.

Stranger and stranger still. I am not an expert on ancient rites, but it seems to me that the blood of the dead bird symbolically absorbs the disease which is then transferred to the water mixture. When the live bird is dipped in the mixture, it symbolically absorbs the illness before it flies free. Death and illness are symbolically removed from the afflicted person and absorbed in the water, symbol of life. The living bird, also dipped in the bloody water, is marked by the disease — but he flies free.

The ritual simultaneously demarcates the end of illness, recognizes a new found freedom, as the bird flies free, and nevertheless acknowledges that the bird has been dipped in the mixture, the memory of the disease transforms and stays with the bird even in health.

This is powerful metaphor — that illness has a defined ending and that that needs to be acknowledged for the patient and visible to everyone else — people should not be forever defined by their illnesses. Second, the bird flies free — there is a new hard-won freedom that comes from illness, not simply a return to the old, but a new freedom as one sees life differently. And finally, the bird flies free, but the bird has been dipped in illness. The illness becomes part of the person’s story even as it is left behind, it marks them, it transforms them, it provides opportunity for growth.

I don’t think we have very good rituals today to mark the end of illness. Benching gomel is a step, but for most people there are many steps along the way — being able to drive again, finishing treatment, being told you are disease-free, the 6-month mark, the one-year mark etc. We need to put attention to ritualizing these moments, as some have. I also don’t know what rituals we will create that mark the end of this pandemic. But I hope that we will create them, and that they will be meaningful, drawing on tradition while at the same time capturing the moment, in the way the 7pm cheer in New York does, and helping us come together and make meaning out of this hard time. And I hope that we will soon definitively mark its end, as the priest did with the birds, and may we find new freedom, not just our old freedom, but new ways of relating to the world and one another. I hope we will realize that freedom is not doing whatever we

please, as some at state capitals have protested, but rather freedom is the free will to choose to serve — one another, higher goals, and God. This crisis has thrown a sharp light and how deeply we are all connected and how deeply we are responsible for one another's safety and wellbeing — may we exercise our new freedom to live more responsibly and connected in service to one another and the world.