

Parsha Met'zora

De Ann Finkel
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Much of the commentary on *Parasha Met'zora* centers on the nature of the disease *tzara'at*. Its presence on the skin suggests to many commentators that it is a mark of sin, and some aspects of the return ritual for the *met'zora* seem to confirm this view. The main link to sin, however, lies in the creative reading of *met'zora* as *ha motzei-ra*: coming from evil. This suggests that the one who suffers from *tzara'at* is a gossip. As gossip can destroy a community, the afflicted is exiled from the community.

However, today I will follow Everett Fox's commentary to his translation of the Torah which suggests that this skin disease, or range of skin diseases (It is certainly not leprosy), is particularly upsetting to the community because it "looks like death", and death is the ultimate impurity. For Fox it is not so much a question of illness or of sin as of impurity. He points out that the priest is not called on to cure the *tzara'at*, or even to diagnose the rash but to identify the impurity its appearance suggests and later to certify that it is gone. If curing is needed, it happens naturally or the *met'zora* manages that on his own – or leaves it to Gd. The great concern here is that impurity is found and removed from the camp. When the impurity has disappeared, the *met'zora* is returned to the camp. I would like to point out that it is expected the impurity will disappear. The focus of the *parsha* we read today is in returning the *met'zora* to the camp – reintegrating him into the community. This requires a complex ritual.

I would like to consider the nature of this complex ritual by comparing it to some experiences I have had lately. I will begin by suggesting that being sent out of the camp is not unlike being sent into a hospital. Being in the hospital is being outside the routine of daily life. Once a hospital patient is fixed she is allowed to return to that routine life. But, emotionally at least, returning to that life is not simply a matter of leaving the hospital and going home. There is a time of readjustment to routine and the interaction with the people the patient is used to working with and having around. That process parallels the ritual described in the 32 verses we read today.

Before the ritual can be performed the healing must be effected. In the Torah this happens by itself while the afflicted waits alone and, I presume, self absorbed: watching for signs that there is no more sign of the *tzara'at*; in the hospital a great deal is done to cure, fix or diagnose the problem. Even so, even with all the people around, the hospital patient is self absorbed. The hospital is itself a community, but the patient is not a member – rather she is an object of observation for this other community. She is on a heart monitor; the oxygen level of her blood is checked continuously, and her blood pressure is checked every four hours – as is her temperature; the nurses keep careful track of her Is and Os. As they observe her, she observe herself, asking about her temperature and blood pressure. She watches the heart monitor to be sure her heart is still beating, and she keeps careful track of every glass of water she drinks. Once it is determined that she can go home – that the *met'zora* shows no signs of impurity – preparation for the return begins.

These preparations begin once the priest has declared the *met'zora* free of all signs of *tzara'at* and eligible to return to the community. Because ritual helps us bridge gaps, like that between life and death, much of the symbolism in this ritual, which declares that we no longer carry signs of death involves blood and things that look like blood. The blood of a bird along with wood of cedar, scarlet of worm, and hyssop. The blood of one bird and the other blood-like ingredients are mixed over live water and are sprinkled on the returning now un-*met'zora* and on the live bird, which is allowed to fly away into the wilderness. The no longer afflicted leaves the wilderness and sits outside his tent for 7 days. At this point the hospital patient is ready to return to the community and yet not ready to return. She is still covered with the things of the hospital; she may still have dressings to care for and medications to take. She can leave the hospital, but she cannot return to work for a week – or more.

After seven days the un-*met'zora* is allow to separate himself from the experience of the wilderness. He washes himself and his clothes and he shaves. On the 8th day – like the day on which he has first entered the community through the *brit milah* – he undergoes a ritual that reintroduces him to the community. It begins by his approach to the Tent of Meeting. His ritual involves 2 lambs, grain and oil for *Hattat* (purification) and *Asham* (reparation). Both of these rituals signal a returning closeness to Gd. In this case they also signal a returning closeness to the community as the un-*met'zora* reenters the community by approaching the Tent of Meeting. This ritual also involves blood, the blood of the lamb which, along with the oil, is placed on the extremities of the *met'zora* as they are placed on the priest as his consecration indicating that the un-*met'zora* is again a member of the nation of priests.

For the modern hospital patient, the parallel ritual is *gomel*. Its place in the Shabbat service signals the return of the patient to a closeness to Gd and to the community by signaling her ability to return to the communal celebration of Shabbat. It also recognizes that we still need such ritual to help us mark the ending of illness or concern about illness, that we recognize the importance of community and our place in community. It signals that we are ready to look away from ourselves merely and to look outward into the world – not just the world as Gd made it and gave into our care, but the world we have made it through our care of community.