## TORAH FROM JTS



Kedoshim 5784

קדשים תשפ"ד

## Who Among Us Is Holy?

Talia Kaplan (RS '24), Assistant Rabbi, Congregation Beth Shalom (Overland Park, KS)



When God instructs Moses to tell the Israelites אָל־כָּל־ "You shall be holy," the injunction is to be delivered אָל־כָּל־ "עָדְת בְּנִי־יִשְׂרָאֶל, "to the entire community of Israel" (Lev. 19:2). This week's parashah opens with a message that seems easy to get behind. The question, though, of what it actually means to be holy, is answered by commentators in a way that paints a more complicated picture. Rashi explains that being holy entails refraining from forbidden sexual relations and transgressive thoughts, which are delineated both in this and the previous parashah.

Many of these—"Do not sleep with a menstruating woman," "Do not degrade your daughter," etc.—put the emphasis on the male, not surprising given how personhood and sexuality were understood at the time (Lev. 18:19, 19:29). But these human interactions involve multiple parties. How might this section of the Torah inform the ways we today think about embodied mitzvot and the holiness of the entire community of Israel? Is there a way to hold earlier understandings of the mitzvot, the challenges of reading ancient texts about sexual ethics in light of contemporary values, and the belief that the Torah speaks to all of us at all times?

As a feminist, observant Jew, I believe there has to be. My academic work at JTS engages a disability justice approach to halakhah, using forbidden sexual relations—specifically the laws around menstruation—as a case study. <sup>1</sup> What might it mean to treat all of our bodies as holy? In reflecting on this question raised by the opening to Parashat Kedoshim, I suggest we turn to the resurgence of *hilkhot* 

<sup>1</sup> The "Unwell" Woman: A Disability Justice Approach to Halakhah and Spiritual Care, submitted in partial fulfillment of the Jewish Gender and Women's Studies MA and Certificate in Pastoral Care and Counseling at JTS.

*niddah* in liberal communities and the academic field of disability studies.

Hilkhot niddah, like many areas of Jewish law about nonmale bodies written by men, has its fair share of complications. Yet many observant Jews, including some liberal Jews, practice *niddah*. There are many reasons why, including a desire for halakhah to comprehensively inform our day-to-day lives. In her 2014 teshuvah, Rabbi Pamela Barmash spoke to such a phenomenon in the context of gender and obligation, writing, "Being permitted to perform a mitzvah is not the same as being required to perform a mitzvah, and women want to express their commitment to their lives as Jews by performing mitzvot on an equal basis with men." Barmash's assertion says as much about obligation more broadly as it does about women's relationship to traditionally masculine mitzvot: for many of us, being fully, holistically obligated is a core part of our Judaism. So what happens when our foundational texts delineate the laws of *niddah*—or other embodied mitzvot—in a manner that does not completely align with our experiences of gender, sexuality, and/or physiology?

This dissonance offers the opportunity for a new approach. Enter the social model of disability, which understands disability as resulting from a gap between one's embodied experience and their broader physical and social environment and attempts to close that gap through systemic change, which for halakhah would entail accounting for bodily diversity from the outset. The insights gained by individuals with marginalized bodily and sexual identities—who often navigate flawed medical systems, legislative attacks, and other societal challenges—can guide a response to the deep yearning for rituals and halakhah that resonate with our personal experiences of our bodies, especially when traditional texts seem at odds with these

experiences. Integrating disability justice with halakhah provides a dual opportunity: it allows the insights of disability studies to enrich halakhic thinking and helps our communities better address diverse physical needs, affirming the holiness of the entire community of Israel.

One area of hilkhot niddah that could better account for different experiences is bedikot, the series of internal checks a menstruant<sup>2</sup> performs at the cessation of bleeding to exit the status of *niddah*.<sup>3</sup> People with pelvic health issues like endometriosis and vulvodynia may experience pain with insertion, as well as symptoms such as vulvar itching, incontinence, and discomfort when sitting or wearing tight pants. Hilkhot niddah have long taken into account the reality that some people might have difficulty with vaginal insertion, establishing cases in which someone would only have to do the first bedikah-hefsek tahara. Yet for those for whom even this one check is difficult, it is normative to seek out individualized guidance that might provide leniencies and heterim (permissions). Given that one in four people with vulvas are impacted by pelvic health issues at some point during their life, and the broader reasoning that we should proactively account for embodied difference, a contemporary approach to hilkhot niddah should see pelvic health issues as part of the normal range of menstrual experiences, not an anomaly to be dealt with if they come up.

A disability justice-informed approach to bodily diversity would see responding to one's physical and emotional realities not as necessitating employing a leniency, but as part and parcel of what it means to seriously live a rigorous halakhic life. While not everyone perceives "leniency" to be a bad thing, it often has a negative connotation in halakhic communities, implying that someone is choosing to be "less observant." Furthermore, in the disability community,

people sometimes hesitate to use mobility aids or pursue institutional accommodations out of fear of "not being disabled enough," and a similar line of thinking could lead people to be wary of relying on a halakhic leniency. We can affirm people by relating to halakhah in a way that does not set up a strict/lenient hierarchy but rather draws them closer to Jewish practice with, to the extent possible, halakhic language that speaks to their lived experiences.

For bedikot, expanding halakhic thinking with an eye toward disability justice might include accounting for the reality that not everyone is physically able to perform a hefsek tahara and elaborating on what this might mean for the transition to shivah neki'im—the seven "clean days" between menstruation and exiting *niddah* status through immersion. Alternatively, for the menstruant who observes a form of niddah that understands the entirety of niddah to be seven days and still wants to do some sort of check before going to the mikveh when night falls on/after the seventh day, it might entail discerning a rigorous way to check in with one's body that does not cause physical or emotional distress. The halakhic approach to hefsek tahara that I wish to see is one that understands that not everyone might be able to do even a single bedikah, and that this is not necessarily a temporary situation.

My proposal reflects a deeper, personal desire to navigate the tension between my own experience as a person sensitive to pain and a longstanding tradition. I know that, for me, taking both Judaism and my experience of my body seriously means engaging in a comprehensive religious practice, inclusive of *niddah*. This is not unique to people who have chronic health challenges. From pregnant people discussing how to think about fasting to trans folks writing teshuvot about whether to wear a chest binder when immersing in a mikveh, many of us are expressing a desire for halakhah to be informed by and speak to a diversity of lived experiences. Halakhah's ability to respond to the complicated reality of human existence is part of what maintains its holiness. The extent to which we respond to the diverse embodied needs in our communities is central to answering the call for each of us to be holy.



<sup>&</sup>lt;sup>2</sup> When discussing biblical and rabbinic sources, I refer to "women" in an attempt to provide a translation or summation of the source that best reflects the texts' understanding of gender and anatomy. When talking about contemporary best practices and scenarios, I use gender-inclusive language such as "menstruant."

<sup>&</sup>lt;sup>3</sup> How this period of time is counted largely depends on one's communities (ethnically, denominationally, etc.).