

Disability Studies Quarterly  
Spring 2003, Volume 23, No. 2  
pages 205-208 <[www.cds.hawaii.edu/dsq](http://www.cds.hawaii.edu/dsq)>  
Copyright 2003 by the Society  
for Disability Studies

## Rehabilitation in Israel

Erin Martz, Ph.D.  
University of Missouri, Columbia

### Abstract

This article briefly overviews the civilian and military rehabilitation systems in Israel, as described by two employees of those systems. Though Israeli systems provide comprehensive social services to individuals who were injured as civilians, Israeli rehabilitation practices appear to be more extensive for individuals who were injured while serving in the military.

### The Rehabilitation System for Civilians

According to Rachel Ertzman, who works at the Social Security department in Tel Aviv, Israel, high unemployment (near 10%) creates conditions that make it difficult to get a job in Israel for individuals who are 40 years or older and/or who have a disability. Yet, the Israeli government has provided a safety net that involves four categories of social insurance: a) disability and handicap, due to illness or accidents; b) disability and handicap, due to work injury; c) widows; and d) injuries and bereaved parents and siblings, as a result of terrorism.

The amount of payment for the "disability due to illness or accident" category is based upon the individuals' loss of functions and abilities. Individuals who belong to this first category will lose their pensions if they successfully return to work. In contrast, individuals who experience disabilities due to work injury, widows, and victims of terrorism will receive a payment whether or not they work. Ertzman reported that the latter policy helps to encourage individuals to attempt to return to work, because they will not lose their benefits if they are vocationally successful.

Though the biggest group being served is the "disability and handicap from illness or accidents," special attention is focused on victims of terrorist acts in Israel. This group also receives the highest benefit payments, according to Ertzman. Within 24 hours after a terrorist attack, workers from the Social Security department will visit individuals in the hospital or in their homes. Small children and families can also receive these services, if they were affected by terrorism. Typically, after an act of terrorism, even

individuals who were not injured but who witnessed the terrorism will be taken to the hospital. This allows immediate psychosocial intervention to be given, if individuals experience acute stress reactions related to the terrorist incident.

After three days, individuals who witnessed terrorism are invited to a debriefing group, due to the radical change of life and perspectives that they may have experienced after the trauma. According to Ertzman, there are four goals of the debriefing: a) to encourage talking about the event; b) to help organize the trauma by focusing on the facts, because individuals' memories about the terrorism may be fragmented; c) to examine feelings about the event and symptoms that are being experienced; and d) to explore how individuals will cope with the trauma, and how traumatic events were dealt with in the past.

In Israel, social workers do the work that rehabilitation counselors do in the U.S. According to Ertzman, social workers meet with clients to: a) understand their lifestyles, b) assess interests and abilities, and c) build a rehabilitation plan together. Individuals' cases are closed in three months, on average, but they often return for further services.

#### The Rehabilitation System for Veterans

Miri Shalit works for one of seven rehabilitation centers in the Israel's Ministry of Defense. Her center in Bnai Brak, Israel, serves approximately 11,000 individuals who were wounded in the Israeli Defense Forces (i.e., the army). The agency's policy is to visit soldiers in the hospital the day after an injury has occurred. All needed services, including medical, physical therapy, environmental accommodations, and vocational rehabilitation, are coordinated by this agency.

The vocational rehabilitation for individuals wounded while serving in the Israeli Defense Forces is much more flexible than the civilian system. Cases are never closed; and services are provided to individuals for their lives, which can include medical, psychological, vocational, and independent living types of services. Shalit acknowledged that dependency and demands can result from such an extensive, long-term network of support. Yet, many are able and want to return to work. Volunteering is one option presented to individuals who cannot work (e.g., for psychiatric reasons), in order to build confidence and a sense of contribution to one's community.

Group homes exist for veterans who cannot or do not want to live alone. Professionals do not run these group homes. Individuals are put on waiting-lists for these homes, which reinforces the concept that living in these homes is a privilege and not a given. There are many different kinds of activities, such as art, music, and productive endeavors (e.g., carpentry) at the group homes. Hostels are run for individuals who need more extensive continuous care and support once they leave the hospital (e.g., individuals with

head trauma or psychiatric disabilities).

As a rehabilitation caseworker, Shalit receives information about the circumstances of the injury from doctors before setting up vocational rehabilitation for veterans who express interest in participating. She states that she continuously examines for the existence of acute stress reactions in her clients, especially among those who experienced physical injuries. Shalit will attempt to intervene therapeutically if she observes acute stress reactions, in order to help prevent these reactions from developing into the long-term posttraumatic stress reactions.

Contact address for Erin Martz, Ph.D.: Educational and Counseling Psychology, 16 Hill Hall, University of Missouri, Columbia, MO 65211; email: <erinmartz @ hotmail.com>.