

My Surprise at Fallout over Dispatches from Israel*

Prof. A. Mark Clarfield MD FRCPC: Head, Department of Geriatrics, Soroka University Medical Center and Faculty of Health Sciences, Ben-Gurion University of the Negev, Beer Sheva, Israel

KEY WORDS: medical care under fire, military medicine, Israel-Palestine conflict

IMAJ 2009;11:329–330

Despite the fact that I like to write, I have never before thought of publishing a blog anywhere. Although my generation's aversion to electrons and a preference for paper may be partly responsible, I had always considered such postings to be a vaguely narcissistic act. After all, who would actually want to read my thoughts on the latest movie I had seen or learn about a fight I had had with my boss? That being said, when the *BMJ* asked me to write about my experiences in the recent war in southern Israel and Gaza, it all came pouring out.

Although in the end I was able to post a mere fraction of what I actually put to pen, I wrote about the heavy responsibility I had felt in trying to look after my frail elderly patients in a hospital that Hamas had targeted with sophisticated Grad missiles. I wrote about watching friends and colleagues being called up to serve in the army and how we coped, psychologically and clinically, with this sudden absence. I wrote about Matan, my son's friend and our friends' son, whose task it was in the army to neutralise explosives in an endless number of homes (yes, civilian homes) that Hamas had boobytrapped in the hope that they would kill our soldiers – and hang the possibility that innocent Palestinian civilians might be hurt. I wrote about the careful instructions that he and his mates had received throughout training and during combat to minimise civilian casualties. Owing to the fog of war, they could not always succeed, but I have personal knowledge of the type of instructions received.

Although I wrote about many things on my pad of paper, in the blog postings I only tangentially alluded to the terrible fear I had felt whenever the air raid sirens went off. During those attacks I painfully counted the seconds, awaiting the boom that meant Hamas had missed me, again. Being a bit of a coward, I suppose, I had some trouble identifying with Winston Churchill's famous claim, "There's nothing quite as

exhilarating as being shot at and missed". For me, this experience did not get any easier with practice.

I wrote about other things. For example, I asked why many people in the world were so seemingly enraged by Israel's attempts to defend its civilians but how we had not heard from these same critics while we had been under rocket fire for eight years before the recent hostilities. And, furthermore, that from November 2000 to April 2004 Hamas had been responsible for the deaths of 377 Israeli citizens and soldiers and 2076 wounded in 425 separate attacks. In my scribbles I asked myself why we had not heard their voices then. In the media I have also read much about "disproportionality" but not about this particular bias.

But once again, I did not post these thoughts then, as I had considered my *BMJ* mandate to be to provide a description of my medical experiences on the southern front. And this I tried to do, despite the frequent presence of other more intrusive thoughts.

To my surprise, some people actually read my four postings. Each blog sported a number of responses: 10 to my story about the tragedy of innocent children being hurt on both sides; 14 to my piece on how, despite being immersed in this terrible crisis, Arab and Jewish Israeli professionals in my hospital pulled together and were able, at least on the clinical level, to function quite well; nine responses to my account of how the hospital planned and modified its services during the war and how we coped with caring for the wounded, both military and civilians; and 11 to a more personal account of how, despite my own fears during one of the missile attacks, I had attempted to calm a petrified woman with whom I suddenly found myself taking shelter.

I must admit that I enjoyed seeing every one of these replies, even those from correspondents who hardly seemed to have my welfare uppermost in their minds. But, perhaps reverting to a more comfortable role as a researcher, I tried to classify the responses. They were of several types, some supportive, others less so. Despite my attempts to concentrate in the blog on medical matters, a number of responses actually had little or nothing to do with the content of my postings. Some were vituperative, blaming Israel for all kinds of purported war crimes and misdemeanours. Curiously, these authors never seemed to address the fact that Israel was responding to the breaking of a ceasefire that had just preceded eight years of unprovoked missile attacks on its

* Reproduced with kind permission of the *British Medical Journal* *BMJ* 2009;338:b722

southern and sovereign territory. C'est la vie, I suppose. Nor did they concern themselves with the fact, that according to Hamas statements themselves, each of its rockets was actually aimed at civilians. Why? Because, said Hamas, all Israelis – men, women and children, old and young, sick and well – are "in the Zionist army".

Most correspondents signed their names, but one of my staunchest critics, who weighed in a few times, signed off as "Anon Emous". A particularly avid respondent was a "Mark Struthers", who, if it is the same chap, is apparently no stranger to other targets in the *BMJ*. He actually took the time to pen five responses, each less a model of restraint than the previous. One early example: "Look at the young people of Israel who laugh as the bombs rain down on Gaza . . . and the extermination of the Palestinian people. I can only pity the nation . . . and the monster that Israel has become". Odd, I thought. I hadn't seen anyone laughing around me, young or old. As to the outrageous term "extermination", no comment I could make would suffice to respond to this kind of hysterical charge.

Others, such as "Salim", were upset that I had not covered both sides of the conflict. Perhaps he thought that I was a kind of war correspondent, meant somehow to tally up the destruction on both sides of our border, rather than just a doctor trying to keep his patients up and his head down.

Responses were certainly varied. One reader felt the need to correct me when I mentioned the red kaffiyehs (men's head-dresses) worn by some patients at my hospital: Ms Catherine Richmond, also something of a serial responder but a bit less enthusiastic than Mr Struthers, pointed out that these could not be Israeli Arabs, as they always wore only black and white ones. This is odd, because when I subsequently asked one where he was from, in flawless Hebrew he told me that he came from an Israeli village just a few kilometres from the hospital.

Still others viewed this terrible conflict as just some kind of childish schoolyard squabble. One writer, describing herself as a "pacifist", helpfully suggested that both sides should just stop. "Israel must lift the blockade [no mention of the role of either the European Union or Egypt in same] of its neighbours and treat them as a sovereign nation recognized by UN and Hamas must stop shelling Israel". Reverse the order of the steps, and I don't know anybody here who would not concur.

Of course, there were a few who seemed to quite understand the situation and sympathised with Israel's position. For example, Michael Gordon pointed out that Hamas "rockets are not crude in their lethal effect or intent". Another writer offered, in capitals, that "There will [be] peace in the Middle East, only when the Arabs love their children more than they hate the Jews". Strong words, I thought; but, recalling my experiences during the recent intifada when Hamas suicide bombers killed hundreds of us (mainly civilians), sometimes just around the corner from my house, I could see the point.

Finally, perhaps the most heartwarming response was the one that seemed to reflect an understanding that in my blog I had been trying to show what it was like as a doctor, not as a political scientist, to experience this conflict. And how as a doctor I hoped with all of my heart for an end to the hostilities and fighting. Matiram Pun had this to say about the description of our work at Soroka Hospital: "Thank you for bringing the situation so lively and vivid!!! This is very very scary. It is beyond imagination how narrow the grey area is there between the green area of life and the red zone of Death there!!! Hopefully, there will be no more civilian casualties".

My only thought in response was, "Amen".