

## Physicians for Human Rights Israel

### The Involvement of Medical and Welfare Personnel in the Abduction of the Children from Yemen, the Balkans and the Middle East

A position paper in honor of the day of awareness of the abduction of children from Yemen, the Balkans and the Middle East

June 2015

Writing: Hadas Ziv (PHRI) and Naama Katiee (the Amram Association)  
Ethics consulting: Dr. Noa Barhaim, Dr. Bettina Birmanns, Dr. Ze'ev Weiner, members of the PHRI ethics committee

#### **Background: The children of Yemen, the Balkans and the Middle East<sup>1</sup>**

Between the years of 1948-1954, more than 50,000 Jews from Yemen immigrated to Israel and were sent to transit camps, mainly in Rosh Ha'ayin, Pardesiya, Ein Shemer and Atlit. Testimonies of the abduction of infants and toddlers from these communities have accumulated; an estimated one out of every eight Yemenite infants<sup>2</sup> were taken from their homes during the aforementioned period. These children were removed without parental consent and most of their fates remain unknown. At the time parents were told that their child had died, when in reality the children were often given up for adoption or transferred to institutions. The similarities between the numerous testimonies tell a unified tale and indicate a systematized mechanism at play: parents residing in transit camps were asked to take their young children out of the tents and transfer them to nearby children's homes, under the guise of maintaining the children's health. Sometimes parents were even convinced that their children were sick and had to be hospitalized. Parents were allowed to visit their children in the homes and nursing mothers were asked to come feed their infants. However in thousands of instances—according to testimony—when parents came to visit their children they were told that the child's condition deteriorated and that the child had died. In the vast majority of cases, the parents were neither shown a body nor permitted to bury their child themselves. In a handful of occasions, after parents protested fiercely, their child was mysteriously found and returned to them. There are also testimonies of children being found alive and well many years after their supposed death in the care of other families.

“Dad did not work for a year. He traveled all over the country looking for the children (twins). I was working in the fields, I gave dad the money to pay for his travels. We starved. After two years I saved a little money and went with another guy to Haifa to look for a lawyer. A week later the answer was ‘the nurse from the children's home is not in the country anymore. I suggest you forget about the children.’”<sup>3</sup>

These stories do not end with the abductions of children and their subsequent

---

<sup>1</sup>Child abductions were also reported by Iraqi, Moroccan and Tunisian families

<sup>2</sup>Boaz Sangero, Where There Is No Suspicion There Is No Real Investigation, p. 48, Teoria Uvikoret 21, Fall 2012,

<sup>3</sup>Shoshi Zeid, The Child is Gone: The Yemeni Children Affair, p. 14, Haokets website.

feigned deaths. The painful affairs came up again years later, when families received enlistment orders for their children—the very children that the state had declared deceased nearly two decades prior. Following public outcry, a parliamentary commission of inquiry (Bahlul Minkovsky) was established in 1967, followed by the Shalgi committee (1988-1994). Both received harsh criticism concerning their operations. In 1995, as a result of persistence on the part of the late Rabbi Uzi Meshulam and his followers (who brought the stolen children's affair to public consciousness), an official commission of inquiry was established. That commission's conclusions were published in 2001, but those results did not put the affair to rest. Just as the ones that preceded it, the commission acted in the state's interest to bury the affair, proclaim it unverifiable, and absolve itself of responsibility.

"In that sense, the committee functioned as a ritual mechanism of discussing a controversial issue in Israeli society. The mode of investigation, its extent, the committee's way of speaking and the representations of the report indicate the existence of a symbolism of treatment..

"An analysis of the report indicates that the commission's attitude toward the severe acts of commission and omission, some of them enumerated in its pages, is forgiving in the extreme. Thus, for example, even the destruction of archives under its very nose, while the commission was at work in recent years, does not set off an alarm for its members and does not give rise to discussion of suspicion."<sup>4</sup>

Whereas in other countries these incidents received exposure, state admission of guilt, and public recognition of the victims, in Israel the denial and silencing persist to this day. Israel continues to repudiate that the abduction of children happened altogether.

#### **International comparison**

Similar affairs have been noted in recent years in the Western world, where infants and children were taken away from their parents and handed off to "worthier" adoptive families or institutions. In Canada, Australia, and Switzerland, children were taken away from families that belonged to "backward" ethnic groups and given up for adoption or placed in institutions as part of a policy of "integration" intended to re-educate those groups and eliminate their cultural and spiritual traditions. In Ireland, young women who gave birth out of wedlock were forced to give up their children for adoption, a policy codified and enforced by Catholic institutions under the auspices of the state. In France, 1500 children and infants were taken away from their families on the island of Réunion (a French colony in the Indian Ocean) and sent to mainland France, where the authorities claimed they would be provided with education and welfare. In sharp contrast, the children served as cheap labor, suffering in the process from physical, emotional, and sexual abuse, as well as being completely cut off from their families. During Argentina's military dictatorship, hundreds of infants whose parents were political dissidents were abducted and given to families that were "more desirable" in the eyes of the regime. In Spain, thousands of babies were adopted shortly after birth while their biological parents were told that their child had died. Nurses, doctors, private hospitals and nuns were involved in the abductions, which were motivated by greed. In many cases the revelation of these injustices reverberated widely in the media and drew heavy public support to establish processes of inquiry, governmental acknowledgment of wrongdoings and a shouldering of responsibility by the state.

5

---

<sup>4</sup> Sangero pp. 48-49

<sup>5</sup> See also Ruthie Amir, for the information of reader Yaron London, Ha'aretz July 11, 2013, retrieved on June 10, 2015.

## **Involvement of Welfare and Health Personnel: The Position of Physicians for Human Rights Israel**

When a community has power, as the medical community does, it has a tremendous responsibility to recognize its misdeeds. If we admit our desire and capacity to heal but omit our ability to harm, whether accidentally or deliberately, whether out of ignorance or arrogance, we will never move beyond the boundaries of our limited vision. Our profession gives us tools and tremendous power over the bodies and souls of human beings. The state reinforces that power by giving medical and welfare personnel the authority to decide and determine fates through expert opinions to the courts, hospitalization orders, removals from the home, and more.

Therefore, it is incumbent upon us to check that power not only with the tools of professional ethics and legislation—which have existed in the past—but also through awareness and humility. To that end we must take an honest look at the failures and crimes of the past and present. In addition, we must stand in solidarity with the communities we harmed and strengthen them in their demand for recognition and reparation.

After all, the few testimonies that were revealed from the last investigation committee portray a pattern of action by doctors, nurses and social workers: for instance, Dr. Yosef Israeli, head of the southern district, said a policy was established that transferred dozens to hundreds of children from hospitals to children's homes far from the parents, and from there to adoption.<sup>6</sup>

Hanna Gibori, the chief welfare officer in charge of adoptions in the northern district from 1948-1954, testified to the Kedmi commission: "Hospital doctors transferred children for adoption directly from the hospitals in a nonstandard way and without the official adoption authorities being involved." Gibori added in her testimony that if a child was under her care and no one showed interest in it, it was given to a family without an adoption process. Similar statements were made by H. Leibowitz, who was in charge of adoption for the Welfare Ministry, at a meeting of the public services committee in early July 1959: "There is also de facto adoption, and that must be taken into consideration as well. There are children who are transferred by the Welfare Service and there are children who are transferred by the mediation of a third party, and there are children—and that is the smallest part—who are transferred by their parents." MK Ben Zion Harel, at a Knesset hearing that year, called a spade a spade: "A sizable portion of children are received for adoption directly from the hospitals, directly from the maternity ward. **Sometimes it is done unlawfully, bordering on commerce...**"

A letter sent by the head of the Hospitals Department at the Ministry of Health, Dr. Lichtig, to the government hospitals in Haifa (Pardes Katz, Sarafand, and Dajani) on April 21st, 1950, provides written testimony. The letter is titled "Returning Six Children Received from the Camps," and proceeds as follows: "There were cases when children left the hospital without returning to their parents. **There were apparently quick-moving people who were interested in adopting children.** The "bereaved" parents looked for their children and couldn't find them. I don't need to explain and emphasize that we must make every effort to prevent the recurrence of such cases [...] The camp administration will be responsible for the return of the

---

<sup>6</sup> Shlomi Hatuka, the Yemenite children affair: a journey in the footsteps of the tragedy of the adopted, Haockets, October 4, 2013

children to their parents since it is also responsible for sending them to the hospital....”

The testimonies indicate the personal involvement of medical professionals in abductions and an atmosphere that systemically supported such actions. We feel it is of utmost important to reveal the facts as they are not only in order to prevent the continuation of anguish and emotional distress in the victims, but also so that current medical professionals and administrators learn from past experiences and take measures to prevent them in the future.

The medical profession has immense power because it deals with matters of life and death. This power is all the more evident when it concerns underserved populations and individuals of low socioeconomic status. It is incumbent upon practitioners of medicine to take measures to regulate their power in order to prevent harm, and use their tools only for the benefit of their patients.

**“No, you didn’t know all that; those are things that are never spoken of. For the plague-stricken their peace of mind is more important than a human life. Decent folks must be allowed to sleep easy o’ nights, mustn’t they? Really it would be shockingly bad taste to linger on such details, that’s common knowledge.” (Albert Camus, The Plague)**

“They meant no harm,” “that was the perception in those days,” “there was chaos, a young state absorbing immigration,” “there were also Ashkenazi children who disappeared,” “why open old wounds...” These are some of the reactions that were voiced in the past and are still heard today. We find the prevailing disinterest in the subject outrageous. It is precisely what perpetuates the silence of the various witnesses who played a part in carrying out abductions, as well as the state’s silence on its role in the crimes. After all, the state holds the testimonies of the victims and has put them in a capsule, hidden away from the public, until 2066.<sup>7</sup>

Some would claim that a push to address the abductions of Yemenite children in the face of present injustices is a luxury, while others would say “too little, too late.” The first statement characterizes those who do not bear the wound themselves. All too often the victims of past crimes are silenced simply because the injuring society wants to move forward.

In one of the most painful moments of Tzipi Talmor’s film, “Down a One-Way Street,” the director calls a nurse named Masha Kaplan, who worked in camps in Yemen and Israel, to request her reaction to one of the testimonies that accuses her of abduction. Masha’s voice is heard saying: “It’s nap time... I have no interest in that subject... I ask you to please leave the subject alone,” and hangs up the phone.

Because of that repression mechanism, which leaves the victims alone with their pain without recognition or reparation, it is important for us to act towards recognition. If we do not acknowledge our actions in the past we are destined to repeat them in the future. The medical community should have been a leading voice in demanding exposure and amplification of testimonies given by physicians and nurses who participated in the abductions of the ‘40s and ‘50s. Beyond the obvious criminal

---

<sup>7</sup>Shoshi Zeid, Wait until 2066, Haokets July 24, 2013

aspect, these actions were clear and cruel violations of medical ethics, or the moral responsibility of the caregiver to the patient.

There is no way to atone for the sins committed, the years of desperation for parents, brothers and sisters, entire communities. Still, we must take an honest look at our past, and recognize our blindness and our failure as a medical community to fight on their behalf. We must also act. But the request made by parents so that the abducted children would know that they were not forgotten—that "it is the fault of those in charge and not, as they were told, that they were not interested in their own children"—is a cry that demands action. We must tear away the lens that has blurred our vision.

### **Recommendations**

These questions deserve to be answered. As a community of medical and welfare personnel it is our duty to demand that the truth be revealed. Therefore, we add our voices to the struggle to expose the archives and testimonies, and we demand the provision of missing testimonies. Additionally, if it is in our power to contribute to the state's recognition of its crimes, we must do so.

We are thereby joining in marking the day of awareness initiated by Amram (Spirit of the East), with the goal of creating public pressure for recognition of the injustices committed and the suffering of the families and demanding public transparency concerning this affair.