

Research Article

Fraternal Rupture and Somatic Pathology: *The Joseph Narrative as Clinical Paradigm for Family and Communal Conflict*

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Abstract

This essay revisits the Midrashic accusation that Joseph brought lashon hara against his brothers (Genesis 37:2), focusing on the rabbinic claim that he charged them with eating *ever min ha-chai*, sexual impropriety, and moral degradation of their half-brothers. Drawing on classical commentators, modern biblical scholarship, and kabbalistic intuition, the essay argues that Joseph's sin lies not in fabrication but in moral anachronism: judging his brothers by a sanctity not yet covenantally binding. The brothers' violent response initiates a fraternal rupture whose reverberations persist through Jewish history. Mystically, exile endures not merely because of hatred, but because of sanctimonious misrecognition—when one group brands another as spiritually inferior or other.

A clinical dimension extends this theological analysis to demonstrate how internecine family conflict produces measurable physiological harm. Contemporary research reveals that chronic family discord dysregulates the hypothalamic-pituitary-adrenocortical (HPA) axis, elevates inflammatory biomarkers, and predicts cardiovascular disease, depression, and anxiety. A second addendum expands this framework to communal scale violence, examining how armed conflict produces analogous pathology through destroyed trust, fear, and avoidance behavior—with devastating effects on child mortality and population health that persist across generations.

Keywords: lashon hara, Joseph narrative, sibling conflict, HPA axis dysregulation, intergenerational trauma, galut, chronic inflammation, family systems, armed conflict, child mortality, institutional mistrust, psycho-neuroendocrinology



Dibbam Ra'ah and the Nature of Lashon Hara

The Torah's terse statement that Joseph brought an evil report against his brothers conceals more than it reveals [1]. Rabbinic literature resists reading Joseph as a mere liar. Instead, the Midrash identifies three accusations, each of which occupies a liminal ethical space [2]. Joseph's failure lies not in falsity but in interpretive judgment that precedes covenantal maturity.

Rashi synthesizes the Midrashic tradition, explaining that Joseph reported three things: that the brothers ate *ever min ha-chai* (flesh from a living animal), that they cast improper gazes upon the daughters of the land, and that they treated the sons of Bilhah and Zilpah as servants [3]. Each accusation proves technically true yet hermeneutically premature—Joseph applies standards of sanctity before their covenantal binding, thereby transforming accurate observation into destructive speech.

Ever Min Ha-Chai and Moral Temporality

The charge that the brothers consumed flesh from a living animal reflects Joseph's application of a universal moral law prior to its formal articulation. The prohibition of *ever min ha-chai* derives from the Noahide covenant, binding upon all humanity [4]. Yet classical commentators note that patriarchal observance was voluntary and situational. Nachmanides explains that the patriarchs observed Torah commandments in the land of Israel alone, and even then as a matter of piety rather than obligation [5].

Joseph's error is moral impatience—living as though Sinai had already occurred. The Midrash reports that for each accusation, Joseph received measure-for-measure punishment: because he accused his brothers of eating *ever min ha-chai*, they slaughtered a goat when they dipped his coat in blood [3]. The punishment reveals the nature of the sin: premature judgment generates reciprocal violence.

Interiorized Ethics and Suspicion

By accusing his brothers of improper sexual attention, Joseph inaugurates an ethic that disciplines interior life rather than action. The brothers may have looked upon Canaanite women, but they had not violated any prohibition. Joseph's accusation projects upon them an intention that had not yet materialized in deed, thereby criminalizing thought before its enactment.

Avivah Zornberg observes that Joseph functions as a *mashlim*—a tattletale whose very completeness disrupts the fragile equilibrium of the family [6]. His clarity of vision becomes a weapon against those who inhabit a more ambiguous moral terrain. Yet such clarity, when deployed prematurely, generates resentment rather than transformation.

Hierarchy, Dignity, and the Degradation of Brothers

The third accusation—that the brothers called the sons of Bilhah and Zilpah servants—reveals Joseph's sensitivity to hierarchical degradation. By treating their half-brothers as servants, the sons of Leah enacted a caste distinction that Joseph found morally intolerable. Here too, Joseph applies an ethical standard that would later become normative: the recognition that all Israel shares equal dignity.

Robert Alter notes that the Joseph cycle repeatedly subverts primogeniture, placing the younger above the elder in ways that ancient audiences would have found both scandalous and redemptive [7]. Joseph's sensitivity to his half-brothers' degradation reflects his own liminal position: son of the beloved wife Rachel, yet younger than the sons of Leah.

Joseph as Proto-Exilic Figure

Source-critical scholarship identifies distinct layers within the Joseph narrative, revealing a complex literary history [8]. Joel Baden argues that the E source emphasizes Joseph's role as interpreter of dreams and moral exemplar, while J focuses on his vulnerability and providential rescue. What both sources share is the theological conviction that fraternal rupture pre-

cedes and produces exile.

The sale of Joseph initiates a sequence that culminates in Egyptian bondage. Rabbinic tradition draws explicit connections between the brothers' sin and subsequent catastrophes, including the destruction of the Temple and the martyrdom of the Ten Sages [2]. These connections are not merely historical but ontological: the fracture within the family of Israel reproduces itself across generations.

Kabbalistic Intuition: The Rupture of Covenant

In the Zohar's symbolic architecture, Joseph corresponds to the sefirah of *Yesod*—the foundation that channels divine abundance into *Malkhut* [9]. *Yesod* is the site of covenantal transmission, the axis upon which blessing or curse flows to the world. When Joseph ruptures brotherhood through premature judgment, he damages the very channel through which blessing descends.

Elliot Wolfson has argued that kabbalistic symbolism operates through linguistic structures that simultaneously reveal and conceal [10]. The Zohar's identification of Joseph with *Yesod* suggests that his sin and subsequent exile are not merely personal but cosmic: the rupture within the family inscribes itself upon the structure of divine emanation.

The Tikkunei Zohar states explicitly: *mekhirat Yosef hi sharsha d'galuta*—the sale of Joseph is the root of exile [11]. This is not hyperbole but mystical precision. The brothers' violence against Joseph creates a template that repeats: whenever Israel fragments into factions that declare one another spiritually illegitimate, the pattern of exile recurs.

Contemporary Reverberations: *Sin'at Chinam* in Orthodoxy

The rabbinic tradition attributes the destruction of the Second Temple to *sin'at chinam*—baseless hatred between Jewish factions. Daniel Boyarin has demonstrated how intra-Jewish boundary-making in late antiquity created categories of heresy and legitimacy that persist to the present day [12]. These boundaries function not merely as theological distinctions but as social mechanisms of inclusion and exclusion.

Joseph's sin finds contemporary expression in the hierarchies of yichus and frumkeit that structure modern Orthodoxy. When one community declares another's conversions invalid, or when Ashkenazi authorities question Sephardic practices, the pattern inaugurated by Joseph recurs. Each act of spiritual delegitimization repeats the original rupture and extends the exile.

The Zoharic analysis suggests that redemption requires not merely tolerance but active recognition—the capacity to see divine dignity in those we are tempted to judge as spiritually inferior. Joseph ultimately achieves this recognition when he reveals himself to his brothers and weeps upon their necks. But the exile that his premature judgment initiated continues until all Israel can recognize itself in every other Jew.

Clinical Implications: Somatic Inscription of Fraternal Rupture

Contemporary research validates the theological intuition that fraternal rupture inscribes itself not merely in narrative memory but in the body itself. The Adverse Childhood Experiences (ACE) Study, examining over 17,000 adults, documented dose-response relationships between childhood family adversity and adult health outcomes including cardiovascular disease, autoimmune disorders, depression, and early mortality [13]. Family conflict constitutes one axis of adversity whose biological embedding produces measurable pathology across the lifespan.

HPA Axis Vulnerability to Family Adversity

The hypothalamic-pituitary-adrenocortical (HPA) axis—the body's pri-

mary stress-response system—demonstrates particular vulnerability to family relational patterns. Repetti and colleagues have shown that family hostility, chaos, and conflict create *risky family environments* that program children's stress-response systems toward chronic dysregulation [14]. The biological signature of family discord includes elevated basal cortisol, blunted cortisol reactivity, and impaired diurnal rhythm—patterns that predict both mental and physical illness.

Cortisol Reactivity and Family Conflict

Research demonstrates that family conflict discussions produce measurable cortisol reactions in participants, with sensitivities that reflect childhood experiences. Karan and colleagues found that adults who witnessed parental aggression in childhood show heightened cortisol responses during marital conflict discussions, even decades later [15]. These sensitivities, the authors note, become *logged in biological reactions* that persist long after the original exposures.

Davies and colleagues documented curvilinear relationships between interparental conflict and adolescent emotional and cortisol reactivity, suggesting complex adaptive processes that can become maladaptive when family adversity is chronic [16]. Luecken and colleagues demonstrated that negative relationships in the family of origin predict attenuated cortisol responses in emerging adults—a pattern of blunted reactivity associated with depression and disengagement [17].

Sibling Conflict as Developmental Pathology

Sibling relationships constitute what Feinberg and colleagues call the *third rail of family systems*—often overlooked yet powerfully predictive of developmental outcomes [18]. Research documents associations between sibling conflict and depression, anxiety, and externalizing behaviors that persist into adulthood. Significantly, the Genesis narratives—Cain and Abel, Isaac and Ishmael, Jacob and Esau, Joseph and his brothers—encode the lasting traumatic effects of sibling rupture that contemporary research now documents empirically.

Differential parental treatment—the pattern of favoritism that Jacob displayed toward Joseph—produces particularly devastating effects. Kowal and colleagues demonstrated that children's perceptions of unfair parental treatment predict depression, anxiety, and externalizing behaviors, with effects that persist independent of absolute levels of parental warmth [19]. The coat of many colors that Jacob bestowed upon Joseph marked him for parental favor in ways that contemporary research would identify as pathogenic.

The Biology of Relational Rupture

The inflammation pathway provides a critical link between family relational stress and cardiovascular disease. Kiecolt-Glaser and colleagues have demonstrated that supportive close relationships predict lower levels of inflammatory biomarkers including IL-6 and C-reactive protein, while conflict-ridden relationships predict elevated inflammation [21]. This pattern holds independent of other risk factors and predicts cardiovascular morbidity and mortality.

The American College of Cardiology's 2025 statement on inflammation in cardiovascular disease emphasizes that chronic low-grade inflammation plays a pivotal role in atherosclerotic plaque formation and rupture [22]. The relational rupture that begins in family conflict thus traces a biological pathway through inflammatory activation to cardiovascular pathology, validating the Zoharic intuition that the brothers' sale damaged *the covenant across generations* [11].

Intergenerational Transmission

Perhaps most striking is the evidence for intergenerational transmission of family adversity's biological signatures. Doom and colleagues demonstrated that childhood family adversity predicts adult cortisol responses, with

effects mediated through observed marital conflict behavior [24]. The biological templates established in one generation's family environment shape the hormonal responses of the next.

Saxbe and colleagues documented within-family cortisol concordance during conflict interactions, suggesting that family members become biologically entrained to one another's stress responses [25]. The *pegam habrit*—damage to the covenant—thus manifests somatically as HPA axis dysregulation, inflammatory pathology, and cardiovascular disease risk that transmits across generations, precisely as the Tikkunei Zohar suggests.

Clinical Implications for Therapeutic Practice

These findings suggest that clinicians treating patients from conflictual families should attend not merely to psychological symptoms but to physiological signatures of relational rupture. The therapeutic task parallels the theological one: healing requires not merely symptom management but the restoration of relational recognition. Just as Joseph's reconciliation with his brothers required mutual revelation and embrace, clinical healing from family adversity requires relational repair alongside biological intervention.

The concept of therapeutic *tzimtzum*—creating space for the patient's emergence rather than imposing interpretive frameworks—may be particularly relevant for patients whose family histories include patterns of premature judgment and hierarchical devaluation [26]. The clinician who contracts his or her own interpretive authority creates space for the patient's own recognition to emerge.



Addendum:

From Family to Community—War, Trust, and the Pathophysiology of Collective Rupture

The theological-clinical framework developed above finds striking validation when extended to communal scale violence. If fraternal rupture within a family produces measurable biological harm through HPA dysregulation, inflammatory activation, and intergenerational transmission, what of rupture at the level of nations and peoples? Contemporary research on the health effects of armed conflict reveals that violent conflict produces analogous pathology through precisely the mechanisms the Joseph narrative illuminates: destroyed trust, paralyzing fear, and the withdrawal of care that perpetuates suffering across generations.

The Hidden Mortality of War: Demand-Side Effects

Schaub's comprehensive analysis of violent conflict's health effects across 22 African nations demonstrates that wars kill civilians far from battlefields and long after fighting ceases [29]. Between 1995 and 2015, an estimated five million children under age five died from conflict-related causes—*five times* the total number of direct combat deaths during the same period [30]. This staggering disproportion demands explanation: how does violence claim so many lives beyond its immediate victims?

Prior research emphasized supply-side factors: destroyed health infrastructure, departure of medical workers, landmines and unexploded ordnance. Schaub's innovation lies in documenting the demand-side effects of violence—how exposure to conflict changes civilian attitudes and behaviors

in ways that produce health catastrophe. The mechanisms prove remarkably parallel to those documented in family conflict research: destroyed trust, chronic fear, and avoidance behaviors that prevent care-seeking even when care remains available.

Trust Destruction: The Institutional Wound

Exposure to violence systematically erodes trust in state institutions. Research consistently demonstrates that individuals who have been victimized display reduced trust in government—an effect that can persist across multiple generations [31, 32]. Nunn and Wantchekon's analysis of the African slave trade demonstrates that communities more intensively exposed to slave raiding centuries ago display lower institutional trust today, with effects transmitted through both cultural and biological pathways [33].

The theological parallel is precise: just as Joseph's premature judgment destroyed his brothers' trust and initiated patterns of suspicion that recurred across generations, violent conflict destroys civilian trust in institutions whose protective function has manifestly failed. When the state cannot protect its citizens from violence, citizens withdraw from state-mediated services—including healthcare. Mistrust in government predicts reduced healthcare utilization and lower vaccination compliance [34], transforming institutional betrayal into biological vulnerability.

Fear and Avoidance: The Behavioral Pathway

Fear of future violence constitutes a second pathway linking conflict exposure to health outcomes. Trauma induces avoidance behaviors—victims shun public places, social gatherings, and institutional settings associated with danger [35]. These avoidance patterns extend to healthcare facilities, reducing utilization of preventive services precisely when populations face elevated health risks.

Schaub's mediation analysis demonstrates that fear of violence mediates 68% of the relationship between contextual violence exposure and reduced healthcare-seeking [29]. Individuals rationally adjust behavior to perceived threat—going out less, limiting errands, avoiding crowds—but these adaptations carry devastating costs when they prevent vaccination, prenatal care, or timely treatment of treatable conditions. The calculus that preserves life in the short term produces mortality across the population.

Child Mortality: The Ultimate Measure

The convergence of trust destruction and fear-induced avoidance produces catastrophic effects on child mortality. Schaub documents that conflict-affected areas show stagnating or worsening infant mortality rates while non-affected regions improve, with vaccination coverage declining dramatically in zones of violence [29]. The path from exposure to violence through mistrust and fear to reduced healthcare utilization to elevated mortality operates with statistical reliability across multiple countries and time periods.

Meierrieks and Schaub estimate that terrorism alone causes approximately 40,000 child deaths annually in Africa, despite terrorist attacks rarely targeting children directly [36]. The indirect pathway—through fear, mistrust, and behavioral change—claims more lives than the violence itself. This finding echoes the Joseph narrative's insistence that the brothers' violence initiated consequences far exceeding their immediate act: the galut that began with Joseph's sale extended across centuries and claimed countless lives.

Intergenerational Transmission at Population Scale

The evidence for intergenerational transmission of conflict effects parallels the family-level findings while operating at population scale. Conzo and Salustri demonstrate that early-life exposure to World War II predicts lower trust levels decades later, with effects persisting into subsequent generations [37]. Grosjean documents similar patterns across 35 European countries, suggesting that violent conflict creates cultural templates of mistrust

that transmit independently of direct experience [38].

The biological mechanisms likely parallel those documented in family adversity research: HPA axis programming, inflammatory sensitization, and epigenetic modification that transmit vulnerability across generations. The Zoharic claim that the brothers' sale damaged *the covenant across generations* thus receives validation at both family and population levels—relational rupture inscribes itself in bodies and behaviors that persist long after the original violence.

Therapeutic Implications: Rebuilding Trust

The research findings suggest that post-conflict interventions must explicitly address trust and fear alongside infrastructure reconstruction. Programs that restore physical access to healthcare without addressing civilian mistrust and avoidance will fail to reduce mortality. Trust-building measures—already recognized components of post-conflict reconstruction—must incorporate health as an explicit domain of activity [39].

The Joseph narrative suggests that reconciliation requires mutual recognition: Joseph revealing himself, the brothers embracing him, tears flowing on both sides. At population scale, this translates to interventions that restore civilian confidence in institutional protection while addressing the psychological wounds that produce avoidance. The provision of physical security matters not merely for preventing direct harm but for creating conditions in which civilians can overcome fear-based avoidance and seek the care that preserves life.

Sin'at Chinam and Collective Violence

The rabbinic attribution of Temple destruction to *sin'at chinam*—baseless hatred—finds empirical validation in the documented health consequences of internecine conflict. When populations fragment into factions that delegitimize one another, the trust necessary for collective action erodes. Vaccination campaigns fail when communities mistrust the medical establishment's motives, as documented in the Nigerian polio controversy where rumors of sterilization attempts halted immunization efforts [40].

The parallel to Joseph's premature judgment is precise: when one group declares another's intentions suspect, the relational fabric necessary for collective flourishing tears. The health consequences—children dying from vaccine-preventable diseases, chronic inflammation producing cardiovascular mortality, populations unable to seek care even when available—represent the somatic inscription of communal rupture, the biological manifestation of galut at population scale.

Key Hebrew Texts with Translation

Genesis 37:2

סְהִיבָא לֹא הָעַר סִתְּבִידָא דְּפָסִי אָבִיו

And Joseph brought their evil report to their father.

Bereishit Rabbah 84:7

צִרְאָה תֹנֵבֵב סְהִינֵיעַ סִיתְוֵנוּ... וְנִמְ רַבָּא סִילְכוּא

They eat flesh from a living animal... and cast their eyes upon the daughters of the land.

Sanhedrin 56a

חֲנִי יִבְּ וְיִטְעֵנָּה תּוֹרַתְּ עַבְשׁ

The descendants of Noah were commanded seven laws.

Zohar I:176b

אֲדֹסִי וְהִיא פָּסִי

Joseph corresponds to the sefirah of Yesod.

The sale of Joseph is the root of exile.

Lamentations Rabbah 2:2

חסוי תריכמ קסע לע ?וגרהנ המ לע תוכלמ יגורה הרשע

Why were the Ten Martyrs killed? For the matter of the sale of Joseph.

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