

Parental Coping with Developmental Disorders in Adolescents within the Ultraorthodox Jewish Community in Israel

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Published online: 22 June 2011
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Abstract This preliminary study compares the coping strategies used by 100 ultraorthodox Jewish parents and 100 secular Jewish parents for dealing with adolescent children with developmental disorders. The parents completed two questionnaires on the sense of stress-related personal growth and the sense of coherence. The ultraorthodox parents reported a higher sense of growth and a higher sense of coherence than the secular parents. In addition, there were associations found between demographic characteristics. Gender differences between mothers and fathers in the sense of growth and community differences between ultraorthodox fathers and secular fathers in the sense of coherence are discussed. The study highlights the uniqueness of the religious point of view in dealing with adolescent children with developmental disorders.

Keywords Parents · Coping · Developmental disorder · Adolescent · Ultraorthodox Jewish

Introduction

Developmental disorders are found in diverse societies around the world (Chung et al. 1990; Cohen and Volkmar 1997; Lotter 1987), including among different communities in Israel. This type of disorder is heavily invested with moral, political, and religious meanings (Al-Issa 1995), which are likely to vary in different communities. The

present study is part of a wider research project examining parents' ways of coping with developmental disorders in their adolescent children in different communities in Israel (e.g., Manor-Binyamini 2011). It is the first stage of research that attempts to reveal the meanings assigned to the coping strategies used by parents (fathers and mothers) in the distinctive context of the ultraorthodox Jewish community in Israel.

This research focuses on parents of adolescents because most of the existing studies on developmental disorders focus on either childhood or adulthood (Blacher 2001). In addition, in terms of time, parents of adolescents are situated in what can be defined as continuous care of a disabled child, and it is of interest to examine the perceptions of parents in light of this continuous care experience.

The Ultraorthodox Jewish Community in Israel

The concept 'ultraorthodox' refers to a specific group of Israeli society whose members distinguish themselves by their external appearance, their way of life, and their tendency to insulate themselves from the effects of modernization by separating themselves in well-delineated neighborhoods. There are about 700,000 members of the ultraorthodox (*haredi*) Jewish community in Israel, comprising 8% of the country's Jewish population (Central Bureau of Statistics 2009). They are noted for their uncompromising adherence to the strictest versions of *Halacha* (Jewish religious law) and their deliberate attempts to retain socio-cultural patterns of the traditional Jewish communities from former centuries. This *Halacha* shapes their world as well as their way of life down to the smallest detail (Bilu and Witztum 1994).

Although unified by religious fundamentalism (Heilman and Friedman 1991), the ultraorthodox Jews are divided

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into many sects and factions according to the degree of their devoutness, their leaders, and their origins. The spectrum of orthodoxy in Israel ranges from the secular to the ultraorthodox, as follows: Secular Jewish, Traditional Jewish, Modern Orthodox Jewish, and Ultraorthodox Jewish. This study's focus is on the latter group.

Ultraorthodox Jewish are clearly definable. They believe that Jewish law is sacred and that adherence to religious precepts (the *mitzvot*) is the primary responsibility of every Jewish. Even their behavior towards others is guided more by religion than by humanistic motivations. This is evident in the guidance given in the Jewish holy sources, for instance in the sentence: "You must love your neighbor as you love yourself, as I am God." Torah study is considered as the most important religious precept according to the Talmud, though only men are bound by this imperative. Movies, television, and books that are not religious are forbidden, and the study of any non-religious subjects is actively discouraged.

Since Torah values so strongly influence the content of life, it is important to understand how Jewish religious sources refer to children with developmental disorders. An in-depth reading of the Bible and Talmud, as well as other religious sources (such as: Midrashim, Mishna, Babylonian, Aggada, Tosefta, The Rambam as well as the Shulchan Aruch, enables one to glean guiding principles regarding the treatment of adults with developmental disorders. It should be noted, however, that although terms such as developmental disorders and other terms that are utilized in research and theory in the Western world with respect to children with disabilities do not appear in Jewish sources until the 20th century.

Exceptionality is reflected in the Halacha's position towards people who are significantly different from their fellow man in terms of their bodies, behavior, mental ability, or standing. According to Jewish sources, the community is measured and characterized by the way in which it treats its exceptional members. For instance, it is said: "You should not curse the deaf nor put a stumbling-block before the blind" or "You must love your neighbor as you love yourself, as I am the LORD" (Leviticus 19:14) or "for the image of God made The man" (Genesis 9:6), which the Sages interpreted as directing love, charity, mercy, grace, and even forgiveness towards the child with a disability.

The degree of exceptionality and its frequency have an effect on different levels of Jewish law, statutes, and legalities. For instance, in a case of severe intellectual disability, when it is clear that a boy is not in possession of his faculties, he is exempt from the obligation to practice the *mitzvot* and he receives full protection from society. However, in cases of children with intermediate and not severe intellectual disability, opinions are divided. The

worse and the more complex a child's disability, the more protection and support from society the child is entitled to receive.

According to Jewish sources, disabilities and their implications are discussed in a temporal context, in the context of the location of the event, and in regard to the Halacha's reference to it, with an emphasis on educational and functional aspects. These aspects are discussed from the point of view of the adult, referring to the applicable exemptions and prohibitions, as well as from the point of view of society's attitude and its effect on the adult's independence. To cite one example of many, there is currently an active discussion in the community regarding the marriage of those with developmental disabilities. This discussion is concentrated on two main questions: Should two adults with disabilities be allowed to marry and fulfill the *mitzvah* "to be fruitful and multiply" (bearing children is the first *mitzvah* mentioned in the Torah, and the prevention of pregnancy is forbidden), and if so, should the use of contraceptives be permissible despite the Halachic prohibition on their use? Behavioral directives in this community are updated through question and answered given by the rabbinical authority. As such, most of the answers to questions concerning children with disabilities are given in this manner.

Over the course of time, the ultraorthodox have become more integrated into Israeli society, but without being assimilated into it (Sivan and Kaplan 2003). Education has been one of the domains in which the ultraorthodox remain dependent on practitioners outside of the community. Until recently, this was also the case for special education services, which were almost nonexistent in the ultraorthodox community (Goshen-Gottstein 1987). In recent years, however, a system of special education for the ultraorthodox community has been established as part of the Israeli educational system. It has the status of "unofficially recognized" within the Special Education Division, and the official in charge of it is the Ministry of Education's State Inspector. It is a nationwide system comprising 178 special education institutions, 14 schools, and 46 preschools. The support services provided for diagnosing and managing developmental disorders in children were not offered in the ultraorthodox community in the past. The present system also allows research access into the ultraorthodox community, which provides extremely interesting research material because of its special characteristics.

Parenting a Child with a Developmental Disorder

Giving birth to and raising a child with a developmental disorder is a continuous care experience that requires parents to adopt new and unfamiliar life patterns which differ from those followed by others in their environment. These

parents have to confront a variety of difficulties in several domains of life, including economic, personal, couple, familial, and social difficulties. Since such requirements and changes are likely to add to the regular stresses of raising a child (Gallimore et al. 1999), they may lead to burnout, physical and mental exhaustion (Lazovsky 1999).

In recent years, it is possible to see a shift in the research literature towards examining parental coping in a new way. The shift is from the perception of parental coping as an inevitable condition of crisis, stress and pathology to seeing it in a way that recognizes multiple, varied and possibly positive ways of coping (Blacher et al. 2005; Hatton and Emerson 2003), including positive changes in the parents' lives (Scorgie and Sobsey 2000); successful coping strategies (Grant and Whittell 2000; Hastings et al. 2005) and family strength and resilience (Poehlmann et al. 2005). In other words, coping is no longer viewed as merely adaptive, but rather as a positive influence on the family system and a potentially valuable factor in improving support systems (Flaherty and Glidden 2000; Hatton and Emerson 2003). Researchers examining such perceptions have shown positive results in the dimensions of personal growth among parents of children with developmental disorders, closer relationships between family members, a deeper understanding of the needs of others, more meaningful personal and social connections, and a greater emphasis on expanding social activities (Greenberg et al. 1993; Hastings et al. 2002; Scorgie and Sobsey 2000).

The results of these studies suggest that in spite of the required changes, the pain and the difficulty of raising a child with a developmental disorder, many families succeed in coping well with their lives. Their successful coping raises the question as to what characterizes these families and leads them to a positive perception of their situation. Two resources will be examined in this research: religion and sense of coherence. Religion, which is an external resource, is connected to personal growth, since it helps the individual to find a positive meaning in crisis. In religious families, raising a child with a developmental disorder may be perceived as a mission (Lazarus and Folkman 1984), and thus the difficulties of coping acquire the meaning of a purpose in life. Research shows that religion functions as a factor moderating the negative effects of stressful life events (Burker et al. 2004; Poston and Turnbull 2004), as well as reducing the feelings of hopelessness and loss of control over one's life (Canda 2001). According to Blair (2003), religion also allows positive perception of the developmental disorder and a greater satisfaction with life.

The second personal resource influencing the individual's coping ability is sense of coherence, which is an internal resource. This concept reflects the internal belief of the individual in his/her ability to cope with reality and

emphasizes the role of personal growth (Antonovsky 1987). According to this concept, people live continuously in stress situations, but the impact and intensity of the stress depend on the way in which each individual perceives a given situation of stress. This approach places the individual rather than the stressful factors at the center when life poses new challenges. Sense of coherence is defined as a general orientation expressing a dynamic and continuous sense of certainty that the individual's internal and external environments are structured, predictable, and comprehensible. The sense of coherence consists of three interrelated principal components: comprehensibility, manageability, and meaningfulness. It is influenced by such variables as social status, sense of belonging, religious orientation, family structure, education, culturally derived values, genetic factors, and gender.

Research shows that one's sense of coherence is an internal source of support that can be a predictor for the individual's coping and adaptation in stress situations (Coffman et al. 1995). In a study that was conducted in Sweden among 216 parents of children with intellectual developmental disorders and autism, it was found that individuals who differ in their level of sense of coherence are likely to respond differently to situations of crisis (Olsson and Hwang 2002). Giving birth to a child with a developmental disorder can be considered as an acute or chronic stress situation, and the parent's sense of coherence may determine whether or not this situation is experienced as a threat.

The focus of the present research is on examining the coping of parents of adolescents with developmental disorders and comparing the sense of personal growth between religious versus secular parents of such adolescents. Specifically, this study examines the influence of the external resource, religion, and the internal resource, sense of coherence, on the coping abilities of families of adolescents with developmental disorders. In addition, the relationships between various demographic variables (e.g., parents' perception of the degree of severity of the adolescent's disorder, age, education, and income) and the sense of coherence and personal growth will be examined.

Moreover, in recent years there has been a noticeable change in the conception of the father's role and involvement in the treatment of the disabled child (Keller and Sterling 2004). As noted by Olsson and Hwang (2002), the distinction between mothers and fathers is important given that: "Unfortunately, relatively little substantive research has been published regarding fathers of children with special needs. This is especially true when compared with the body of research studying mothers of children with special needs or parents of children who develop without special needs" (Olsson and Hwang 2002, p. 48). Due to the unique characteristics of the ultraorthodox

community, examination of the distinction between fathers and mothers is of particular interest in this study.

Research Hypotheses

1. The sense of stress-related personal growth will be higher in ultraorthodox parents of adolescents with developmental disorders than in secular parents of such adolescents.
2. The sense of coherence will be higher in ultraorthodox parents of adolescents with developmental disorders than in secular parents of such adolescents.
3. Among parents of adolescents with developmental disorders, differences between mothers and fathers will be found in their level of growth.
4. Among parents of adolescents with developmental disorders, differences between mothers and fathers will be found in the level of their sense of coherence.
5. Among parents of adolescents with developmental disorders, a positive relation will be found between their sense of coherence and their sense of growth.

Method

Participants

The sample was comprised of 200 parents (fathers and mothers) of adolescent children, with 50% of the sample defining themselves as secular and 50% defining themselves as ultraorthodox. The adolescent children ranged in age from 10 to 21. All of the adolescents lived in their parents' home and studied in a special education school.

Procedure

One of the biggest Israeli cities, which has a large ultraorthodox population and is a mixed city combining both ultraorthodox and secular populations, was chosen for the purposes of the present research. This choice enabled a comparison of two research samples living in the same geographical area. Moreover, due to the large size of the city, it has many special education schools, which allowed the two groups to be chosen by random sampling of children studying in the same city.

In order to conduct the research, two special education inspectors working in the city chosen for the study were approached, one inspecting secular schools for autistic students and the other inspecting ultraorthodox schools for autistic students. The inspectors referred the researcher to schools for adolescents with developmental disorders. Four schools provided their consent to participate in the

research. In all four schools, the principals and the homeroom teachers were approached and received an explanation about the research and its purposes. After they agreed to assist in conducting the research, the homeroom teachers requested the students' parents' consent to participate in the research. Importantly, it was explained to the 270 parents who expressed their consent that it was their right not to respond to the questionnaires if they were not interested in doing so. Together with the questionnaires, they received a written explanation about the procedure and purposes of the research. After 2 months, the questionnaires were collected by the homeroom teachers. With 200 completed questionnaires returned, the resulting number of research participants was 100 secular and 100 ultraorthodox parents.

Research Tools

- (1) *Socio-Demographic Data Questionnaire*: This questionnaire included information about the parents and the adolescents. The information about the family included, the parents' ages, education, source of income, level of income, religious identification, and number of children in the household. The information about the adolescents included gender, age, and degree of severity of the disorder.
- (2) *The Sense of Coherence Scale* (Antonovsky 1987): This index was designed to determine whether the respondents perceive their world and life as comprehensible, manageable, and meaningful. The original index includes 29 items divided into three indices (comprehensibility, manageability, and meaningfulness). However, a shortened version comprising 13 items was used in the present research in order to examine the mothers' sense of coherence. The reliability of the shortened version designed by Antonovsky (1993) was found to be sufficient in 16 studies in Israel and worldwide (Cronbach's $\alpha = .74-.91$), and its reliability in the present research was found to be .78.
- (3) *The Stress-Related Growth Scale* (SRGS; Park et al. 1996). This questionnaire allows us to examine the sense of stress-related personal growth and the factors predicting such growth. The questionnaire includes 50 items that are rated on a three-point scale: 1—not at all; 2—somewhat; 3—very much. The reliability of the tool was tested on students and found to have a Cronbach alpha of .94. Test–retest showed a correlation of $r = .81$ (Park et al. 1996). The questionnaire was translated into Hebrew and then back into English specially for the purposes of this research. Three referees tested the Hebrew version in

comparison to the original, and all three agreed that the translation adhered to the original.

In addition, since the original questionnaire had many items (50 items in all), two referees were asked to divide the items on the translated questionnaire into content areas. The referees discerned three content areas or dimensions: personal, social, and religious. There was a full consensus between the referees concerning 36 of the items, while the remaining 14 were judged not to belong to a clearly defined content area. In addition, inter-correlations were examined between all items, and an additional 10 items that had very high correlations with other items were removed from the questionnaire in order to eliminate redundancy and simplify the questionnaire. Thus, three scores were calculated for each participant according to the mean estimations of items in each dimension: personal, social, and religious. In each of the dimensions, a high internal consistency was found: growth in the personal dimension $\alpha = .89$ in the social dimension $\alpha = .77$ and in the religious dimension $\alpha = .88$. It should also be noted that upon examining the questionnaire as a whole, a high internal consistency of .95 was found.

Results

Table 1 presents the distribution of the background variables among the participants’ families. The table also presents Chi square analyses that were performed in order to compare between the ultraorthodox and the secular parents.

Table 1 shows significant differences between secular and ultraorthodox parents in terms of their age, education, level of income, source of income, and number of children. Regarding the level of income, a significant difference was found between the two groups, whereby 83.8% of the secular parents defined themselves as having average income, while only 54.4% of the ultraorthodox parents defined themselves as having average income. In regard to the number of children, a large significant difference was found between the two groups, with 99% of the secular families having four children or less and 89.5% of the ultraorthodox families having five children or more. Regarding the parents’ age, 19% of the ultraorthodox mothers were over age 46, whereas none of the secular mothers were in this age group. The age distribution

Table 1 Distribution of background variables among the participants’ families

Characteristics	Values	Secular families N = 100 (%)	Ultraorthodox families N = 100 (%)	χ^2
Income	Below average	11.2	45.6	3.89*
	Average	83.8	54.4	
Number of children	1–2	54	5.3	57.27***
	3–4	45	5.2	
	5–6	1	20.2	
	7+	0	69.3	
Age of the mother	20–35	54.8	46.6	9.01*
	36–45	45.2	34.5	
	46+	01	19	
Age of the father	20–35	26.2	22.4	1.97
	36–45	59.5	51.7	
	46+	14.3	25.9	
Mother’s education	Secondary	16.7	51.7	12.84*
	Tertiary	19	31	
	Academic	64.3	17.2	
Father’s education	Secondary	9.5	37.9	3.8
	Tertiary	63.3	44.8	
	Academic	57.1	17.2	
Mother’s source of income	Not working	31	51.7	2.59
	Working part-time	26.2	31	
	Working full-time	42.9	17.2	
Father’s source of income	Not working	7.1	32.8	18.25**
	Working part-time	4.8	46.6	
	Working full-time	88.1	20.7	

* $p < .05$; ** $p < .01$; $p < .001$

between the two fathers' groups was similar, with most fathers in both groups ranging in age from 36 to 45 years old. Significant differences were found in regard to education, with over half of the secular mothers and fathers (64.3 and 51.7%, respectively) having an academic education, as compared to 17.2% of the ultraorthodox mothers and fathers. As for the parents' sources of income, a difference was found among the mothers, whereby 69% of the secular mothers were working part- or full-time, as compared to 51% of the ultraorthodox mothers. A significant difference was found among the fathers, with 88.1% of the secular fathers working full-time and only 20.7% of the ultraorthodox fathers working full-time. With 46.6% of the latter working part-time, it appears that they were combining work with *yeshiva* studies.

A number of background data items were also collected regarding the adolescents with the developmental disorder. The distribution of the adolescents according to gender, age, and the primary disorder is presented in Table 2.

Chi square analyses of the differences between the characteristics of the adolescents from the two research groups revealed no significant differences on the whole. About half of the adolescents were boys and the other half girls. Regarding age, the distribution was also similar, with about 70% of the adolescents aged 10–17 and the rest 18–21. In regard to the primary disability, most of the adolescents in both groups were diagnosed with autism,

about 6% with intellectual disability, and 15% with generic and chromosomal disorders.

The first research hypothesis was that the sense of personal growth among the ultraorthodox parents of adolescents with developmental disorders would be higher as compared to the secular parents of such adolescents. A two-way MANOVA was conducted in order to test this hypothesis. The parents' religious self-definition (secular vs. ultraorthodox) and gender (father/mother) served as the independent variables, while the sense of personal growth was the dependent variable.

In a 2X2 analysis of variance, with religious definition (secular/orthodox) X parent (father/mother), a statistically significant difference was found in religious definition [$F(1,97) = 8.65, p < .01$], but no significant interaction was found between religious definition (secular/orthodox) and parent (father/mother). However, a significant difference was found in the entire sample between fathers and mothers [$F(1, 97) = 3.68, p < .05$].

MANOVA was also conducted for the three factors in the growth questionnaire: personal, social, and religious. In this analysis, a significant difference was found between ultraorthodox parents and secular parents [$F(3,91) = 35.05, p < .001$], but no significant difference was found between mothers and fathers [$F(3,91) = .56, p > .05$]. The averages and standard deviations of the growth measures of the two groups and the results of the analyses of variance that were conducted separately for each measure are presented in Table 3.

From the table, one can see that significant differences were found only in the religious dimension. The findings show that the ultraorthodox parents evaluated their sense of personal growth higher on the religious dimension than did the secular parents. No such differences were found in the personal and social dimensions. In addition, no significant differences were found regarding the parents' gender, and there was no significant interaction between the religious dimension and the parents' gender. These findings partially support the first research hypothesis.

As mentioned previously, a significant difference was found between mothers and fathers in the general score, but not in the growth components. Regarding the score, growth was found to be higher among mothers ($M = 80.41, SD = 11.24$) than among fathers ($M = 73.36, SD = 12.7$).

The second research hypothesis was that the sense of coherence among the ultraorthodox parents of adolescents with developmental disorders would be higher as compared to the secular parents of such adolescents. A two-way MANOVA was conducted in order to test this hypothesis. The parents' religious self-definition (secular vs. ultraorthodox) served as the independent variable, and the sense of coherence was the dependent variable. Analyses for each parameter separately are presented in Table 4.

Table 2 Background characteristics of the adolescents with developmental disorders

Characteristics	Ultraorthodox families N = 100 (%)	Secular families N = 100 (%)	X ²
Gender			
Boys	54.8	48.3	.41
Girls	45.2	51.7	
Age			
10–13	28.6	43.1	2.24
14–17	40.5	31	
18–21	31	25.9	
Primary disability*			
Autism	77	81	
Intellectual disability	5	7	
Generic and chromosomal disorders	16	9	
Down syndrome	2	3	

* The developmental disorder in Israel is diagnosed by a psychiatrist or a clinical psychologist (Head of the Ministry of Education Circular 2005) on the basis of the criteria set forth in the *Statistical Manual of Mental Disorders, Fourth Edition Text Revision (DSM-IV-TR 2000)*

Table 3 Averages and standard deviations of the growth parameters among secular versus ultraorthodox parents

Growth index	Secular parents		Ultraorthodox parents		F (1,97)
	M	SD	M	SD	
Personal	71.52	14.06	76.42	12.15	2.6
Social	76.23	10.41	77.58	11.17	.35
Religious	89.36	16.1	58.79	21.42	54.99***

*** $p < .001$

Table 4 Means and standard deviations of the coherence parameters according to religious identification

Parameters	Secular		Ultraorthodox		F (1,97)
	M	SD	M	SD	
Coherence	131.9	16	150	19	21.31***
Comprehensibility	45.21	6.71	51.56	7.68	18.37***
Manageability	47.43	6.42	51.88	7.38	9.90**
Meaningfulness	40.26	7.03	45.49	6.04	22.45***

** $p < .01$; *** $p < .05$

The table shows significant differences between the secular and the ultraorthodox parents on all three parameters (comprehensibility, manageability, and meaningfulness). One can see that on all three parameters, the sense of coherence among the ultraorthodox parents is higher than among the secular parents. These findings support the second research hypothesis.

On the other hand, no difference was found between mothers and fathers, and no significant interaction was found between religious definition and father/mother. The three components of coherence were examined separately: comprehensibility, manageability, and meaningfulness. MANOVA conducted on these three dimensions also revealed a significant difference according to religious definition [$F(3,84) = 8.60, p < .01$], as well as a significant difference between the group of fathers and the group of mothers [$F(3,96) = 2.31, p < .05$]. However, no significant interaction was found between religious definition and fathers/mothers [$F(3,85) = 1.74, p < .05$]. In other words, the difference in religious definition among fathers was similar to the difference among mothers.

As presented earlier in the MANOVA of the components, a significant difference was found between mothers and fathers. In the analyses of variance conducted separately for each measure, a significant difference was found only in the manageability components and only in relation to the parents' gender [$F(1,97) = 7.03, p < .01$]. The mean of manageability for the fathers was higher than for the mothers ($M = 49.82, SD = 8.16$ vs. $M = 46.97, SD = 9.35$, respectively). Yet, on the other two parameters, no such differences were found. In the analyses of variance, no significant interaction was found between religious definition and fathers/mothers.

Table 5 Pearson correlations between the parents' age, education, and sense of coherence

	Sense of coherence
Father's age	-.14
Mother's age	.01
Father's education	.18*
Mother's education	.24*

* $p < .1$

In addition, the research examined the connections between several demographic variables and the sense of coherence and sense of growth. Pearson correlations were calculated for both research groups in order to examine the parent's age, education, income, and the degree of severity of the adolescent's developmental disorder. Only two significant correlations with demographic characteristics were found. The first finding concerned the correlations between the parents' age and education and their sense of coherence. Table 5 presents the Pearson correlations between the parents' age, education and sense of coherence in the total sample.

The table shows a positive correlation between the parents' education and the sense of coherence: The higher the parent's education, the stronger the sense of coherence.

The second significant finding concerned the correlations between the degree of severity of the adolescent's disorder and the parents' sense of coherence and sense of growth. The results of this analysis are presented in Table 6.

As the table shows, negative correlations were found between the severity of the adolescent's disorder and the

Table 6 Pearson correlations between the degree of severity of the adolescent's disorder and the parents' sense of coherence and sense of growth

		Sense of coherence	Sense of growth
Degree of severity	Secular	−.06	−.35*
	Ultraorthodox	.02	.24*

* $p < .05$

sense of personal growth among the secular parents, meaning that the more severe the disorder, the lower the parents' sense of personal growth. In contrast, positive correlations were found with the general growth score among the ultraorthodox parents, meaning that the more severe the disorder, the higher the parents' sense of personal growth.

The fifth study hypothesis concerns the relations between the variables, proposing that a positive relationship will be found between sense of coherence and sense of growth among parents of adolescents with developmental disabilities, so that the higher the sense of coherence, the higher the sense of growth. In order to test this hypothesis, Pearson coefficients were calculated separately for secular and ultraorthodox parents and separately for mothers and fathers. The results are presented in Table 7.

As seen in the table, among secular fathers there was a significant correlation between sense of coherence and sense of growth in the social sphere, so that the higher the sense of coherence, the higher the sense of growth in the social sphere. Among ultraorthodox parents, the coefficients were lower than among secular parents, and negative coefficients were found between sense of coherence and sense of growth in the personal sphere. Among ultraorthodox fathers, the lower the sense of coherence, the higher the personal growth. The results for secular parents agree with the research hypothesis, according to which the higher the sense of coherence, the higher the personal growth. The results for ultraorthodox parents do not agree with the research hypothesis.

Discussion

In recent years, there has been a shift in the research literature towards examining the coping strategies of parents of children with disabilities. Rather than taking the approach that assumes an inevitable situation of crisis, stress and pathology, the alternative perception recognizes multiple and diverse ways of coping, including processes of personal growth (Maul and Singer 2009). The focus of the present research is on examining the resources contributing to the sense of personal growth and sense of coherence among parents of children with developmental disorders. The specific contribution of the present research is in examining the religious dimension.

On the basis of previous studies (Hughes 1999), the first research hypothesis proposed that the sense of growth among ultraorthodox parents would be higher than that of secular parents. Indeed, the findings point at differences between ultraorthodox and secular parents in the sense of personal growth, highlighting the importance of religious faith among families of children with developmental disorders.

In line with previous research findings that religion provides an external source of control for the individual and helps to cope with threat (Spilka et al. 1985), the second research hypothesis proposed that the sense of coherence among ultraorthodox parents would be higher than that of secular parents. Significant differences were in fact found between these two groups, with a higher sense of coherence in ultraorthodox parents than in secular parents. According to Antonovsky's theory, the sense of coherence is influenced by such factors as social status, education, and culturally derived values (Antonovsky 1987). Stable and deep-rooted values connected to religion, tradition, or socio-political ideology can also confer a sense of coherence. As such, a religious person is more likely to accept that the reality of giving birth to and raising a child with a developmental disorder is dictated by God (comprehensibility) and that God will also provide the resources and tools to meet the needs of this child (manageability).

Table 7 Pearson correlations between sense of coherence and sense of growth among religious and secular families and fathers and mothers

	Fathers			Mothers		
	Growth measures			Growth measures		
	Personal	Social	Religious	Personal	Social	Religious
Secular						
Coherence	.15	.24*	−.03	.13	.07	−.03
Ultraorthodox						
Coherence	−.20*	.03	−.04	−.06	−.14	.18

* $p < .05$

Moreover, the presence of the child with the developmental disorder is viewed as meaningful for the life of the family (meaningfulness). Therefore, a religious parent raising a child with a developmental disorder will have a high sense of coherence, as opposed to a secular parent who has to find meaning in a dimension that is not religious.

In addition, this research examined connections between other demographic characteristics of the parents and the adolescents with developmental disorders (age, education, source of income, and the severity of the adolescent's disorder) and the parents' sense of coherence and sense of stress-related personal growth. The findings show a connection between the parents' education and the sense of coherence. A connection was also found between the severity of the adolescent's disorder and the sense of growth. The findings show that the higher the parent's education, the higher the sense of coherence. This finding strengthens previous findings (Drori and Florian 1998) that a more educated person will be better able to perceive a stress situation as structured, ordered, and coherent (comprehensibility) and to cope with and respond to it accordingly.

As for the severity of the adolescent's disorder. The results show that the greater the severity of the adolescent's disorder, the higher the sense of growth reported by ultraorthodox parents, as opposed to the lower sense of growth reported by secular parents. This finding contradicts other findings in the literature that the more severe the disorder and the older the child, the higher the stress reported by parents (Gallagher et al. 1994; Roach et al. 1999).

One possible explanation for these results is that ultraorthodox families perceive their coping process as a trial with which God has confronted them, while at the same time bestowing them with the necessary strength to cope with it. The better they feel about coping with the severe disorder, the greater their sense of success, self-confidence, and optimism. By perceiving the crisis as a challenge, they can find more meaning in their lives—in spite of the severity of the adolescent's disorder—and thus experience a stronger sense of growth.

The third research hypothesis was that differences would be found in the extent of growth between fathers and mothers. The study findings show that mothers reported a stronger sense of growth than fathers. Given that no studies were found to date comparing the sense of growth among fathers and mothers of children with developmental disabilities, it therefore, would appear that this finding constitutes an addition to current research knowledge.

It is possible that these differences are the result of mothers being the main caretakers of children in both the ultraorthodox and secular communities, despite the changes in recent decades regarding women joining the labor

force. In their study of factors related to positive perceptions among mothers of children with intellectual disabilities, Hastings et al. (2002) argue that it was actually mothers who reported intensive, demanding care of their child that felt a sense of personal growth. This finding is in accord with those of the present study.

The fourth research hypothesis was that differences would be found in the sense of coherence between mothers and fathers. There is no literature available on such variance. The present study did not find differences between mothers and fathers in the sense of coherence, except for a difference in the manageability component. One possible explanation is that mothers and fathers of adolescents with developmental disabilities are with the child and raise him together for a long period of time, which may cause them to have identical feelings regarding the components of coherence. The finding that no differences were found between mothers and fathers in the ultraorthodox group is interesting and may strengthen the explanation that in this stage of the parent's life the extent to which one appreciates the resources at his or her disposal (manageability) and the extent to which one perceives his or her life as meaningful (meaningfulness) can be similar among mothers and fathers. These findings are supported, for example, by Trute and Hiebert-Murphy's study (2002) in which fathers and mothers similarly evaluated the effect of a child with a disability on the family, as well as by Keller and Sterling study (2004) that did not find any differences in the feelings of stress experienced by fathers and mothers of school-aged children with disabilities.

The last research hypothesis concerns the relationship between the variables, proposing that the higher the sense of coherence, the higher the sense of growth. This hypothesis was confirmed only for secular fathers, with a positive correlation found between sense of coherence and sense of growth in the social sphere among secular fathers. This finding may be explained by the dynamic and continuous feeling of individual confidence expressed in the sense of coherence. The secular individual feels that his world is orderly and consistent, and he interprets his life, including raising an adolescent with a developmental disability, as a challenge and as meaningful.

On the other hand, a third significant correlation was found between sense of coherence and sense of growth in the personal sphere among ultraorthodox fathers. The negative correlation among the religious fathers may perhaps be explained in light of the outlook that serves as the foundation of a religious person's entire life, according to which one leads his life and finds answers to his questions. Against this background, it is possible that ultraorthodox individuals derive the inner strength needed to cope with their situation from the religious framework and therefore, do not require any outside assistance. As such, growth is

not a product of coherence, and thus no relationship is found among ultraorthodox men between sense of coherence and sense of growth in the personal sphere.

Conclusion

In the absence of systematic research concerning parents of adolescents with developmental disabilities in the ultraorthodox community in Israel, the interpretations presented here must be considered with caution. The present research is likely to contribute both in theoretical and practical aspects. In theoretical terms, it reveals that religious faith is likely to influence the parents' perceptions when faced with the situation of parenting an adolescent with a developmental disorder. In the practical aspect, the research is likely to be useful to professionals in helping parents to cope with such a situation.

These conclusions are in line with a previous study by Olsson and Hwang (2002), who pointed to the importance of the sense of coherence for the mental well-being of parents of children with different developmental disabilities. By providing information on the child's diagnosis and condition, as well as on educational intervention programs, professionals can bring increased clarity to the situation (comprehensibility). Moreover, by presenting parents with advice on how to cope with their child's difficult behaviors and how to develop their ability to control these behaviors, professionals can strengthen the parents' capacity to manage and control their own lives (manageability). Finally, professionals can help parents to redefine the purpose of their lives and to see their child with a developmental disorder as a reward, thereby changing the meaning that they assign to their lives (meaningfulness).

All of the above concerning the ability of professionals to act in the ultraorthodox community must be considered cautiously, using culturally sensitive thinking that matches the social, ethical, and religious codes of this society. The point of departure of the dialogue with parents of adolescents with developmental disabilities must be the recognition that it is religion which provides the parents with their primary means of coping with the experience of disability. On the basis of such recognition, it is possible to suggest interventions/support that would creatively integrate components of their spiritual-religious reality, such as symbols, ceremonies, idioms, metaphors, and practices derived from Jewish tradition, in order to acquire the parents' trust and cooperation. In other words, success with parents of adolescents with developmental disabilities in the ultraorthodox community is dependent upon properly learning the culture of those seeking assistance and becoming familiar with it. This cultural knowledge must then be transferred and translated into specific actions that

directly address the parents' needs. One clinical intervention that could be suitable for this purpose is Professor Feuerstein's method for parental empowerment through mediated learning and instrumental enrichment. The work and methods that Feuerstein built throughout the years for parents of adolescents with disabilities is focused on two objectives: Teaching parents how to serve as better mediators, and Teaching parents how to develop discourse on the topic of emotions.

The second topic of this research, personal growth, is only beginning to be examined in populations of parents of children with developmental disorders. Findings of the present research regarding ultraorthodox parents raise a number of important questions, and it is important to further explore them in future research. Additional research should examine the coping strategies used by parents of young children with developmental disorders, and by parents of adolescents with other disorders, such as behavioral disorders. The third topic of this research is the importance of the research distinction between mothers and fathers, especially against the background of Lamb and Laumann-Billings' (1997) claim that fathers of children with special needs have been virtually ignored by researchers.

The findings of this study point not only to a difference between mothers and fathers, but also to a difference that may be found between fathers from different communities. Therefore, in future studies of parents of adolescents with developmental disabilities, it is important to compare mothers and fathers within the same community as well as between different communities, as such a comparison may be interesting from a research point of view and may also be of theoretical and practical value.

Moreover, in order to validate the present research findings, it is important to test the results on a larger population of parents raising a child with a developmental disorder in ultraorthodox communities in other cities in Israel, as well as comparing them to other communities, such as the Bedouin community. This comparison is likely to be interesting, since similar to the ultraorthodox families, Bedouin families typically have a large number of children. In addition, it is important to examine the contribution of other variables that may be contributing to stress-related personal growth and to explore personal growth from other points of view.

In conclusion, this study focused on sense of growth and sense of coherence, but it is important to remember that alongside these aspects, an adolescent with developmental disabilities in the ultraorthodox family affects the entire family. For instance, it may influence matchmaking for the rest of the family, also when the siblings of an adolescent with a disability get married, they cannot postpone the birth of their children even though they are often apprehensive about another birth. In addition, genetic testing is

prohibited in this sector, which means that there is great concern. Another example is the absence of joint daily experiences among the siblings (between the siblings and the adolescent with developmental disability) since an adolescent with a developmental disability attends a special education school while his/her siblings initially attend the Heder and later on the Yeshiva. These two educational settings are different from a special education setting and they have different daily agendas. Moreover, the more severe and complex the disability, the more problematic the Halachic standing of the adolescent becomes, since according to Halacha they do not count towards a “minyan” (quorum for prayer), they cannot read from the Torah, and they cannot testify. Therefore, it is worthwhile to examine the effect of the Halachic standing of the adolescent from the point of view of the parents themselves, as well as from the point of view of key figures in the ultra-orthodox community, such as rabbis.

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