

- **Name of the study:** Parental Burnout Among Orthodox and Nonorthodox Mothers of Children With/ Without Special Needs: Causes, Perceived Severity of the Child's Disability, Burden of Caregiving, Social Support, Emotion Work, Learned Resourcefulness, and Mothers' Self-Utilization of Health Services
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### Abstract

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**Introduction and background.** Parental Burnout (PB) is defined as a specific burnout syndrome that is related to the parental roles and arising from them. It mainly develops due to an imbalance between burnout risk factors (continuous exposure to demands in the field of parenting) and protective factors against burnout (the type and quantity of available coping resources). PB includes physical and emotional exhaustion, emotional distancing from the child, saturation from the parental role, and contrast with the previous parental self. As a result of PB, parenting becomes functional, and interactions with their children are limited to instrumental aspects. Moreover, PB can affect the parent's health, develop depressive symptoms, addictive behaviors, sleep disorders, and couple conflicts. Parents of children With Special Needs with Disabilities (W-SND) are at high risk of PB due to the child's functioning compared to their peers, the child's dependence on them and the ongoing burden of childcare. The Ultraorthodox sector population tend toward a life based on religion and faith that includes a unique social-community support network. They believe that the birth of a child W-SND stems from a divine providence and is God's will. In addition, the use of medical services takes into account the opinions of Rabbis (Ultra-Orthodox leaders who are not physicians), and the women are considered to be responsible for childcare and education. So far, most studies have focused on PB among parents of healthy children, while few studies have been conducted among parents of children W-SND who demand ongoing care. Also, scarce studies have examined sociocultural aspects related to PB among parents of children W-SND generally and mothers specifically.

**The main objective of the study** is to examine the fitness of a research model describing the contribution of nexus of correlations between risk factors (severity of child's disability, caregiver burden), and protective factors: Social-Support resource (Hobfoll, 1989), Learned-Resourcefulness (Rosenbaum, 1990), and Emotion-Work (EW, Hochchild, 1979), among ultra-Orthodox and non-

Orthodox Jewish mothers of children W-SND and With Out Special Needs (WO-SN). Additionally, the mother's use of health services for herself due to caregiver burden was studied as mediating the correlation between perceived burden of treatment and PB.

**Methods.** A mixed-methods research design was utilized. The quantitative study sample included altogether 352 mothers of children W-SND (n=176) / WO-SN (n=176), ultra-Orthodox and non-Orthodox. The qualitative sample included 12 mothers of children W-SND from both sectors, six with high PB and six with low PB (according to the findings of the quantitative study).

**Quantitative data analyses.** Descriptive, correlative, one/two-way ANOVA were used, and hypothesis testing was executed using Structural Equation Modeling (SEM). Constant Comparative Analysis method was used for analyzing the qualitative interviews, classifying findings into themes and categories, validated by peer debriefing.

**Quantitative analysis findings.** PB level was found moderate, but higher among mothers of children W-SND. Child's disability was perceived more severe by Ultra-Orthodox mothers of children W-SND, while most of the mothers of children WO-SN reported no challenge/difficulty in raising their child. Mothers of children W-SND reported higher caregiver burden. More than half of the mothers of children W-SND used health services for themselves due to Caregiver Burden (less than 10% WO-SN). Social-Support and Learned-Resourcefulness were reported slightly higher by mothers of children WO-SN. While caring for their child, mothers of children W-SND experience emotions of hope followed by joy (ultra-Orthodox) or pride (non-Orthodox). Mothers of children WO-SN experience most frequently joy, followed by pride (ultra-Orthodox) or gratefulness (non-Orthodox). However, mothers of children W-SND think they are expected to feel hope, and mothers of children WO-SN – mostly joy and gratefulness. Hypothesis testing revealed that Hypothesis 1 was confirmed. Among all mothers, the higher the sense of caregiver burden, the mother's level of PB is higher. Hypothesis 2 was confirmed. The more the disability is perceived as severe by mothers of children W-SND, their sense of Caregiver Burden is higher. Hypothesis 3 was confirmed. The higher the sense of Caregiver Burden of the mothers, the more frequently they turn to health services for themselves. Hypothesis 4 was confirmed among mothers of children WO-SN. The more these mothers use health services for themselves, their level of PB was found higher. Hypothesis 4 was not confirmed among mothers of children W-SND. Hypothesis 5 – the first part was confirmed. The more Social-Support mothers report to receive, their Learned-Resourcefulness level was found higher. However, receiving Social-Support does not reduce the level of PB. Thus, the second part of Hypothesis 5 was not confirmed. Hypothesis 6 was not confirmed. In contrast to the hypothesis, the more mothers' report performing deeper EW, their caregiver sense of burden was found higher. Also, the more mothers of children W-SND report performing deep EW, their PB was found higher.

Hypothesis 7 was confirmed. The sense of Caregiver Burden mediates the correlation between EW and PB. However, among mothers of children WO-SN – performing EW is related to PB only indirectly (i.e., full mediation) via sense of caregiver burden, while among mothers of children W-

SND, there is also a direct correlation between EW and PB. Hypothesis 8 was not confirmed. Mothers' use of health services for themselves does not mediate the correlation between their sense of Caregiver Burden and PB. Hypothesis 9 was confirmed only among mothers of children W-SND. Learned-Resourcefulness moderated the correlation between sense of Caregiver Burden and PB. Among mothers with lower levels of Learned-Resourcefulness – the higher the mothers' sense of Caregiver Burden – their PB is higher. Among mothers with higher levels of Learned-Resourcefulness – the strength of the correlations between sense of Caregiver Burden and PB is weaker. Hypothesis 10 was confirmed. The nexus of correlations between risk factors and protective resources explained significantly about 50% of the variance of PB of mothers of children W-SND and WO-SN.

**Qualitative analysis findings.** Five themes were found that present in depth perceptions, emotions, difficulties and ways of coping related to PB among mothers of children W-SND. Theme I, mothers' perceptions of the uniqueness of their child (the child's weaknesses and strengths). Theme II, perceived experience of motherhood of children W-SND (a negative experience, a positive experience and a varying experience since the child W-SND was born). Theme III, the difficulties involved in motherhood of children W-SND. Theme IV, coping with difficulties related to motherhood of a child W-SND (practical, spiritual, social, and emotional ways of coping). Theme V, PB, its consequences and ways of coping (risk factors and protective resources of PB).

**Summary and conclusions.** The phenomenon of PB of Jewish ultra-Orthodox and non-Orthodox Jewish mothers of children W-SND and WO-SN was investigated in this research. The nexus of correlations between risk factors and protective resources explained significantly about 50% of the variance of PB. Although these mothers' PB is connected to their child's functioning, perceived severity of disability and dependency, it is also integrated in the way they experience motherhood and in the perceptions of the society, community and the mother herself, as the primary caregiver of her child. Despite the mothers' difficulties and negative emotions (as found also in previous studies), they reported also positive emotions that serve as a protective resource against PB. Their willingness to overcome guilt feelings stemming from their self-perception as the sole caregivers of their child and to trust others stems from their strength and leads them to adopt a range of coping methods (practical, spiritual, social, emotional). The main theoretical innovative contributions which derive from the analysis of the research model include expanding the definitions of PB of mothers of children W-SND by adding a new dimension: self- and environmental-neglect; defining a new unique spiritual technique of deep EW (faith in God and prayer); conceptualizing the combined effect of the three protective resources (Social, Cognitive and Emotional) to reduce PB of Mothers of children W-SND. The mothers of children W-SND develop learned resourcefulness as a cognitive-behavioral protective resource. They draw strength and resilience from their belief that they are capable to affect their behavior by performing deep EW, while utilizing available, suitable and trustful Social Support. Additional factors that may contribute to PB and new models to test two-way correlations between PB and other variables should be explored. This study should be

also conducted among fathers and both spouses due to fathers' increasing involvement in parenting to date. It is important to work with nursing, medical and paramedical staff to increase awareness of risk factors of PB in mothers and to construct workshops focusing on developing protective resources against PB.

### **Keywords**

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Parental burnout, mothers of children with special needs, caregiver burden, severity of disability, child's functioning, social support, learned resourcefulness, emotion work, utilization of health services, ultra-Orthodox and non-Orthodox sectors

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