Determination of life satisfaction among young women care leavers from the Ultraorthodox Jewish community

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**Abstract**

Based on self-determination theory this study examined the contribution of background variables (age and economic status) as well as personal (religiosity and optimism), environmental (presence of supportive figure), and psychological (fulfillment of basic needs) resources to life satisfaction among Ultraorthodox Jewish young women who left care. The study, conducted among Ultraorthodox young women in Israel, included 95 participants between the ages of 18 and 27 (M = 21.8, SD = 2.18), who left a care framework designed especially for Ultraorthodox at-risk young women. A path analysis model indicated the significant role played by the fulfillment of three basic needs – competence, relatedness, and autonomy – which directly contributed to life satisfaction and also mediated between optimism and presence of supportive figure on the one hand, and life satisfaction on the other. Moreover, economic status was found to make a direct significant positive contribution to life satisfaction. Surprisingly, religiosity made no contribution to life satisfaction. The discussion highlights the importance – given their affiliation with a close, collectivistic community – of the fulfillment of basic needs of Ultraorthodox young women who left care. It also addresses the importance of promoting intervention programs while these young women are still in care, focusing on economic opportunities and on the presence of a supportive figure in their lives after they leave care.

1. Introduction

Studies on the transition to adulthood of young people who leave residential care suggest that a successful transition includes adjusting to the main areas of independent living. One such area is positive mental health as expressed, among other things, in life satisfaction (Dinisman, 2016; Refaeli et al., 2019). Life satisfaction refers to people’s overall perspective or general evaluation of their lives (Diener, 1984). However, the little research that exists on life satisfaction among care leavers indicates that this population is at risk for lower levels of life satisfaction (Cameron et al., 2018; Dregan & Gulliford, 2012). It is therefore important to acknowledge the factors that contribute to life satisfaction among this population.

A unique group of care leavers that has not yet been studied comprises care leavers from closed religious communities such as the Ultraorthodox Jewish community. Generally, most adolescents enter care due to having a disadvantaged family or being involved in risk behaviors (Kashy et al., 2008). Among youth from the Ultraorthodox community, however, and especially among female youth, risk behavior includes a violation of the community norms as expressed in behavior considered to be inappropriate by community members. As a result, they are often distanced from their family and community (Itzhaki, 2016; Kelly, 2014). Leaving care after losing familial and communal resources may put these young women at additional risk for lack of life satisfaction.

The aim of the current study was to examine the determination of life satisfaction among young women care leavers from the Ultraorthodox Jewish community. Studies have found that personal resources and social support make a significant contribution to life satisfaction among care leavers (Dinisman, 2016; Refaeli et al., 2019). Thus, self-determination theory (SDT; Ryan & Deci, 1985; Ryan & Deci, 2000) provided the basis for this study, due to its emphasis on the contribution of personal and environmental resources to the fulfillment of basic needs in order to enhance life satisfaction. Specifically, we examined the contribution of personal aspects (religiosity and optimism) and an environmental aspect (presence of supportive figure) to life satisfaction, and the mediating role of the fulfillment of basic psychological needs.

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1.1. At-risk Ultraorthodox young women

The Ultraorthodox Jewish sector is one of the closed minority communities in Israeli society, constituting about 12.6% of the total population in Israel (Malach & Cahaner, 2020). The Ultraorthodox are in many ways separated from the rest of society, which is perceived as threatening, due to the negative influence of non-Ultraorthodox society’s liberal Western values on the Ultraorthodox community. This community is traditional, and segregated, and is fiercely devoted to maintaining a unique way of life characterized by, among other things, separate living areas and special clothing for men and women (Goldstein & Laor, 2007). State-certified private educational institutions provide the youth of these communities with study programs that are uniquely intended for them, with boys and girls attending single-sex schools (Hakak, & Rapoport, 2012; Shipgel, 2011). Girls learn in high schools referred to as “seminaries,” which combine Jewish subjects together with general studies designed especially for Ultraorthodox girls.

However, the expectations from girls in this community have less to do with the educational aspect of achieving success in school and more to do with demonstrating characteristics that are important to the community (Barth & Ben-Ari, 2014) such as being intelligent, modest, quiet, clean, organized, and observant of tradition (Rosenthal & Roer-Strier, 2006). In fact, the Ultraorthodox community puts a large emphasis on women’s unique role in nurturing and sustaining relational bonds in their homes and community. Girls who engage in risk situations, therefore, are often viewed as disregarding or even negating these communal norms (Finkelman, 2011; Kelly, 2014).

Risk situations among Ultraorthodox girls can be both “global” risk situations that are common to all at-risk girls, and risk situations that are unique to the Ultraorthodox community. In the latter category are behaviors deemed not proper by the community, such as wearing immodest clothing, applying excessive makeup, or dyeing hair. The girls may start going to inappropriate entertainment venues, or become involved in relationships with boys (Itzaki, 2016; Kelly, 2014; Schwartz, 2003). All of these activities defy the image of Ultraorthodox girls as expected by community members and the norms to which they adhere. The violation of norms usually leads either to expulsion from the seminary or the girl’s dropout process. These girls have almost no chance of being accepted back into the Ultraorthodox community. The move from family and community to the streets takes place very quickly for these girls, without their being aware of the abundant risks posed by such a life. With no educational, familial, or communal resources, they begin to engage in global risk situations including substance abuse and sexual behavior (Itzaki, 2016; Weisbeyl, 2019). It is worth mentioning that child sexual abuse (CSA) is one of the risk situations that leads to out-of-home care (Shimon & Benbenishty, 2011). Although there are no exact data regarding CSA in the Ultraorthodox community, there is a growing body of research confirming that children in this community suffer from familial and non-familial sexual abuse (Allandari et al., 2021; Lusky-Weisrose et al., 2020; Tener et al., 2021), which may lead both to engaging in sexual behaviors and to out-of-home care. The unique care frameworks designed especially for Ultraorthodox at-risk girls are sometimes the only protective system that these girls have.

In Israel, in the year 2016, 10,779 children who were known to child welfare services lived in residential care settings. Among them, only 26.7% were in foster care or family placements, whereas most were in different types of therapeutic residential care settings, such as group homes with several hundred young people leaving the residential care system each year (Sahia, 2017). Similar to other care leavers, the transition to independent life among Ultraorthodox young women forces them to learn new skills and make important decisions about their education and their housing. Also, they are expected to take responsibility for multiple life areas very rapidly, as opposed to other young adults who gradually develop the ability to take responsibility for their adult lives while relying on family for ongoing support (Stein, 2006). Zeira et al. (2014), who compared the outcomes of out-of-home-placement alumni with the rest of their peers in the same cohort, found that more of the alumni and their families used social services than did the general population, and more of them had a criminal record. Furthermore, the educational outcomes of the care leavers were also less positive. The situation for at-risk Ultraorthodox girls is further complicated by the loss of familial and communal resources as a result of their violating community norms (Kelly, 2014). It is reasonable to suggest that this situation may pose a risk to their life satisfaction.

1.2. Self-determination theory

Self-determination theory (SDT; Ryan & Deci, 1985, 2000) focuses on human motivation and personality, and on people’s inherent growth tendencies and innate psychological needs that form the basis of their self-motivation and personality integration. Ryan and Deci (2000) identified three such needs – competence (Harter, 1978), relatedness (Baumeister & Leary, 1995), and autonomy (Deci, 1975) – which appear to be essential for facilitating the natural propensities for growth and integration, as well as for constructive social and psychological development. Autonomy is the need to be self-regulating, to be the maker or at least the owner of one’s choices; competence is the need to be effective in what one does, mastering new skills in the process; and relatedness is the need to feel connected and in alignment with at least some others. By fulfilling these needs, one can experience well-being and optimal functioning. This theory focuses both on the personal and environmental factors that enable the fulfillment of these needs, and on the influence this fulfillment has on psychological aspects, such as well-being and life satisfaction (Martin & Paul Hill, 2012; Ryan & Deci, 2000). Specifically, religiosity, optimism, and social support have been found to be significant components in the fulfillment of the three above-described basic needs (Brien et al., 2012; Hathi-Coat & Fuqua, 2014, Leow et al., 2021), and in enhancing individuals’ life satisfaction (Martinez-Marti & Ruch, 2017; Yang et al., 2019).

The conceptual framework of SDT is used by scholars to better understand various aspects in the lives of at-risk youth (Nagappan & Chen, 2019). For instance, among adolescents it was found that the fulfillment of the need for autonomy, as expressed in their engagement in behaviors due to the joy and interest these behaviors bring to their life, predicted decreases in substance use. However, engagement in behaviors because of self-evaluative affect (e.g., self-esteem or shame), or approval from others, predicted increases (Moore & Hardy, 2020). Among at-risk minority youth, it was found that youth who perceived autonomy support of physical activity experienced greater levels of the fulfillment of various needs, which in turn positively predicted autonomous motivation toward physical activity (Vierling et al., 2007).

Many studies have examined the role of the fulfillment of basic needs as a moderator or mediator between personal and environmental factors on the one hand and psychological outcomes on the other: for example, between poverty and life satisfaction (Martin & Paul Hill, 2012), between goal orientation and physical self-worth (Georgiadis et al., 2001), and between organizational autonomy support and well-being (Nie et al., 2015). Based on this approach, we also examined the mediating role of the fulfillment of the basic psychological needs in the correlation between personal and social factors on the one hand, and life satisfaction on the other.

1.3. Life satisfaction

Life satisfaction, defined as a “global evaluation by the person of his or her life” (Parot et al., 1991, p. 150), is a key aspect of quality of life and subjective well-being. It has been linked with several adaptive outcomes for human development and is viewed both as an important outcome and as a potential contributor to the development of other positive behaviors and attitudes such as physical and mental health and work performance (Erdoðan et al., 2012; Proctor et al., 2010). Life satisfaction may reflect the gap between people’s desires and what they
have actually achieved (Andrews & Robinson, 1991). Therefore, high life satisfaction among care leavers can lead to positive results, such as a better adjustment to adult life.

Examining the contributing factors to life satisfaction among care leavers, researchers have found that personal resources such as self-esteem and self-efficacy are positively correlated with life satisfaction. Moreover, environmental resources such as parental support and peer support have also been found to contribute to care leavers’ life satisfaction (Dinisman, 2016; Refaeli et al., 2019).

1.4. Religiosity

The SDT framework takes into account the significance of the fulfillment of the abovementioned three psychological needs, and processes within domains such as healthcare and religion (Ryan & Deci, 2000). In general, religion is considered to be a protective factor for at-risk youth both in terms of their involvement in risk behaviors (Isralowitz & Reznik, 2015; Sinha et al., 2007) and in terms of psychological aspects such as hope and anxiety (DiPierro et al., 2018). Based on SDT, Ryan et al. (1993) defined two types of religious internalization. Introduction represents a partial internalization of beliefs and is characterized by self and other approval-based pressures. Identification represents the full adoption of beliefs and is characterized by greater volition. In their study, identification was found to be correlated with lower levels of anxiety and depression and with higher levels of self-esteem, as opposed to introduction. Moreover, again based on SDT, researchers identified three main types of religious motivation: external, introjected, and identified (Hardy et al., 2020). Identified religious motivation is an autonomous behavior in accordance with the religious rules. External and introjected religious motivation, by contrast, are controlled behaviors in accordance with the religious rules that are motivated by socially contingent punishments or rewards and self-imposed internal affective consequences, such as shame. It has been found that whereas identified religious motivation predicts positive outcomes, such as self-esteem and purpose, external and introjected motivation do not predict positive outcomes, or negatively contribute to them (Hardy et al., 2020). These findings shed light on the role of religion in promoting positive development (Ebsyne-King & Furrow, 2004), and emphasize the importance of investigating its contribution to the life satisfaction of at-risk young women from religious communities.

1.5. Optimism

Optimism is a personal aspect that has been defined as the stable tendency to “believe that good rather than bad things will happen” (Scheier & Carver, 1985, p. 219). Studies about children and youth in distress consistently identify optimism as one of the personality traits that contribute to resilience (Boman et al., 2003; Song, 2003). Optimism is associated with positive outcomes in a range of life domains (Ben-Zur et al., 2001). For instance, optimistic students cope better with academic demands and report lower depression rates and higher well-being (Chang, 2001). Optimism has also been found to be a predictor of life satisfaction in many studies (e.g., Bailey et al., 2007; Wong & Lim, 2009; Yalcin, 2011). Among care leavers, optimism was found to be positively correlated with adjustment and well-being (Suliman-Aidan et al., 2013; Van Breda & Dickens, 2017). In addition, young adults who were more optimistic about their future showed better results four to five years after leaving foster care (Cashmore & Paxman, 2006).

1.6. Supportive figure

Resilience studies suggest that social support for young people in care plays an important role in their lives (Wade, 2008). Social support provides tangible and non-tangible resources that can help one cope with multiple sources of stress. It includes several dimensions, such as emotional support (e.g., love and empathy), instrumental support (e.g., money and time), and informal support (e.g., guidance and advice) (Pinkerton & Dolan, 2007). Having a supportive figure is an important resource for all but is especially significant for young and vulnerable people in transition periods (Hiles et al., 2013). Many care leavers have little, if any, direct family support or other community networks to ease their transition into independent living (Mendes & Snow, 2016). However, having social support from social networks is considered to be very meaningful for care leavers in their transition to adulthood (Goyette, 2019). The important role played by support can be seen in the fact that care leavers with greater social support achieve better outcomes in their adjustment to independent life (Frimpong-Manso, 2018; Hiles et al., 2013). Having a supportive contact can assist care leavers in key areas such as developing independent living skills; attaining secure and affordable housing; pursuing education, employment, and training; experiencing emotional well-being; and preventing crises. Moreover, adolescents who have higher levels of social support both during and after care show better outcomes after leaving care, such as higher life satisfaction (Dinisman, 2016).

1.7. Study goal

The goal of this study was to examine the contribution of personal and environmental resources and the fulfillment of basic needs to the life satisfaction of a particular group of care leavers in Israel: Ultraorthodox Jewish young women. Based on SDT (Ryan & Deci, 1985, 2000) we hypothesized that: a) religiosity, optimism, the presence of a supportive figure and the fulfillment of basic needs would contribute to higher levels of life satisfaction, and; b) the fulfillment of basic needs would mediate the relationship between personal and environmental resources on the one hand, and life satisfaction on the other.

2. Method

2.1. Participants

The sample consisted of 95 Ultraorthodox young women between the ages of 18 and 27 (M = 21.8, SD = 2.18), who were born and raised in an Ultraorthodox family and were originally part of the Ultraorthodox community. Specifically, participants were those who had previously taken part in a care framework designed especially for at-risk Ultraorthodox young women, located in the center of Israel. These young women had left care during the previous five years. The total sample of these Ultraorthodox young women was 125, and the response rate was 76%. This unique care framework is a non-governmental organization, supported by Israel’s Social Welfare Ministry, that was founded as a response to girls and young women, up to the age of 21, from Ultraorthodox backgrounds who needed alternative housing arrangements as a result of emotional, psychological, and/or familial difficulties. Without a benevolent living framework, alternative care is the only solution to living on the streets. When a girl/young woman moves into the apartment, she undergoes an evaluation which is used to build a detailed, therapeutic program tailored to her needs. The therapeutic program, which is created in partnership with the girl/young woman, is implemented over the course of her residence in the housing facility.

Most of the participants (52.6%) defined themselves, religiously, as Ultraorthodox (or “Haredi”). Some (30.5%) defined themselves as “religious,” some defined themselves as “traditional” (10.5%), and the rest (5.3%) defined themselves as “not religious.” Most were single (63.2%), some were married (33.7%), and the rest were divorced or “other” (3.2%). Most reported having a partial or full high school diploma (44%), some reported having or pursuing a professional certificate (27.4%), some reported not finishing high school and not having a diploma (12.7%), and the rest reported having or pursuing a B.A. (10.6%). Most of them were employed (57.9%), some of them were studying (26.3%), and the rest of them did not work (14.7%). It is worth noting that none of the participants took part in military service, not
even the ones who defined themselves as non-religious (i.e., religious girls are exempt from service in Israel).

2.2. Procedure

The current study employed a cross-sectional survey. Questionnaires, procedures, consent forms, and instructions were reviewed and approved by the institutional review board (IRB) of the authors’ university and Israel’s Social Welfare Ministry. After obtaining approval from the framework head, as well as written consent from the young women who agreed to participate in the study, research assistants telephoned them to coordinate an interview time. The research assistants explained the study’s goals and confirmed participants’ consent to participate in the study. Those who confirmed their participation were requested to complete a self-report questionnaire (which took approximately 30 min), that was distributed via telephone. The questionnaires were sent via Google Form version, and the research assistant entered the participant’s answers into the electronic questionnaire during the interview. Participant agreement was voluntary, and participants were told that they were free to stop answering questions whenever they wished.

2.3. Instruments

The survey included 34 items that describe the study variables. Life satisfaction, religiosity, and the fulfillment of basic needs were measured using validated survey instruments. The measurement of optimism, supportive figure, and perception of economic status took place via single-item researcher-designed questions, as will be further detailed.

Life satisfaction. Participants’ life satisfaction (m = 2.93, SD = 0.65, α = 0.87) was measured via the Diener et al. (1985) questionnaire. The questionnaire focuses on the concept of satisfaction as one of many components of “psychological well-being.” The tool does not refer to satisfaction from different areas of life, but satisfaction with life in general. It consists of 7 items such as: “I am satisfied with my life.” The emphasis is on a cognitive assessment that enables respondents to judge their satisfaction with their lives by their own standards. Participants are asked to rate the extent to which they agree with each item on a 4-point Likert-type scale ranging from 1 (never) to 4 (almost always). The total score of the scale is computed based on the mean of all items, with higher scores indicating higher life satisfaction.

Religiosity. Participants’ religious orientation (M = 3.65, SD = 0.91, α = 0.80) was measured via the Age Universal Intrinsic-Extrinsic Scale (AUIES), originally developed by Allport and Ross (1967), and later modified by other researchers who used simplified language so as to measure religious orientation among children and adolescents (Gorsuch & Venable, 1983). In the modified version of the AUIES for the Jewish population, used in the current study, participants responded to each of the five items about their religious views such as: “Belief has a central role in my life”) on a 5-point Likert-type scale, ranging from 1 (do not agree) to 5 (highly agree). Higher scores represent higher religious orientation.

Optimism. Participants’ optimism was measured by a single item: “When you think about your aspirations and goals for the future, how optimistic (positive) are you about your future?” Participants were asked to rate their level of optimism on a 5-point Likert-type scale ranging from 1 (a very small extent) to 5 (a great extent). A single item has been used to measure optimism in previous studies on care leavers (e.g., Courtney et al., 2018), thus providing a validity test for measuring optimism with a single ordinal item in the current study.

Supportive figure. Based on the Israeli Social Survey (ISS) for the year 2017 (Israeli Central Bureau of Statistics, 2018), the presence of a supportive figure in participants’ lives was measured via a single self-rated item: “To what extent is there someone who supports you in different situations in your life?” Participants were asked to rate the extent to which they had a supportive figure in their lives, on a 5-point Likert-type scale ranging from 1 (very little) to 5 (very much).

Basic Psychological Needs Scale. The construct of participants’ basic psychological needs (m = 5.63, SD = 0.67, α = 0.81) was measured via the Ryan & Deci (2000) questionnaire. The questionnaire assesses an individual’s sense of the fulfillment of three basic psychological needs: competence, autonomy, and relatedness. It consists of 19 items such as: “I feel like I am free to decide for myself how to live my life.” Participants were asked to rate the extent to which they agreed with each item on a 7-point Likert-type scale ranging from 1 (not at all true) to 7 (very true). The total score of the scale was computed based on the mean of all items, with higher scores indicating higher fulfillment of these three basic needs.

Perception of economic status. Participants’ perception of their economic status (M = 2.98, SD = 1.16) was measured via a single item: “How would you define your economic status?” Participants were asked to rate their economic status on a 5-point Likert-type scale ranging from 1 (very bad) to 5 (very good).

Socio-demographics. This questionnaire was used to examine sociodemographic characteristics such as age, place of residence, religious definition, education, and employment status.

2.4. Data analysis

Three sets of analyses were conducted to examine the central hypotheses. In the first set, we used bivariate analyses (Pearson correlations) to examine the following associations: between background variables and life satisfaction; between personal aspects and life satisfaction; between social aspects and life satisfaction; and between the fulfillment of basic needs and life satisfaction. In the second set of analyses, we conducted hierarchical regressions to examine the effects of the study variables on life satisfaction. In the third set of analyses, we used a path analysis model in order to test the direct and indirect effects between the background variables and the personal, social, the fulfillment of basic needs on the one hand, and life satisfaction on the other.

3. Findings

Table 1 provides means, standard deviations, and correlations for all of the study variables. There were no missing data for any of the variables. Life satisfaction was found to be positively correlated with economic status, optimism, presence of supportive figure, and social-psychological aspects. There was no significant correlation between age and religiosity on the one hand and life satisfaction on the other.

To examine the effects of age, economic status, religiosity, optimism, presence of supportive figure, and social-psychological aspects on life satisfaction, we conducted hierarchical regressions. The regression coefficients of the association with life satisfaction are displayed in Table 2. In the first step, perceived economic status contributed positively to life satisfaction. This step contributed 20% to the explained variance. In the second model, both perceived economic status and optimism contributed positively to life satisfaction. This step contributed 7% to the explained variance. In the third model, perceived economic status, optimism, and having a supportive figure contributed positively to life satisfaction. This step contributed 9% to the explained variance. In the final model, the fulfillment of the basic psychological needs, perceived economic status, and having a supportive figure contributed positively to life satisfaction, whereas optimism made no contribution to life satisfaction. This step contributed 6% to the explained variance. The percentage of the total explained variance of life satisfaction by the regression analyses was 41%.

3.1. Path analysis modeling

An indirect effects analysis was conducted using Hayes (2013) PROCESS macro in SPSS. The bootstrap procedure was used to further
evaluate the significance of the mediator. We based the estimate of the indirect effect by running 1,000 bootstrap iterations of computed samples and used a 95% confidence interval (CI). The exogenous variables were those that made a significant contribution to life satisfaction in the regression analysis: economic status, optimism, and presence of supportive figure. The endogenous variable was the fulfillment of basic needs. The target variable was life satisfaction.

Fig. 1 presents the β coefficients of the direct effects found to be significant in the mediational model (p < .05 and lower). Table 3 presents the indirect effects. The findings point to a positive direct correlation only between economic status and life satisfaction (β = 0.18). Optimism did not have a direct correlation with life satisfaction, but made a positive indirect contribution to life satisfaction via the fulfillment of basic needs (β = 0.08). Finally, the presence of a supportive figure made both a positive direct (β = 0.14) and indirect (β = 0.05) contribution to life satisfaction via the fulfillment of basic needs.

Fig. 1. Standardized results of the path analysis modeling of the effects of economic situation, optimism, supportive figure and basic psychological needs on life satisfaction.

Table 1
Correlations, means and standard deviations between the study variables.

<table>
<thead>
<tr>
<th>measures</th>
<th>M</th>
<th>SD</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
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<tbody>
<tr>
<td>1. Age</td>
<td>21.81</td>
<td>2.18</td>
<td>-</td>
<td>-0.21*</td>
<td>0.29**</td>
<td>-0.30**</td>
<td>-0.04</td>
<td>-0.13</td>
<td>-0.00</td>
</tr>
<tr>
<td>2. Economic status</td>
<td>2.98</td>
<td>1.16</td>
<td>-</td>
<td>0.02</td>
<td>0.41***</td>
<td>0.09</td>
<td>0.22*</td>
<td>0.44***</td>
<td></td>
</tr>
<tr>
<td>3. Religiousness</td>
<td>3.65</td>
<td>0.91</td>
<td>-</td>
<td>-</td>
<td>0.06</td>
<td>0.00</td>
<td>0.13</td>
<td>0.12</td>
<td></td>
</tr>
<tr>
<td>4. Optimism</td>
<td>3.74</td>
<td>1.07</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>0.27**</td>
<td>0.46***</td>
<td>0.42***</td>
<td></td>
</tr>
<tr>
<td>5. Supportive figure</td>
<td>4.08</td>
<td>0.81</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>0.37***</td>
<td>0.39***</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Basic psychological needs</td>
<td>5.62</td>
<td>0.67</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>0.49***</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Life satisfaction</td>
<td>2.93</td>
<td>0.65</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

*p < .05, ** p < .01, ***p < .001.

Table 2
Beta coefficients of hierarchical regressions of background variables, personal resources, and environmental resources association to life satisfaction.

<table>
<thead>
<tr>
<th>Measures</th>
<th>Step I</th>
<th>Step II</th>
<th>Step III</th>
<th>Step IV</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>Beta</td>
<td>S.E.</td>
<td>B</td>
</tr>
<tr>
<td>Economic status</td>
<td>0.25</td>
<td>0.44***</td>
<td>0.05</td>
<td>0.18</td>
</tr>
<tr>
<td>Optimism</td>
<td>0.23</td>
<td>0.29**</td>
<td>0.08</td>
<td>0.16</td>
</tr>
<tr>
<td>Supportive figure</td>
<td>0.19</td>
<td>0.31***</td>
<td>0.05</td>
<td>0.14</td>
</tr>
<tr>
<td>Basic psychological needs</td>
<td>0.28</td>
<td>0.29**</td>
<td>0.09</td>
<td></td>
</tr>
<tr>
<td>R²</td>
<td>0.20***</td>
<td>0.26***</td>
<td>0.35***</td>
<td>0.41***</td>
</tr>
<tr>
<td>Δ R²</td>
<td>0.20***</td>
<td>0.07**</td>
<td>0.09***</td>
<td>0.06**</td>
</tr>
</tbody>
</table>

*p < .05, ** p < .01, ***p < .001.
These findings are consistent with our hypothesis and are in line with support for the importance of the fulfillment of basic needs for life satisfaction among young Ultraorthodox women who left care. A possible explanation for this is that the young women identified motivation and causation in their transition to independent living seems to be more than 50% (Kliner-Kasir Tzahor-Shay, 2017). It is perhaps the first to investigate this connection among care leavers in general, and specifically among young Ultraorthodox women who left care.

The fulfillment of these three basic psychological needs was found to make a positive direct contribution to life satisfaction. Moreover, it was found to be a mediator in the relation between optimism and presence of supportive figure on the one hand, and life satisfaction on the other. This finding is consistent with the study’s findings that found religiosity to be a contributing factor to psychological outcomes in the general population (e.g., Bailey et al., 2007; Wong & Lim, 2009; Yalçın, 2011), and among care leavers (Sulimani-Aidan et al., 2013; Van Breda & Dickens, 2017). However, the current study’s findings reveal that among Ultraorthodox young women who left care, the contribution of optimism to life satisfaction was not direct; rather, it was mediated by the fulfillment of the basic needs as defined by SDT. Recent research (Gordeeva et al., 2020) identified a mediating role of the fulfillment of basic needs in the connection between optimism and increased health behaviors during the COVID-19 pandemic. The current study’s findings contribute to SDT in expanding the relations of optimism with increased positive psychological outcomes such as life satisfaction.

The presence of a supportive figure in the young women care leavers’ lives was found to make a significant positive contribution to life satisfaction both directly and indirectly via the fulfillment of basic needs. A similar connection was found in a previous study conducted among high school students (Danielsen et al., 2009). However, the current study is the first to investigate this connection among care leavers in general, and among Ultraorthodox young women care leavers in particular. In society at large, social support is considered to be an important factor for care leavers’ life satisfaction (Dinisman, 2016). Among Ultraorthodox young women care leavers, however, it may be even more crucial due to the loss of familial and communal resources (Kelly, 2014). As such, they are likely to experience not only lower support and loneliness like many care leaver (Sulimani-Aidan, 2017) but also alienation and rejection from their families, friends and community. Thus, the presence of a supportive figure in their transition to independent living seems to be critical in and of itself, but it is also important for the fulfillment of the young women’s basic needs, which in turn increases their life satisfaction.

### 4.1 Limitations and future studies

The study’s limitations included challenges in reaching the target population. Half of them defined themselves as “Haredi,” meaning that they were perhaps in the process of becoming less religious, similar to the process of becoming less religious that has been identified among Ultraorthodox at-risk boys (Itzhaki et al., 2020). Moreover, the Hardy et al. (2020) definition of the three main types of religious motivation – external, introjected, and identified – may provide further explanation. Alongside educating students, the Ultraorthodox education system also socializes its youth in terms of religious rules and communal norms, and is known for indoctrinating its students (Lipshtiz, 2015). That is, students are expected to accept religious roles and norms, without critically examining what they have learned. This kind of socialization may have impaired the young women’s identified motivation, and caused them to develop external or introjected motivation, which did not contribute to their life satisfaction.

Optimism, as opposed to religiosity, was found to make a contribution to life satisfaction, indirectly, via the fulfillment of basic needs. The current study’s findings reveal that among Ultraorthodox young women who left care, the contribution of optimism to life satisfaction was not direct; rather, it was mediated by the fulfillment of the basic needs as defined by SDT. Recent research (Gordeeva et al., 2020) identified a mediating role of the fulfillment of basic needs in the connection between optimism and increased health behaviors during the COVID-19 pandemic. The current study’s findings contribute to SDT in expanding the relations of optimism with increased positive psychological outcomes such as life satisfaction.
population in order to ask them to participate in the research. The young women had already started leading independent lives and were not always in touch with the care framework, which led to a relatively small sample. To meet this challenge, we had to use non-random sampling, and to conduct a telephone survey. This kind of sampling can hinder the ability to generalize from the findings, even though many quantitative research studies utilize non-random samples (Onwuegbuzie & Collins, 2007). However, the findings of the current study provide initial information regarding care leavers from closed religious communities, which should be more fully elaborated upon by investigating care leavers from other religious communities (e.g., the Muslim community). Moreover, although telephone studies are acceptable in social science research, these kinds of surveys may have a social desirability effect (Zhang et al., 2017). In future studies, we would recommend using other kinds of sampling, and other kinds of survey methods (e.g., web surveys, face-to-face surveys).

Another limitation concerns the investigation of the perception of economic status, which does not include objective economic status information. Although examining economic status via perception is an acceptable form of examination in quantitative research studies (e.g., Sîrîci et al., 2021), we recommend examining economic status in future studies in this area via the use of objective tools, in order to better understand these young women’s situations. Moreover, the fact that we do not know the identity/characteristics of the supportive figure in the care leaver’s life is another limitation, and future studies should request that participants identify their supportive figure. Having this information would broaden the understanding of their support systems, beyond the question of whether they receive support or not. In addition, it might be that the absence of any contribution of religiosity to life satisfaction was related to the general religiosity questionnaire that we used. Using a questionnaire that was culturally adapted to the Ultraorthodox community may have elicited other results.

To the best of our knowledge, this study was the first to address the issue of psychological aspects among care leavers from the Ultraorthodox community. As the fulfillment of basic psychological needs was found to be both a direct contributor to life satisfaction and a mediating factor, further research is needed to investigate its contribution to other psychological aspects in the lives of Ultraorthodox care leavers. Moreover, a deeper and more thorough investigation of other personal and environmental aspects that contribute to life satisfaction is needed. We recommend expanding this investigation to other closed religious groups, such as Jewish Ultraorthodox young men care leavers, or care leavers from the Muslim Arab community in Israel. Such an investigation would broaden the understanding of this unique population of care leavers from closed religious communities. In addition, the fact that religiosity was not found to be a contributing factor to the young women’s life satisfaction calls for further investigation. Based on SDT, we would recommend that future studies investigate the different kinds of religious motivation among Ultraorthodox young women who leave care. As religion could potentially be a meaningful resource in increasing these young women’s life satisfaction – depending on underlying motivations – it seems a construct worth further investigating.

4.2. Implications for practice

From an implementation point of view, the findings of the present study point to the important role of the fulfillment of the three basic needs – competence, relatedness and autonomy – for the young women’s life satisfaction. We recommend that intervention programs conducted with Ultraorthodox young women who are in care focus on helping them recognize these needs and expressing them in accordance with their individual perspectives. Professionals in the care framework could therefore help these young women find ways to fulfill these needs both during and after care.

Moreover, we recommend promoting intervention programs that focus on increasing optimism, just as other personal resources are promoted. It should also be noted that care leavers from patriarchal, family-based societies, such as the Ultraorthodox community, experience stigma, which increases their vulnerability (Ibrahim, 2016). As such, it is necessary they will have non-judgmental supportive figure in their lives. Just as there is generally a supportive figure in the care framework, we recommend including in the post-leaving-care intervention program the presence of a supportive figure, such as a mentor (Refaeli, 2020). In the case of Ultraorthodox young women who leave care, personal and cultural sensitivity is required to ensure a proper match between mentor and care leaver, so that the relationship will be as beneficial as possible to the care leaver. Although many programs providing mentors report positive consequences such as contributions to hope, mental health empowerment, and the alleviation of anxiety and depression (Poon et al., 2021), religious-based mentoring as typically provided in the Ultraorthodox community may have negative consequences, such as loneliness and lower self-esteem and well-being (Itzhaki, 2019). Despite the fact that in Israel there is no legislative framework for care leavers after care, there are programs supporting them in practice until 23 years of age and older (Strahl et al., 2021; van Breda et al., 2020), and we believe that these programs should include culturally sensitive services for this unique group.

Another recommendation refers to economic opportunity. We recommend promoting intervention programs that focus on a variety of options for these young women to create opportunities that would lift their economic status. These programs should be consistent with the employment opportunities for women in the Ultraorthodox community (Novis Deutsch, & Rubin, 2019).

In sum, the findings demonstrate the beginnings of knowledge regarding psychological aspects of care leavers from the Ultraorthodox community. In order to deepen our understanding of this unique population, further studies should investigate the contributing factors to the fulfillment of basic needs, just as other aspects of adjustment to life after leaving care. An expanded model should include other personal and environmental resources such as self-esteem, sense of community, and societal conditional regard, all of which were found to make a significant contribution to positive adjustment among other at-risk Ultraorthodox populations (Itzhaki et al., 2018; Itzhaki et al., 2020).

CRediT authorship contribution statement

Yael Itzhaki-Braun: Formal analysis, Writing – original draft, Writing – review & editing. Yafit Sulimani-Aidan: Conceptualization, Methodology, Software, Data curation, Investigation.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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