

Differences between native Israelis and immigrants from the former Soviet Union in attitudes toward physical disability

Yoav S. Bergman and Ela Koren

Abstract

The current research examined differences between native Israelis and immigrants from the former Soviet Union in attitudes toward physical disability, and focused on the role of socio-cultural variables, personality factors, and social desirability on such attitudes. The Attitudes toward Disabled People Scale (ATDP), the Big Five Inventory, and the Marlowe-Crowne Social Desirability Scale were completed by 152 native Israelis and 105 immigrants. Results demonstrated that native Israelis' attitudes were significantly more positive than those of the immigrants. Moreover, while personality factors were significant predictors of ATDP scores for native Israelis, they were all but nullified for the immigrant group, whose main significant predictors were the factors of social desirability.

Keywords: Attitudes; Culture; Disability; Personality Factors; Social Desirability

* **Yoav S. Bergman**, PhD, Interdisciplinary Department for Social Sciences, Bar-Ilan University; School of Social Work, Ariel University

Ela Koren, PhD, Interdisciplinary Department for Social Sciences, Bar-Ilan University

1. Introduction

The term 'disability' has had many definitions across the years (WHO, 2011). While in the past, biological and social models of disability presented polarized accounts of what constitutes disability, it seems that an approach that balanced the two was needed. Accordingly, The International Classification of Functioning, Disability, and Health (ICF) recently defined disability as an "umbrella term for impairments, activity limitations and participation restrictions, referring to the negative aspects of the interaction between an individual (with a health condition) and that individual's contextual factors (environmental and personal factors)" (WHO, 2011, p. 4). Disability is associated with negative social attitudes in various cultures (e.g., Olkin & Howson, 1994; Gorenczny, Bender, Caruso, & Feinstein, 2011; Parker & Szymanski, 1998; Zuniga & Fischer, 2010). However, research regarding the underlying causes of differences in attitudes toward disability within immigrant societies is relatively lacking. Accordingly, the current study examines the effects of personal and social variables in determining the attitudes of native Israelis and immigrants who relocated to Israel from the former Soviet Union during the 1990s, toward physical disability.

According to Berry (2003), acculturating individuals bring cultural and psychological qualities with them to the new society, which also has its own variety of such qualities. Thus, immigration may lead to a clash between conflicting cultures, ideas, and behaviors, and both immigrants and native residents need to undergo a process of cultural reassessment (e.g., see Berry & Sam, 1997). While this is indeed a "two-way street" (Sam & Berry, 2010), it was found that, as far as immigrants are concerned, their views regarding the host society's cultural and social expectations are an important aspect of this cultural negotiation (see Horenczyk, 1996).

As a multicultural society, Israel has gone through significant demographic changes during its existence. The most recent change, however, has been the arrival of over one million immigrants from the former Soviet Union during the last two decades, resulting in an increase of 20% in population (Remennick, 2004). In this regard, studies conducted in Israel demonstrate that former Soviet immigrants (FSIs) feel pressure from mainstream Israeli society to assimilate faster than they wish to (Roccas, Horenczyk, & Schwartz, 2000). This may account for the fact that while FSIs have become an integral part of Israeli society, they have rigorously insisted on maintaining their own language, cultural identities, and internal cohesiveness and solidarity (Remennick, 2004). For example, as demonstrated in Tartakovsky's (2010) personal narrative of his acculturation process, many of his social interactions are with Russian immigrants, while simultaneously, as he puts it, "In no other country will I have the same sense of belonging... as I have in Israel" (p. 358). In this regard, while some researchers argue that Russian immigrants strive to remain culturally divergent from mainstream Israeli society, this does not necessitate total separation in other contexts (Horenczyk & Ben Shalom, 2006). Thus, it is interesting to examine whether the traditional views of disability in this population have been affected by their acculturative process.

When examining attitudes toward disability in the former Soviet Union, it seems that disability was deemed a non-existent issue in the Soviet public arena (see Martz, Strohmer, Fitzgerald, Daniel, & Arm, 2009). According to Grigorenko (1998), the basic assumption of the Soviet perception of disability is the existence of a "defect," which unifies various types of individuals with disabilities. In fact, the term *defectology* was used to denote the education of adults and children with disabilities, and this term is still used in some parts of Russia (Martz et al., 2009). Moreover, the general view in Russia was that individuals with disabilities are "unable to lead fulfilling lives, deserving of pity and protection, but not entitled to opportunities for education and meaningful work" (Packer, Iwasiw, Theben, Sheveleve, & Metrofanova, 2000; see also Boberiene & Yazykova, 2014).

In this regard, it is imperative to consider Phillips (2009), who delineates the Soviet perception of disability throughout history, and demonstrates that Soviet society valued people as a function of their contribution to the workforce. It is therefore not surprising that the general attitudes within this society toward individuals with disabilities are negative, as they are regarded to be non-beneficial and unnecessary. Even following the fall of communism, the empowerment of people with physical or mental disabilities in Russia continued to be lacking, and prejudice against such individuals still runs deep within Russian society (Gains, 2004). A possible exception to this can be seen in the Soviet society's attitudes toward veterans with disabilities, who had a preferred status and enjoyed privileges and benefits (see Danilova, 2007). However, this is also true for mainstream Israel, which holds veterans with disabilities in extremely high regard (Koren, Bergman, & Katz, 2015), and thus the two societies are similar in their respect and esteem toward these individuals. In this regard, numerous studies have demonstrated that the general attitudes toward physical disability within Israeli society resemble those of most Western cultures (see review by Vilchinsky, Werner, & Findler, 2004).

In the current study, we attempted to examine differences between native Israelis and FSIs with regard to attitudes toward individuals with disabilities, as well as to delineate the underlying personal and societal variables behind these differences. First, in line with the cultural differences, we predicted that former immigrants will report more negative attitudes toward disability in comparison to native Israelis, and that these deep-rooted differences will not be affected by age, gender, or education level. Second, as FSIs are in a constant process of negotiating between their own culture and the general culture that surrounds them (see Tartakovsky, 2009), we assume that this group is more aware of the external societal demands on them. Therefore, their attitudes toward individuals with disabilities will be affected by their perception of mainstream Israel's norms and expectations, while innate personal characteristics, which have been shown to affect such attitudes (e.g., Benet-Martínez & John, 1998; Keller & Siegrist, 2010), will bear less influence. More specifically, we hypothesize that attitudes will be predicted by social desirability biases within the group of FSIs.

2. Method

2.1 Participants and Procedure

The cohort consisted of a comfort sample of 152 native Israelis and 105 FSIs, all of whom were born in the former Soviet Union and immigrated to Israel during the 1990s. The Israeli cohort consisted of 64 (42.1%) men and 88 (57.9%) women, whereas the former Soviet cohort was comprised of 37 (35.2%) men and 68 (64.8%) women. Nearly all participants (99.6%) had at least a high school education, and age ranges were 18-60 ($M = 25.93$, $SD = 8.54$) for the Israeli group and 18-62 ($M = 26.64$, $SD = 8.20$) for the former Soviet group. No age or gender differences were found between the groups, but the FSI cohort demonstrated higher education levels. Participants were actively recruited to the study through research assistants, who approached them at various venues (e.g., the workplace, on campus, or through snowball sampling), and were given up to thirty minutes to complete all items. Subjects either completed the scale in the research assistants' presence, or handed in their full questionnaire later that day. All subjects were assured of their anonymity, filled out the questionnaires individually, and returned them; and none received compensation for their efforts.

2.2 Measures

Attitudes toward disability were measured by the Attitudes Toward Disabled Persons Scale (ATDP-A, Yuker & Block, 1986). This instrument is comprised of 30 items, which require participants to respond to different situations concerning people with disabilities (e.g., "most non-disabled persons would not want to marry anyone who is physically disabled"; "physically disabled persons are often less intelligent than non-disabled ones"). A six-point Likert-type scale, ranging from -3 (*I disagree very much*) to +3 (*I agree very much*) is used by participants to rate each item. The items were summed to yield a total score, and a score of 90 was added to eliminate negative scores, resulting in a possible range of 0-180. The scale has been demonstrated as reliable and valid across cultures (see Zuniga & Fischer, 2010), and in the current study, Cronbach's Alpha for the ADTP-A was .71.

Personality characteristics were measured by the Big Five Inventory (BFI; John, Donahue, & Kentle, 1991). Participants rated the extent to which each of the 44 items described their personality on a 5-point Likert scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*). Items are calculated into five personality characteristics: extraversion (e.g., "talkative"; "outgoing"); neuroticism (e.g., "depressed"; "tense"); agreeableness (e.g., "helpful and unselfish"; "forgiving"); conscientiousness (e.g., "reliable"; "efficient"); and openness (e.g., "inventive"; "likes to reflect"). The BFI has widely been used and validated among different cultures (McCrae & Costa, 1997). Cronbach's Alphas for the five subscales were .68 (extraversion), .76 (neuroticism), .78 (agreeableness), .74 (conscientiousness), and .65 (openness).

Social desirability was examined by the Marlowe-Crowne Social Desirability Scale (Crowne & Marlowe, 1964). Participants rated the extent to which each of the 40 items was self-descriptive on a 7-point Likert scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*), with higher scores indicating higher levels of social desirability on two dimensions: self-deception (e.g., "I sometimes try to get even rather than forgive and forget," Cronbach's alpha = .69), which reflects self-inflation and disregard of personal limitations, and impression management (e.g., "I like to gossip at times," Cronbach's alpha = .80), which reflects the individual's effort to present himself favorably to others. This scale has also been demonstrated as a valid instrument across many different cultures (see He et al., in press). Participants were also asked general socio-demographic questions, and all scales were counterbalanced, in order to prevent possible primacy effects.

3. Results

In order to examine the first hypothesis, we conducted an analysis of covariance (ANCOVA), in which ATDP scores were the dependent variable, and country of birth (Israel / former USSR) was the independent variable. The socio-demographic factors (age, gender, and education) were inserted as covariates, in order to negate their effects. The ANCOVA revealed a main effect of country of birth, $F(4,249) = 4.95, p < .05, \eta^2 = .02$, and demonstrated that ATDP scores for native Israelis (*Corrected Mean* = 123.09, *SD* = 16.26) were significantly higher than those of FSIs (*Corrected Mean* = 118.02, *SD* = 19.42). In line with our hypothesis, none of the covariant socio-demographic variables yielded significant effects.

In order to examine the second hypothesis, we ran two identical hierarchical regressions, one for each study group. In the first step, age, gender, and education were inserted in order to control their contribution. In the second step, the five personality factors were regressed, and the third step included the two dimensions of social desirability. In both regressions, the dependent variable was ATDP scores (see Table 1 for regression coefficients).

Table 1: Hierarchical Multiple Regression Analyses Predicting Attitudes toward Disabled Persons among the Study Groups

Predictor	Native Israelis		USSR Immigrants	
	ΔR^2	β	ΔR^2	β
Step 1	.074**		.027	
Age		.21*		-.03
Gender ^a		.02		.19
Education		-.01		.09
Step 2	.166***		.082	
Extraversion		.01		-.01
Neuroticism		-.18*		-.01
Agreeableness		.21*		.26*
Consciousness		.05		-.10
Openness		.02		-.03
Step 3	.007		.065*	
Impression Management		.08		-.29*
Deception		.05		.34*
Total R ²	.247		.209	
<i>n</i>	152		105	

^a Gender: 0 = male; 1 = female

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

The results demonstrate that attitudes toward disability are affected by different factors within the study groups. For native Israelis, age was found significant, as older age predicted more positive ATDP scores. Additionally, high levels of agreeableness and low levels of neuroticism were also significant predictors of positive ATDP scores. Social desirability was not significant for this group. In the FSI group, socio-demographic variables were not significant. Regarding personality factors, while high levels of agreeableness predicted positive attitudes, the entire step within the regression was non-significant. However, both social desirability dimensions proved significant predictors. As can be seen in Table 1, low impression management was indicative of higher ATDP scores, whereas high deception was associated with lower ATDP scores.

4. Discussion

The immigration of over one million Jews from the former Soviet Union during the last two decades has increased the Jewish population of Israel by about 20% (Remennick, 2004). However, while Israel has a history of accepting large numbers of immigrants in a short period of time, the unique characteristics of this population posed a new challenge for Israeli society (e.g., its intellectual nature; see Remennick, 2007). The purpose of the current study was to compare native Israelis and FSIs in attitudes toward disability and to delineate the factors that contribute to the formation of these attitudes. Our two hypotheses were generally confirmed. First, native-born Israelis reported more positive attitudes than their counterparts. It seems that this difference stems from the ingrained cultural disparities between the two groups, which could be the product of different socialization processes. As previously noted, "invalids" were generally ignored in the USSR (Phillips, 2009). In contrast, while the Israeli society's attitudes toward disability resemble those of other Western cultures, it tends to highlight the role of individuals with disabilities in everyday life, possibly due to the abundance of veterans among this population and their relatively high stance in society (Kravetz & Katz, 1994). Thus, we can infer that even though FSIs may be engaged in the process of cultural integration in the Israeli society, their attitudes regarding individuals with disabilities still hold strong.

Regarding our second hypothesis, while socio-demographic and personality factors influenced ATDP scores for native Israelis, these were all but nullified in the FSI group, and the main significant predictors were the two factors of social desirability. Interestingly, while lower levels of impression management predicted lower ATDP scores, the opposite direction was reported for deception. Once again, we believe that the conflict that underlies the acculturation process of the immigrants can assist us to understand these findings. Acculturating immigrants often have to compromise between their own norms and values and the way they want to be perceived by the host culture (see Horenczyk, 1996). Accordingly, when impression management is low, individuals have little regard for how they are perceived by others, and prefer an accurate depiction of their thoughts and ideas. Therefore, as FSIs' attitudes are more negative than those of native Israelis, a low desire to impress will contribute to a truthful display of these attitudes. Inversely, high deception reflects a desire to paint a positive picture to others, regardless of personal and subjective limitations. Thus, FSIs who are more concerned with how society perceives them will try to present what they believe to be the general cultural norm, and display positive attitudes that may not be their own.

Several limitations should be taken into account. First, the current study utilized a comfort sample examining a specific cultural group in Israel. Thus, the issue of generalizing the results of our findings into other populations, both within and outside Israel, may pose a problem, as different immigrant groups may show varying views of disability. Accordingly, future studies may want to expand our findings and consider additional cohorts and cultures and the manner by which social desirability affects their perception of disability. In this regard,

it would be interesting to examine whether our findings change when subjects are asked about other forms of disability (e.g., mental disabilities). It may also be important to take into account variables such as duration of stay in both home and host cultures, and previous acquaintance with individuals with disabilities. Moreover, due to the wide age range of our cohort, it is feasible that some participants emigrated to Israel during early childhood, and therefore can be seen as "generation 1.5," rather than first-generation immigrants (see Remennick, 2003), and possible inter-generational differences need to be examined in future studies. Nevertheless, our findings provide an initial view of how individuals with disabilities are perceived in Israel's multicultural society, and in light of both the increased frequency of immigration and the rising importance of disability issues, this line of research requires further attention.

In conclusion, it seems that in Israel, former Soviet immigrants' attitudes toward physical disability are determined by their intricate and complex interactions with the Israeli society and by the way they perceive its values and norms. At the moment, their attitudes are still significantly more negative than those of the general society. It may very well be that, as FSIs continue to acculturate, group differences may become less pronounced, and the importance of the manner by which mainstream Israel perceives them will decrease. This, we believe, will be an important step to the integration of FSIs into Israeli society.

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