Abstract
Future orientation focuses on the image an individual constructs regarding their future; including future goals and courses of action they set for themselves in order to realize these goals. The present study discusses the consolidation of the orientation of parents in the Arab society regarding the future of their children with intellectual developmental disabilities, who study in special education schools in northern Israel. In this study, both qualitative and quantitative research methods were used. 80 families, consisting of mothers and fathers between the ages 34 and 69 participated in the study. The questionnaires they had to answer were originally designed for adolescents without disabilities. However, for the purposes of the current study they were adapted for the population of parents from the Arab society in Israel. The results of the study show that the future orientation of the parents regarding their children with developmental intellectual disabilities is obscured, pessimistic, and passive. The results also show that parents’ orientation perpetuates the division of social role of both genders. It also preserves the existing state of social rejection of people with disabilities.

Keywords: Future orientation, Intellectual Developmental Disabilities, Parents, Adolescents, Arab society
Introduction

Future orientation focuses on the image an individual constructs regarding their future; including future goals and courses of action they set for themselves in order to realize these goals. Forming future orientation is considered as a developmental task and the first step of an adolescent’s transition into adulthood. This developmental task is influenced by cultural values and the proximal environment, i.e. family interaction (Seginer, 2009). During family interaction parents express their opinions, beliefs, attitudes, expectations and values regarding their adolescent's future orientation. This way they influence the adolescent's future orientation. However, the consolidation of future orientation is not limited only to adolescents. Parents become concerned about their child’s transition to adulthood and they consolidate what Seginer (2009) called Constructed Future Orientation regarding their children’ future based on their familiarity with their children’s characteristics and abilities.

Unfortunately, no study till this day has examined the orientation of Arab parents in Israel regarding the future of their children with Intellectual Developmental Disabilities (IDD) except for the research of Arslan (2012). This article will be focused on a part of Arslan’s study in which she examined the influence of the Arab culture and values on the parents’ Constructed Future Orientation.

Literature review

Attitudes of the Arab society toward people with intellectual developmental disabilities
The Arab society in Israel is a society in transition. It is neither a traditional society nor a modern one. On the one hand, changes are happening in the economical, geographical, political, and social domains. On the other hand, it is still a society which is characterized of being traditional, collectivistic, homogeneous, and cohesive (Karni, Reiter, & Bryen, 2011). According to the Ministry of Labor, Social Affairs and Social Services, the rate of people with intellectual developmental disabilities in the Arab society is higher than the Jewish society. Every 10.743 people out of one thousand in the Arab society are diagnosed with an intellectual disability. However, 3.9 people out of one thousand are diagnosed with an intellectual disability in the Jewish society (Ministry of Social Affairs and Social Services, 2009, PP367-399). It may be due to higher rates of marriage among relatives in the Arab society than in the Jewish one. It may also be because of the lack of awareness in the Arab society regarding the importance of tests during pregnancy, and the small rates of abortion due to religious reasons.

Attitudes of the Arab society toward people with disabilities in general and toward people with IDD in particular are influenced by stereotypical negative beliefs. Hence, people with an IDD are usually rejected. They are considered not to match the excepted standards of beauty and wisdom in their society. People treat them with misery, compassion, and patronization. Such an approach towards them restricts the chance that they would be included in society and leads to considering them as a burden (Karni, Reiter, & Bryen, 2011). Moreover, according to a report (written in Hebrew) formed by Almanara association- an association for the advancement of the status of people with special needs in the Arab society- this population suffers from major problems such as institutional discrimination, lack of services, and social
exclusion. The report also emphasizes the oppression and inequality of opportunities in vital domains people with special needs face. Such as, employment, inability to have an independent life, get married and establish a family.

**Future orientation**

Future orientation is the subjective intention of a person toward his future. It is composed of a person’s self-perception, ambitions, plans, expectations, hopes and fears of the short term and long term future. All of these are vital for the purpose of establishing personal goals, examining future possibilities, and making important decisions and binding them (Seginer, 2005).

Future orientation can be presented based on two approaches. The first one is the thematic approach. This approach focuses mainly on cognitive representation processes. Two categories of future orientation may be distinguished (Seginer, 1995): (1) the prospective life domain which covers higher education, work and career, marriage and family. (2) The existing life domain which encompasses "concern for self," and "concern for others". The disadvantage of this approach is its lack of identifying the process which underlies thoughts regarding the future and the changes over time. The second approach is the three components approach. Future orientation in this approach is described to have motivational, cognitive, and behavioral components (Seginer, 2009). It is a generic approach which offers a common model for several different future domains. The order of the components is fixed. The motivational component leads to the cognitive component which in its turn leads to the behavioral one. The motivational component is defined by three variables: (a) values which is the importance of each of the future domains for the adolescent; (b) expectations which is the probability for an adolescent to achieve future ambitions or goals (c) control which is the extent to which the adolescent can achieve a certain goal independently or dependently on others. The cognitive component deals with the construction of expectations according to a future time course and it includes both a positive aspect expressed by hopes, as well as a negative aspect expressed by fears. Both hopes and fears may be expressed in life domains such as work and career, higher education, and family (Seginer, 2009; Seginer, Vermulst, & Shoyer, 2004, Seginer & Halabi-Kheir, 1998; 2001). The behavioral component is expressed in the following activities: (a) the examination of future domains. This variable reflects the extent of both interest and willingness to examine each future domain as well as the level of information accumulated (concerning the goal, the adolescent himself/herself, and his/her suitability for the goal). (b) The display of dedication to the possibilities in each life domain. This approach is an extension to the thematic approach because it does not only deal with the cognitive component but also with factors that motivate and trigger the adolescents’ interests in the different domains (Nuttin & Lens, 1985; Seginer, 2009).

The consolidation of future orientation is considered one of the most important developmental tasks in adolescence because it is an adolescent’s first step into adulthood. It is influenced by the proximate environment and cultural values (Seginer, 2009). Moreover, the development of future orientation is an interactive process, which is complex and ongoing within socio cultural, familial, and internal personal spheres (Seginer, 2009).
The socio-cultural context of the future orientation of Arab adolescents

According to Martin and Colbert (1997), culture is the pattern of life which a group of people transmits to future generations through feelings, language, customs, values, and activities. The sociocultural contexts of the future orientation were examined in several studies which focused mainly on the socio-political aspect (Seginer & Mahajna, 2012). According to Seginer (2009), the future orientation of Israeli adolescents are better suited to the patterns of the future orientation of adolescents in Western societies than to adolescent orientation patterns in societies and cultures which are in transition. At first, studies which were concerned with the future orientation of adolescents have shown that Arab adolescents include the other (the family) and the collective (their own people) in their future orientation. However, studies later on emphasized the change of this future orientation over time. According to Seginer and Halabi-Kheir (Seginer & Halabi-Kheir 1998), the main change is reflected in the reduction of the investment in the existing life domains and the increasing investment in the prospective life domains. In addition, studies of Arab adolescents revealed differences between genders in relation to the future orientation (Seginer, 2001).

Gender differences in the future orientation of Arab adolescent

There is a rigid demarcation of roles between both genders in the Arab society. Women are found on a low rung of family hierarchy (Al-Haj, 1989; Odeh, 2007; Yaffe & Tal, 2002). A female is expected to depend on her husband, to submit to his wishes, to fulfill his needs, to serve him and his family, and to play the traditional role of a housewife. The husband, however, usually takes on the dominant (instrumental) roles. He is considered the bread winner and protector of the family. Yet, the exposure to Western cultures led to fissures in the set of traditional values. It resulted in changes in education, the role of women, and the usual family structure. For instance, Arab girls with no disabilities became unsatisfied with their status. Therefore, nowadays, it is crucial for them to emphasize higher education in their future orientation more than boys. They also tend to integrate more than one domain in their future orientation, but they are still more concerned with the family domain than other domains (Mahajna, 2007; Seginer & Mahajna, 2012).

The family context of the future orientation

Family-child relationship is considered to be important for all ages. Studies on behavioral outcomes indicate the importance of this relation and its outcomes. Parents have a central influence on their children’s development (Laursen & Collins, 2009). According to Nurmi and Pulliainen (1991), family interaction and context affect the consolidation of future orientation of the adolescents in three ways: (a) Setting normative standards - parents influence the development of their children's interests, values, and goals. (b) Parents are considered to be a model for solving problems and carrying out tasks. For example, the family atmosphere and the relationship between the parents provide a certain model for how a family should be. It may be a model that encourages their children to have their own family life and marriage - or alternatively, it may lead them to avoid such planning. (c) Parents can make their children interested in a particular domain of adults’ life. During family interaction, parents express their opinions, beliefs, attitudes, expectations, and values regarding the adolescent's future orientation. This way, they influence the adolescent's future orientation. Studies concerned with adolescents in the Arab society have shown that beliefs of Muslim parents have a major impact on the future orientation of their adolescents (Seginer & Mahajna, 2004; 2012). Other studies which are concerned
with parents’ involvement in education show that parents’ hopes, as well as their conversations with their children about what is happening in school and future programs, tend to influence the adolescent’s motivation and their academic achievement (Seginer, 2006; Zhang, Haddad, Torres, & Chen, 2011). However, the demands of parents for the future orientation of their child should match his/her abilities (Seginer, 2006; Zhang et al., 2011). Seginer (2009) claimed that parental support for adolescents is considered to be vital for their coping with major and primary developmental tasks in their lives. Positive parenthood motivates the adolescent to consolidate a positive future orientation, and their support also motivates adolescents to think of options for their future, and develop skills for that purpose. Adolescents who perceive their families as supportive tend to invest more in their future than adolescents who do not. This claim was confirmed in studies which examined modern societies and traditional societies in Israel and around the world (Kracke, 2002; Mahajna, 2007).

Formation of the future orientation is not limited to adolescents. Parents whose children are in their transition from adolescence to adulthood consolidate what is called Constructed Future Orientation regarding their children’s future based on their familiarity with their children’s abilities and characteristics (Seginer & Shoyer, 2012). Unfortunately, former studies considered only the formation of future orientation of adolescents with no disabilities and their parents’ constructed future orientation. Moreover, only few studies examined the future orientation in Arab societies. Therefore, Arslan (2012) was the first to examine the consolidation of future orientation among adolescents with mild Intellectual developmental disability (IDD) from the Arab society in Israel and their parents’ constructed future orientation in the context of their parenting style. This article is a part of Arslan’s (2012) research which focuses on the characteristics of parents’ orientation regarding their children with IDD, while trying to shed light on how cultural values might influence this orientation. The following questions are derived from the purpose of the original study: (1) What are the characteristic of parents' orientation regarding the future of their children with IDD? (2) Is parental orientation influenced by the disability of their child? Is it also influenced by social and cultural values? (3) Are there gender differences in the parental orientation regarding the future of their children with IDD? (4) Does the adolescent’s gender with IDD affect the parents' orientation regarding their future?

The current article will deepen the understanding of parents’ orientation toward the future of their children with IDD. It may enrich parents’ knowledge regarding their children with IDD, which in turn will help them in the transition of their children from adolescence into adulthood.

**Method**

**Participants**
A total of 80 families of male and female adolescents aged 16-21 with IDD from the Arab society in Israel participated in this study. 89% of the families were Muslims. The parents’ ages ranged between the ages 34 to 69. 47% of them had primary school education. 73% of the mothers were housewives. 30% of the fathers were unemployed and 39% of them were manual laborers.
Materials
Both quantitative and qualitative methods were used. Parents’ orientation regarding the future of their children with IDD was examined using a number of questionnaires originally designed for adolescents without disabilities. These questionnaires were adapted to parents of the Arab society and interviewers were trained to help parents who could not read or write.

Two questionnaire were used: (1) Demographic details questionnaire. It requires participants to fill in demographic information: gender, age, socioeconomic status, parents’ education, religion, and profession. (2) Hopes and Fears questionnaire (Seginer, 1988). A semi-structured questionnaire which includes two questions that parents had to answer: (1) what fears do you have when you think of your child in the future? (2) What are your hopes when you think of your child in the future? Three content categories were constructed that analyzed the sum of relevant statements on hopes and fears (separately): (a) education and employment (education, employment, property); (B) the social-relation domain; (c) marriage and family.

Results and Discussion
The parents’ orientation regarding the future of their children with IDD was affected by the sociocultural values of the Arab society and parents’ familiarity with their child’s abilities. This is similar to the way the orientation of parents of adolescents without disabilities is affected (Seginer, 2009). The influence of the sociocultural values was reflected in various contents raised by the parents during the interviews. First, the influence of the adolescents’ gender on parents’ orientation: adolescents’ gender did not influence the mothers’ orientation. Fathers, however, expressed more hopes and fears regarding the orientation of the future of their sons’ with IDD than their daughters’. The social future of their sons was clearer to them than that of their daughters with IDD. According to fathers, home is the safest place for their daughters. Hence, in their own perspective, a female with IDD should be kept there in order to stay protected. However, they expected that their sons with IDD would have a normal life. For them, males with IDD are expected to be employed, have social relation, and get married. This comparison between males and females were reflected in some of the parents’ quotes. For instance, “when she finishes school, she will stay at home. Her mother will take good care of her.”; “when he finishes school, we will help him find a job and get married”.

Fathers’ orientation reflects a clear division of gender role which is found in the Arab society (Alnabulsi, 2005) even among people without disabilities. It also indicates that parents’ attention is given to the adolescent according to his/her gender. Moreover, their expectations of their children are influenced by the extent to which they perceive their children’s behaviors and characteristics as normal (Seginer, 2009).

Second, parents perceived their children as helpless and easy to be harmed and abused. This is similar to how parents in other cultures perceive their children with disabilities as helpless (Reiter, Bryen & Schachar, 2007). Parents of children with IDD are aware of society’s repulsive attitudes toward their children, who do not match the accepted standards of beauty and wisdom (Karni, Reiter, & Bryen, 2011). Parents who participated in the current study searched for solutions in order to cope with the rejection. One of their coping strategies was the patronizing approach toward their
daughters with IDD, which according to it, daughters should stay at home. This reduces the fear of their children being abused. This is reflected in their quotes. For example, “I am afraid that someone might abuse her. It is better if she stays with her mother at home. She will keep an eye on her”. Their sons with IDD, however, are expected to continue the family legacy like males with no disabilities. This is why fathers tend to expect them to have a normal life accompanied with family support. This is also reflected in the parents’ quotes. For instance, “I am always afraid that someone will abuse him, but I will keep an eye on him. I wish that someday he will get married to a good woman who will take good care of him”.

Parents were also concerned with fears more than hopes in their orientation regarding the future of their children with IDD for several reasons. First, during interviews, parents complained of the lack of professional services and guidance during their children’s transition to adulthood (Azaiaz & Cohen, 2006). Parents in the current study are aware of their limited abilities to guide their children with IDD, which leads to increasing their fears. Parents clearly stated that saying: “I do not know how to help my child. I have no professional support, and I will try to do my best”. Second, parents described adolescence as a period saturated with pressure. They face serious challenges during their child’s transition from adolescence to adulthood and independence (Keller & Honig, 2004; Kim & Turnbull, 2004). Parents’ pressure increases as a result of their awareness of their children being socially rejected. This is indicated in their quotes: “People his age go to colleges and find a job. I do not know what will happen to him”; “Her sisters will finish school and apply to university, as to her I am so worried. I have no idea what will happen to her”. Third, parents perceive their children as unaware of real life. They complained that they do not have the skills to discuss their children’s weaknesses and guide them. This increases parents’ fears when they think about the future of their children with IDD. This is also stated in their quotes: “My son is not smart enough, he cannot manage things by himself. I will do my best, but who will take care of him when I die?”

Parents’ perception of their children’s future employment. Parents perceived their children’s chances of being employed as low. Moreover, gender differences were found. Parents excluded the possibility that their daughters with IDD will be employed in the future. Instead, they expect them, as mentioned previously, to stay at home. However, their sons with IDD, are expected to be employed in the family business, and be watched by a family member. These gender differences are reflected in their quotes: “No one will agree to employ her, she can do nothing. It is better if she stays with her mother”, “He will be employed in the family business. His brothers and I will teach him what to do and we will keep an eye on him”.

Parents’ perception of their children’s social future. Loneliness is imposed on their children with IDD for reasons of rejection or protection. This is reflected in their description of their children’s social future. According to Gossenes (Gossans, 2006), loneliness is considered a problem that affects adolescents and their parents and increases their fears regarding the transition to adulthood. These fears are reflected in the parents’ quotes: “No one will agree to be her friend. Her sisters are her only friends”, “Once he is home, he is alone. No one visits him or plays with him. His classmate are his only friends”.
Parents’ perception of their children’s family future. Gender differences were found. Parents totally excluded the possibility that their daughter with IDD will get married. While they expected their son with IDD to get married to a good wife who will take care of him. They also expressed clear intentions to support him. Gender differences are implicated in their quotes: “Who will agree to marry her? No one. She is sick and no one will agree to marry her.”, “He will get married, we will help to find a good woman to marry him and she will take care of him”. Unfortunately, their perception reflects an existing situation in the Arab society which may not have been proved statistically.

Conclusions

This research sheds light on the orientation of parents from the Arab society in Israel regarding the future of their children with IDD. The results show that parents’ orientation is characterized with pessimism as a result of: (a) parent’s awareness of their children with IDD as being socially rejected. (b) The lack of plans for individuals to help them with their transition to adulthood. (c) Their perception of their children as helpless and easy to be harmed. (d) Their awareness of their inability to guide and support their children in this critical period of their life. (e) Being aware that the gap between the chronological and cognitive age of their children still exists, although they study in special education schools for a long time. (f) The low chances for their children to be employed, have social relations, and get married and have their own families in the future. All of what is mentioned previously increases the uncertainty and pessimism regarding the future of their children.

Parents’ orientation is also characterized with passivity. Parents are aware of the social rejection their children with IDD face. They are also aware of their lack of professional support and the lack of individual plans to help their children in their transition from adolescence to adulthood. Parents do not make an actual practical action to improve their children’s life neither at the level of an actual activity nor at the level of a declaration of the need for a change. Parents choose to keep their daughters protected at home, and hope that their sons with IDD will have a normal life with an unconditional support.

Parents’ orientation also emphasizes the division of gender role in the Arab society which turns out that it even exists among people with disabilities. Results also show that parents’ expectations and attention are given to their children according to their gender regardless of whether they have a disability or not.

Parents’ orientation preserves a status quo regarding people with special needs in general and people with IDD in particular. It preserves the stigmatized and rooted stereotypes toward people with disabilities, the loneliness which is imposed on them for reasons of rejection or protection, the misery, compassion, and the patronization they are treated with, the gender role, the oppression and inequality of opportunities between people with disabilities and people without disabilities. The preservation of status quo is reflected in the coping strategies parents in this study have chosen to adapt with their children’s transition to adulthood: keeping their daughters in the house protected by their mothers, while wishing their sons a normal life accompanied with family support.
The results of the research implicate that an action is required in different domains. First, there should be programs focused on families. Their aim should be empowering them, providing parents with the appropriate tools to help them cope with their children’s transition from adolescence to adulthood, and raising their awareness towards their children’s abilities and weaknesses. Second, there should be programs focused on society and institutions. Such programs should aim to change attitudes toward people with disabilities in general, and with IDD in particular. Teams should be trained to prepare a plan for an individual for their transition from adolescence to adulthood. Lastly, there should be programs focused on adolescents in order to empower them, raise their awareness regarding their abilities and weaknesses, and expose them to opportunities and barriers which exist in society.

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References


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