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## Increasing Cultural Competence with Orthodox Jews: A Primer for Mental Health Clinicians

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Orthodox Jews face many of the same mental health and relational challenges that other people face. However, they may avoid treatment out of fear that their culture and value system will not be understood, accepted, or respected (Sublette & Trappler, 2000). This article aims to increase clinicians' cultural competence with this population in order to improve quality of care and

outcomes by presenting a brief overview of what Orthodox Jews believe. There are four topics which are common religious and cultural issues that may be encountered in the clinical setting: laws pertaining to modesty, laws pertaining to speech, family values, and holiday observance. I will also present possible accommodations to ease cultural differences and help clients feel more comfortable. Please note that while I am a religiously-observant Jew, I am not a rabbi or expert in Jewish law or philosophy. Readers are encouraged to seek consultation with a competent rabbi familiar with Orthodox Judaism for clarification on any of the concepts presented herein.

Orthodox Jews believe that the Torah (Five Books of Moses) was given to them by God on Mount Sinai approximately 3,300 years ago. The Torah comprises a complex set of laws that cover every aspect of life from business practices, charity, and diet, to holiday observance, marriage, and sexuality. Orthodox Jews feel that their lives are enhanced by the observance of these laws (Wikler, 2001). It is important to note that while differences may be imperceptible to outsiders, there are many variations within Orthodoxy (e.g. Modern Orthodox, Hasidic, Yeshivish) and subgroup members take differences very seriously (Wikler, 2001).

#### Laws pertaining to modesty:

Judaism posits that human beings are created in God's image and people should therefore conduct themselves with dignity and focus on the inner qualities of a person as opposed to physical appearances. These values are manifested in the laws of *tzniut*, often translated as modesty, covering several areas of Jewish law such as conduct between sexes, dress, and behavior.

Orthodox Jews observe *tzniut* by avoiding physical contact between members of the opposite sex outside of the immediate family, including common social norms such as hand shaking or a supportive pat on the back. Spouses may refrain from public displays of affection, including hand holding. Clothing for both men and women that is provocative or demeaning is avoided and women typically cover their hair, and wear skirts that fall below the knee and blouses that cover the collarbone and elbows. Eye contact may be minimal, especially for men who encounter women who are immodestly dressed. Finally, Orthodox Jews strive to guard themselves against vulgarity, immorality, and situations that can lead to sexual temptation.

Clinicians wishing to demonstrate cultural sensitivity in the area of *tzniut* may do so by refraining from initiating physical contact with clients, particularly with clients of the opposite sex. Female clinicians are encouraged to avoid wearing short skirts or sleeveless or low-cut tops (Schnall, 2006). Clinicians may consider exploring a client's comfort level meeting with a clinician of the opposite sex, or consider having a same-sex clinician to limit anxiety, facilitate the therapeutic alliance, and avoid the prohibition of seclusion with a member of the opposite sex (Greenberg & Witztum, 2012; Margolese, 1998). Clinicians may also leave the office door ajar or unlocked (Margolese, 1998; Sublette & Trappler, 2000). With couples, clinicians should be cautious about utilizing interventions that encourage hand holding or hugging.

#### Laws pertaining to speech:

Jewish law prohibits *lashon hara* (literally, "evil speech"), which includes all forms of derogatory speech, gossip, and slander. Nevertheless, under certain conditions, negative speech may be sanctioned if it serves a constructive purpose. The laws of guarding speech encourage character refinement and foster positive relations between people.

Clinicians may notice clients' reluctance to verbalize complaints against others or they may be hesitant to discuss subjects they perceive as sensitive in order to avoid transgressing these laws. Additionally, children may feel uncomfortable or believe it is immoral to say negative things about their parents, even if they are abusive (Keieger, 2010).

Clinicians may demonstrate cultural sensitivity in the area of speech by being empathic with clients who appear reluctant to speak negatively about others and by helping clients communicate their thoughts and feelings in a purposeful and constructive manner. Clinicians are cautioned not to confuse reluctance to share with resistance in therapy in this matter.

#### Family values:

In Judaism, family is the central social unit and marriage is strongly encouraged (Krieger, 2010; Margolese, 1998). In addition to helping people achieve their fullest potential in life, Judaism views the purpose of marriage as twofold: to increase peoples' sense of responsibility for one another and

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procreation (Krieger, 2010). Orthodox Jews are encouraged to marry young and parents often assist in finding spouses for their children. Dating only occurs for the purpose of finding a spouse and engagement periods are generally short. Couples observe laws that guide intimacy and sexuality and endeavor to maintain peace in the home. Couples strive to not only have a loving and fulfilling marriage, but to also provide a home environment conducive to the development of well-adjusted and emotionally healthy children.

Clinicians may notice high levels of enmeshment within families (Wieselberg, 1992) and well-defined member roles, with parents holding authoritative positions (Krieger, 2010).

Clients may present with fear and anxiety that mental health issues will negatively impact one's (or a family member's) prospects for marriage (Greenberg, Buchbinder & Witztum, 2012; Margolese, 1998; Sublette & Trappler, 2000). Infertility may be particularly emotionally devastating and stigmatizing for couples. Furthermore, financial resources may be scarce due to large family size and because some choose religious study, clergy, or teaching as their primary occupation (Schnall, 2006). In addition, clinicians may be called upon to provide information and guidance to the client, parents, potential in-laws, and rabbis during the dating process or for any other issues (Greenberg & Witztum, 2012).

Judaism is a collectivistic culture and significant value is placed on each member's responsibility for one another. Thus, a systems approach is recommended for treatment (Keieger 2010; Margolese, 1998). Collaboration and consultation with family members and rabbis may help reduce a client's reluctance to engage in treatment, assist in determining whether behavior is within normative bounds, and provide valuable insight into the client's personal, professional, and communal life. Lastly, being vigilant and judicious about confidentiality is especially important, given the sensitivity to privacy in the community (Margolese, 1998).

#### Holiday observance:

The most important day on the Jewish calendar is the Sabbath, which begins each Friday at sundown and concludes Saturday at nightfall. Many holidays have a status similar to the Sabbath, are often two days in duration, and begin at sundown and end at nightfall. In order to maintain the spirit of these special days, Jewish law prescribes activities designed to enhance joy and spiritual awareness, such as festive meals, prayer, and learning Torah, while prohibiting mundane activities such as conducting business, driving a car, and using electrical devices. Therefore, inviting clients to consider how they would manage a crisis on the Sabbath or a holiday may be necessary.

#### Final thoughts:

In addition to the suggestions presented above, clinicians

are encouraged to maintain open dialogue about cultural issues and ask clients to share insights into unfamiliar practices. It is advisable for clinicians to seek consultation from colleagues familiar with the culture and/or from Orthodox rabbis, and utilize personal psychotherapy and consultation to address issues of countertransference. And finally, relish the opportunity and challenge of working with a new population and appreciate the beauty of human diversity.

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