

#### RESEARCH ARTICLE

# Differences between Israeli Jewish and Arabs mothers in parental self-efficacy: A cultural perspective

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Abstract: Parental self-efficacy (PSE) is a key to the child-parent relationship. It reflects parents' self-perception of their ability to perform parenting tasks successfully and a high level of parental self-efficacy is associated with positive child outcomes. The literature on cultural differences regarding PSE is scant. This study applied a cultural perspective and examined differences between Arab and Jewish mothers with regard to PSE and associated factors such as marital satisfaction, social support, wellbeing and stress. Based on a sample of 170 married mothers in Israel, it revealed that Arab mothers experienced a higher degree of PSE, marital satisfaction and wellbeing, as well as lower stress, than Jewish mothers. PSE among Arab mothers was predicted by marital satisfaction and stress. Among Jewish mothers, PSE was predicted by stress and wellbeing as well as financial indicators. The paper discusses the findings from a cultural perspective, focusing on the experience of parenting in an Arab, collective, traditional and patriarchic society compared to parenting in a Jewish, individualistic, liberal society. The study concludes that it is important to consider the cultural context of parenting to the sense of parental efficacy and to understand the cultural norms and values of individuals whose parenting capacity comes under assessment. Based on the findings it was suggested that family therapy or spousal therapy may provide benefit to Arab mothers who report a low level of PSE. For Jewish mothers, alleviating financial hardship and providing material help could provide similar benefits, in addition to lowering the mother's level of stress. Limitations of the study as well as future studies directions were also discussed.

**Keywords:** parental self-efficacy, parenting, cultural context of parenting, Jewish mothers, Arab mothers

## **Highlights**

- Parental self-efficacy (PSE) is a key to the child-parent relationship, but, the literature on cultural differences regarding PSE is scant.
- The study examined differences between Arab and Jewish mothers in PSE and associated factors such as marital satisfaction, social support, wellbeing and stress.
- Arab mothers experienced a higher degree of PSE, marital satisfaction and wellbeing, as well as lower stress, than Jewish mothers.
- · PSE among Arab mothers was predicted by marital satisfaction and stress.
- Among Jewish mothers, PSE was predicted by stress and wellbeing as well as financial indicators.

#### 1 Instruction

The present study explores the level of parental self-efficacy among Jewish and Arab mothers in Israel and associated factors. Israeli society comprises a majority of Jews and a 20% Arab population [1]. Key differences between Jewish and Arab societies in culture, including family values, sex roles, parenting practices, and family structure led us to inquire whether there are corresponding differences in the parental competence of mothers from both societies. The study applies a cultural perspective that considers the larger social-cultural context of parenting and family life in an attempt to understand potential differences between Arab and Jewish mothers with regard to parental self-efficacy and associated variables such as marital satisfaction, social

support, wellbeing and stress. It is hoped that the findings of the study will help professionals design cultural-sensitive interventions to assist parents, couples and children.

Parental self-efficacy (PSE) is defined as parents' belief in their ability to effectively perform the role of a parent and manage the various tasks and situations of parenthood [2–4]. In other words, the concept reflects the individual's perception of their ability to manage parenting tasks [5] and parent their child successfully. Parental self-efficacy has been connected to parenting competence [5]. High parental self-efficacy has been associated with positive parenting behaviors that include warmth and responsiveness to the child [6], and in turn promote the child's development and positive child psychosocial and developmental outcomes [5,7–9]. In contrast, parents who report low levels of parental self-efficacy may be less attentive to their children's emotional needs, less engaged in their children's lives, and suffer a high level of depression and anxiety [5,10]. Maternal parental self-efficacy has been specifically associated with high marital satisfaction, satisfaction with the parenting role and positive parenting practices [10]. A significant predictor of parental self-efficacy and satisfaction with the parental role is social support [11]. Maternal depression has been connected to poor sense of parental competence, an increased stress level, and low social support [10,12]. In contrast, a high sense of maternal competence has been connected to high social support and low depressive symptoms.

While parental self-efficacy is an important concept in the literature on parents and children, a cross cultural examination of this concept has, to the best of our knowledge, not been conducted. There is a gap in knowledge about whether culture impacts on an individual's parental self-efficacy and whether there are differences in parental self-efficacy between parents from different cultural background. There is a basis to argue that the individual's perception of the ability to successfully fulfil the role of parent is heavily impacted by culture.

Parenting occurs in a socio-cultural context. Parents raise their children and carry on the numerous tasks involved in parenting in a social environment and within a larger cultural background. Therefore, in addition to individual and family factors, parental self-efficacy is likely to be impacted by the cultural parenting context. Culture is defined as a set of values, beliefs, expectations and rituals shared by a particular group of people [13]. Passed on from one generation to the next, culture includes social norms, roles, beliefs, values and practices and serves to provide guidelines for acceptable behavior including appropriate and inappropriate parenting practices [1, 14–16]. Every culture prescribes standards for what is considered "normative parenting" within their context. The way normative parenting is defined in a culture significantly informs how individuals perceive themselves as parentally efficacious and competent. It is thus likely that parents adopt central parenting strategies, beliefs and practices that match the norms and values of their culture [1, 14]. It is believed that shared social values and social learning environments produce similar child-rearing practices and are consistent in a community, despite diversity between and in families [17].

Cultures vary from one another in terms of parental practices, family values and norms and we can therefore expect that parents from different cultures perceive themselves differently and are impacted in their self-perception by different factors.

Jewish and Arab parents represent two ethnic groups in Israel with different values, norms and approaches in general and, specifically, with regard to parenting and family practices [1].

The research literature suggests some key differences in parenting style and child rearing practices and attitudes between Israeli Jewish and Arab parents. The authoritarian type of parenting style has been reported as dominant in Arab societies [14], including among Arab mothers in Israel [1], while the authoritative style, which has been adopted by Western parents, includes Jewish mothers in Israel [1, 18–20]. Ethnic differences have also been observed in attitudes toward corporal punishment, notably Arab-Muslim mothers are more tolerant of corporal punishment than Jewish mothers in Israel [1, 21, 22]. Support of corporal punishment by Arab mothers has been found to be particularly strong among mothers of boys rather than of girls and among mothers with lower parental self-efficacy [23–25]. Use of physical punishment as an acceptable educational tool [14], acceptance of traditional norms and a lower status of women has been shown to characterize Arab cultures [26, 27]. Intergenerational differences in parenting style were also found to be more prominent among Israeli-Jewish mothers than among Israeli-Arab mothers [1]. This may indicate that Israeli-Jewish culture is more penetrable to social and cultural change in parenting attitude and beliefs than traditional Arab culture.

Another major difference relates to the way children are cared for and raised in both cultures. Jewish culture in Israel values the ideology of freedom and individualism and endorses Western values of autonomy and self-agency [28,29]. Parents are expected to independently manage all the duties and responsibilities concerning their child, and the culture thus promotes what is known as "individual parenting." In this cultural context, parents are held responsible for their parenting and for the child's outcome and the responsibility for the child's success or failure is placed on the individual parent rather than on the community.

In contrast, the Arab culture is characterized as highly collectivist, authoritarian, traditional, and patriarchal [23, 30, 31]. This form of culture emphasizes values of mutual dependency, hierarchy, predominance of group over individual goals, obedience and conformity. Israeli Arabs live mostly (especially Muslims) in their own communities, usually in rural areas, in proximity to the extended family of the husband and abide by patriarchal rules that include distinct gender roles. However, proximity to the liberal democratic society of Israeli Jewish culture is believed to have driven a change in these strict patriarchal norms as evident, for example, in the fact that more Arab women acquire higher education and participate in the workforce than in the past. Yet traditional patterns regarding gender roles are still preserved, and Israeli Arab mothers are expected to carry out all the chores of their household and care for the children [32]. Since the basic family unit resides in a larger community of family members, the mother does not usually care for her children exclusively: the community also plays a part and this can involve grandparents, biologically related persons and other persons in the community who perform parenting functions. There is web of support for parents and multiple caregivers to provide nurturance, supervision, education and care for children. Parenting is thus a more collective phenomenon in Israeli Arab society.

One can ask: in which cultural context is a parent expected to develop a high sense of parental efficacy: in a more independent or dependent environment? On the one hand, it can be argued that the individual parenting approach encourages a parent to quickly learn and master important parenting tasks in order to effectively and independently parent the child, and this sense of independence enhances the parent's perception of capacity to parent. On the other hand, it can be argued that the collective parenting approach provides more modeling and social support to a parent and is thus more beneficial to the development of parental self-efficacy. In such an environment, a parent may feel better able to parent the child knowing that experienced others are readily available to give guidance and help if needed and, as a result, feels more psychological confidence in the execution of parenting tasks. It could also be that the differences between the two cultures are less significant than presumed, due to exposure of Israeli Arabs to Israeli Western, liberal values [14].

The existing body of literature does not provide clear answers or guidance to this question. While the research literature indicates differences in parenting styles and child-rearing practices between Jewish and Arab mothers in Israel, it remains unclear whether there are differences in the parental self-efficacy of the two groups, and what are the factors that impact parental self-efficacy. This concept has not been extensively examined from a cross-cultural perspective and there is a need to determine whether cultural differences relating to parenting practices and family values translate into a different degree of parental self-efficacy. Such knowledge can promote culturally sensitive treatment and prevention programs for parents and families from different cultures.

As discussed earlier, parental self-efficacy is a key to parental functioning and interaction with the child. In the current study we examined the differences between the parental self-efficacy of Jewish and Arab mothers. We also examined associations between parental self-efficacy and other factors previously found to be connected with it: marital satisfaction, social support, stress and wellbeing among the two groups of mothers. Prior research has indicated the importance of these variables to parental functioning and parental self-efficacy as well as their interconnections [10, 12]. The premise of this study is that culture dictates not only what is considered to be a "good," efficacious parent but also, explicitly and implicitly, what is a "good" marriage and what comprises marital satisfaction. Many aspects of family life are shaped by culture. Family values, expectations of each partner from the relationship and the nature of relationship are all impacted, among other factors, by cultural norms and values.

Both Jewish and Arab societies are considered to be highly familial. Israeli-Jewish ideology emphasizes the importance of marriage, normative families and bearing children. Israeli society considers the family to be one of the most important institutions, and for many Israeli Jewish women, the roles of mother and wife are considered predominant [33]. Israeli-Jewish women enjoy Western values such as economic independence, freedom and equality to men. They enjoy more flexible gender roles than Arab women and involvement of men in the home is growing. However, the division of labor in the home is still highly unequal and women continue to carry out most of the household tasks as well as being the primary caregivers of their children [34,35].

In Arab society, the nuclear and the extended family are considered the foundation of society and the family is accorded great social value. As noted earlier, despite the gradual change Israeli Arab society has undergone in recent years, traditional patterns regarding gender roles and marital behavior persist [32], including the traditional gendered division of labor. Women's main role revolves around childbearing, childrearing and household care, and women are often expected to provide for the domestic needs of their husband, children as well as in-laws and other relatives [35]. Women are regarded inferior to men in Muslim culture and men hold economic

and culture dominance over women [30]. It has been argued that educational attainment does not guarantee greater social autonomy for women or change in traditional marital roles [36]. This study addresses the question of whether there are differences in marital satisfaction between married Arab and Jewish women.

The individual's perception of stress and wellbeing may also reflect a cultural component and influence of the social environment; it is likely to mirror social standards and expectations of desired behavior from women as mothers and wives, and reflect the failure or success to meet these standards or expectations. The inclusion of mothers from two different ethnic backgrounds enabled the examination of differences in these key variables as well. In conclusion, this study examined differences in parental self-efficacy between two groups of ethnically different mothers. We examined demographic factors, as well as factors at the family level that reflected family dynamics (e.g., social support, marital satisfaction) and could impact on the mothers' parental self-efficacy. We were guided by the assumption that the development of a personal sense of parental efficacy, marital satisfaction, and stress reflect not only internal family dynamics but also cultural norms and values that define what is acceptable and "normative" in each society. The research questions were:

- 1. Are there differences in parental self-efficacy between Jewish and Arab mothers?
- 2. Are there differences in marital satisfaction, stress, wellbeing, and social support between Jewish and Arab mothers?
- 3. Is there a difference between Jewish and Arab mothers with regard to factors that predict parental self-efficacy? In other words, does the prediction of parental efficacy by marital satisfaction, wellbeing, stress and social support vary between Jewish and Arab mothers?

## 2 Method

#### 2.1 Participants

The sample consisted of 170 married undergraduate student mothers who were enrolled in the (omitted for blind review) College. The mothers had to meet four main inclusion criteria: they needed to be married, have at least one child aged six or younger and be fluent in Hebrew. 41.2% of the mothers in the sample were Jewish, and 58.8% Arab, of which 35.9% were Muslim-Arab, 7.6% Christian-Arab, and 14.7% Druse (see: Table 1 and 2). The mean age of the sample was 30.14 years old (SD = 6.12). Nearly 74% of participants had 2 children. The average years of marriage was almost six (SD = 5.63). There was no significant difference between the groups in the mothers' ages, number of children or number of years of marriage. The majority of the Arab mothers resided in rural villages (66%) while the majority of Jewish mothers resided in cities (75%, p < 0.001). The Arab mothers were mostly traditionally religious (55%), 28% secular and 17% religious, while the majority of Jewish mothers split evenly between traditionally religious and religious (37.1%, p < 0.003).

 Table 1
 Differences between Jewish and Arab mothers in demographic characteristics

Variable	Arab $(n = 100) \%$	Jewish $(n = 70) \%$	Total %	Sig.
Full-time job	33.3	13.2	24.1	0.032
Part-ttime job	66.7	86.8	75.9	0.032
Spouse's academic degree	36.4	40.0	47.6	0.050
Spouse is a student	2.0	17.1	8.3	0.001
Spouse employed	99.0	94.3	97.0	0.075
Family economic support	14.1	40.0	24.7	0.001
Residence				
City	33.0	75.0	49.1	0.001
Rural village	66.0	0	39.1	
Community	1.0	24.6	10.7	
Religious level				
Secular	28.0	24.3	26.5	0.003
Traditional	55.0	37.1	47.6	
Religious	17.0	37.1	25.3	

Arab mothers worked more in full-time jobs than Jewish mothers (33.3% and 13.2%, respectively, p < 0.03), while the latter worked more in part-time jobs (86.8% of Jewish mothers compared to 66.7% of Arab mothers, p < 0.03). Arab mothers worked more hours per week than Jewish mothers (M = 24.37, SD = 11.13, and M = 15.4, SD = 9.86, p < 0.001). There was a significant difference in the family monthly income, with Arab mothers reporting a higher

0.076

5.33 (1.33)

Variable M(SD) M(SD) T test sig. N. of working hours per week 24.37 (11.13) 15.4 (9.86) 0.001 Spouse age 35.5(6.5) 33.17 (7.4) 0.030 3610 (1453) 2880 (1200) Family monthly income (\$US) 0.001 Birth order of respondent 3.07 (1.79) 2.43 (1.39) 0.013 Parental capacity 3.92 (0.5) 3.73 (0.39) 0.009 Marital satisfaction 3.78 (0.64) 3.47 (0.41) 0.001 Stress 1.97 (0.71) 2.2 (0.56) 0.018 Wellbeing 3.9 (0.69) 3.5 (0.75) 0.002

4.9 (1.85)

**Table 2** Differences between Jewish and Arab mothers in continuous and study variables

family income than Jewish mothers (M = \$US3610, SD = 1453 and M = \$US2880, SD = 1200), p < 0.001). More Jewish mothers had a spouse with an academic degree (40% and 36.4%, respectively, p < 0.05), or a spouse who was a student at the time the study was conducted (17.1% and 2%, respectively, p < 0.001) but there was no significant difference in the spouse employment rate (p < 0.075). Jewish mothers had a somewhat younger spouse (M = 33.17 years, SD = 7.4) than Arab mothers (M = 35.5 years, SD = 6.5, p < 0.03) and the former received more financial support from their family than Arab mothers (40% and 14.1%, respectively, p < 0.001). The birth order of Jewish mothers was slightly higher (M = 2.43, SD = 1.39) than Arab mothers (M = 3.07, SD = 1.79, p < 0.013), meaning that the former were born earlier in their family than the latter.

#### 2.2 Procedure

Social support

During March-April of the 2018-2019 academic year, a sample of mothers was recruited in (omitted for blind review) in various ways. Potential mothers were actively approached in college venues such as the library or cafeteria, in order to find out if they were qualified and willing to take part in the study. Mothers who agreed to participate were asked to give their informed consent and were informed that all information given would be confidential and their participation voluntary. Regardless of their qualification, the mothers were asked if they knew other mothers who met the study's criteria. If they answered affirmatively, they were asked to provide potential participants' contact details after obtaining the latter's permission. The new mothers were then contacted and screened to check their eligibility. Participants were also recruited via social media posts and flyers disseminated at different places around the college. Following an explanation of the study and acquisition of the participants' signature on informed consent sheets, study questionnaires were given out. Completion of the surveys lasted approximately 20 to 45 minutes. The participants first completed the demographic questionnaire. After the questionnaire, the examiner instructed participants to complete an assessment package that contained the following instruments: Parenting Sense of Competence [37], followed by the Mental Health Inventory [38], Multi-Dimensional Scale of Perceived Social Support [39], Emotional Stress Scale [40], and the Marital Satisfaction Scale [41]. A demographic questionnaire was also completed by participants. The institutional review board of the Zefat Academic College approved all study procedures.

#### 2.3 Measures

#### 2.3.1 Parental self-efficacy

Parental self-efficacy was measured using the Parenting Sense of Competence Scale [37]. This is a 17-item self-report questionnaire designed to assess perception of parental self-efficacy and satisfaction of the parental role. The participants were asked to rate each item on a 6-point Likert-type scale ranging from 'strongly agree' (6) to 'strongly disagree'. Example items included "being a parent is manageable, and any problems are easily solved," "although parenting is rewarding, currently I am frustrated with my children's condition and behavior," "I honestly believe I have the skills to be a good mother for my children," "being a parent is a source of stress and anxiety for me." Other items covered issues such as: self-perception as a good parent, difficulties and success in parental capacity, the mothers' level of motivation, skills required to be a good mother etc. After reversing inversed items, higher scores indicated greater parental capacity perception of the respondent. Scores were tabulated to create a mean score for parental self-efficacy. The Cronbach's alpha for the scores in the present study was 0.62 indicating moderate internal reliability.

#### **2.3.2** Stress

Stress was measured using the Emotional Stress Scale [40]. This is a 24-item self-report questionnaire designed to measure stress in three domains: marital stress, parental stress and financial stress. Respondents were asked to rate their level of agreement with a range of positive and negative feelings regarding the three above-mentioned domains, on a 4-point Likert-type scale ranging from very much (4) to not at all. Example items included "when you think about the pleasure/difficulty you have with your spouse, to what extent do you feel frustrated?"; when you think about your experience as a parent, to what extent do you feel worried?"; and "when you think about your financial situation to what extent do you feel concerned?" After reversing inversed items, higher scores indicated a greater sense of stress. Scores were tabulated to create a mean score for emotional stress. The Cronbach's alpha for the scores in the present study was 0.94 indicating strong internal reliability.

#### 2.3.3 Wellbeing

Wellbeing was assessed using the Mental Health Inventory [38]. This is a 48-item self-report questionnaire designed to measure mental health wellbeing and consists of two subscales: mental health condition and mental health wellbeing. For the present study, we used the short version of the questionnaire of the subscale of mental health wellbeing which includes 12 items. The items referred to the respondents' positive and negative feelings in the last month. Example of items included: "in the last month to what extent did you feel loved and wanted" and "in the last month to what extent did you feel tense and easily angry." Participants were asked to rate each item on a 6-point Likert-type scale ranging from never (6) to all the time (1). After reversing inversed items, higher scores indicated a greater sense of wellbeing. Scores were tabulated to create a mean score for wellbeing. The Cronbach's alpha for the scores was 0.89 indicating strong internal reliability.

#### 2.3.4 Social support

Social support was measured using the Multi-Dimensional Perceiver Social Support [39]. This is a 12-item self-report questionnaire designed to assess social support from family, friends and significant others. For each item respondents were asked to rate their level of agreement with the item on a 7-point Likert-type scale ranging from strongly disagree (1) to strongly agree (6). Items were averaged to create a mean score for social support. Higher scores represented greater perceived availability of support. The Cronbach's alpha for the scores was 0.97 indicating very strong internal reliability.

## 2.3.5 Marital satisfaction

Marital satisfaction was assessed using the Marital Satisfaction Scale [41]. For the purpose of this study, we used only two subscales of idealistic distortion and marital satisfaction which consisted of 15 self-reported items. Items covered such issues as communication and happiness, evaluation and nurturing relationship issues. Participants were asked to rate each item on a 5-point Likert-type scale ranging from strongly agree (6) to strongly disagree (1). Examples of items included "my partner and I understand each other perfectly" and "I am very happy with the way we make decisions and resolve conflicts." After reversing inversed items, higher scores indicated greater satisfaction. Scores were tabulated to create a mean score for marital satisfaction. The Cronbach's alpha for the scores in the present study was 0.86 indicating strong internal reliability.

#### 2.3.6 Demographic variables

Participants filled out a demographic questionnaire regarding their age, number of children, number of years of marriage, number of working hours per week, family monthly income, full-time/part-time job, spouse's age, spouse's academic degree, spouse employment, whether the spouse was a student, economic support from other family members, residence (city/rural village/community), level of religiosity (secular/traditional/religious), and respondents' birth order.

## 2.4 Statistical analyses

Chi-square tests and independent-samples T tests were conducted in order to examine differences between Jewish and Arab mothers in relation to categorical and continuous variables,

respectively. In addition, two hierarchical linear regressions were run in order to examine which variables predicted parental self-efficacy within each group. The variables of marital satisfaction, social support, and wellbeing were entered into a model predicting parental self-efficacy, after which various demographic variables were entered as well. Only variables which significantly contributed to the prediction were retained in the model. All analyses were conducted in SPSS version 25.

### 3 Results

## 3.1 Differences in parental self-efficacy between Jewish and Arab mothers

In order to examine differences in parental self-efficacy between Jewish and Arab mothers, an independent-samples T test was run (Table 2) and a significant difference was found (t (168) = 2.63, p < 0.009). Arab mothers reported a higher degree of parental self-efficacy (M = 3.73, SD = 0.39) compared to Jewish mothers (M = 3.73, SD = 0.39).

## 3.2 Differences in marital satisfaction, stress, wellbeing, and social support between Jewish and Arab mothers

In order to examine differences in marital satisfaction, stress, wellbeing and social support between Jewish and Arab mothers, independent-samples T tests were run (Table 2). Significant differences were found in marital satisfaction (t (168) = 3.9, p < 0.001), wellbeing (t (168) = 3.16, p < 0.002), and stress (t (168) = 2.29, p < 0.023) between the two groups. Arab mothers reported a higher degree of marital satisfaction (M = 3.78, SD = 0.64) and wellbeing (M = 3.9, SD = 0.69), compared to Jewish mothers (M = 3.47, SD = 0.41; M = 3.5, SD = 0.75, respectively). Arab mothers also reported a lower degree of stress (M = 1.97, SD = 0.71) compared to Jewish mothers (M = 2.2, SD = 0.56). With regard to social support, the difference between the two groups was marginally significant (t (168) = 1.78, p < 0.076), with Jewish mothers reporting a higher degree of social support (M = 5.33, SD = 1.33) than Arab mothers (M = 4.9, SD = 1.85).

## 3.3 Prediction of parental self-efficacy for Arab and Jewish mothers

In order to examine which variables of the study were most impactful in the prediction of parental self-efficacy, a set of hierarchical linear regressions was run, separately for Arab and Jewish mothers. In the first step, all four study variables were entered into the model. In the second step, socio-demographic variables were entered. Only variables that were significant in the prediction remained in the final models presented in Table 3 and 4.

**Table 3** Prediction of self-parental efficacy for Arab mothers (n = 100) by study variables and number of working hours

Variable	Step 1	Step 2
Marital satisfaction	0.33**	0.36*
Stress	-0.19*	0.21
Wellbeing	0.14	0.28#
Social support	0.13	0.22
$\overline{R^2}$	0.31	
N. of working hours per week (mother)	0.3*	
$\overline{R^2}$		0.4

Note: \*p < 0.05, \*\*p < 0.01, \*\*\*p < 0.001

As can be seen in Table 3, prediction of parental self-efficacy among Arab mothers, in the first step of the regression, was made by two key variables examined in the study: marital satisfaction and stress. Marital satisfaction was positively related to parental self-efficacy and was the most influential predictor, while stress negatively correlated with parental self-efficacy. In the second stage of the model, only the number of hours the mother worked per week was predictive of her sense of parental efficacy. Other socio-demographic characteristics were not significant predictors. However, the mother's marital satisfaction remained significant in the second step as well.

**Table 4** Prediction of parental capacity for Jewish mothers (n = 70) by study variables and socioeconomic variables

Variable	Step 1	Step 2
Stress	-0.352**	-0.115
Wellbeing	0.262*	0.313#
Marital satisfaction	-0.098	0.152
Social support	-0.037	-0.252
$R^2$	0.25	
N. of working hours per week (mother)		0.538**
Family monthly income		-0.396*
Spouse has academic degree		-0.389*
$R^2$		0.39

Note: \*p < 0.05, \*\*p < 0.01, \*\*\*p < 0.001

As can be seen in Table 4, parental self-efficacy among Jewish mothers, in the first step of the regression, was predicted by stress and wellbeing variables. Stress was the most influential in the prediction and negatively correlated with parental self-efficacy: an increase in stress reported by the mothers was accompanied by a decrease in their sense of parental efficacy. In contrast, wellbeing positively correlated with parental self-efficacy and a higher sense of wellbeing was connected to a higher sense of parental efficacy. In the second step, indicators relating to the financial situation of the family were found to be significantly predictive of the mothers' parental self-efficacy. These included the number of hours worked per week by the mothers, family income and the spouse having an academic degree. None of the key study variables remained significant in the model in the second step. Family income and the spouse's academic degree negatively correlated with parental self-efficacy. This meant that the more the family income increased and/or the spouse had an academic degree, the mother's parental self-efficacy decreased.

### 4 Discussion

The present study examined differences between Jewish and Arab mothers in terms of parental self-efficacy as well as marital satisfaction, stress and wellbeing. We wanted to explore whether the different cultural contexts of parenting and family life of the mothers translated into differences in the mothers' parental self-efficacy and whether the latter was impacted by the level of stress, sense of wellbeing, degree of marital satisfaction as well as socio-demographic characteristics.

It was found that Arab mothers reported a higher degree of parental self-efficacy, marital satisfaction and wellbeing as well as less stress compared to Jewish mothers, despite the fact that they worked significantly more hours per week, worked more in full-time jobs and fewer received financial support from their extended family. As the findings of the set of regressions demonstrate, there were also differences in the variables that significantly predicted parental self-efficacy. Among Arab mothers, marital satisfaction and stress were the most influential in the first step of the regression, but when the model considered the number of hours the mother worked per week, stress was no longer significant, but marital satisfaction remained significant. With regard to Jewish mothers, it was found that the variables of stress and wellbeing (but not marital satisfaction) were significant in predicting the mothers' parental self-efficacy. The stress factor could predict parental self-efficacy for both groups but was a stronger predictor for Jewish mothers. However, when indicators of the family's financial condition were entered into the model, stress and wellbeing ceased to be significant in the prediction for Jewish mothers. Family monthly income, the number of hours the mother worked per week and the fact that the spouse had an academic degree were the most influential factors in the prediction of Jewish mothers' parental self-efficacy. This could reflect the importance of the family's financial condition to the mothers' sense of parental competence. More Jewish mothers were married to a spouse with an academic degree, and they were overall more religious than Arab mothers. Another difference was that most Arab mothers resided in rural villages, while most Jewish mothers lived in urban

From a socio-cultural perspective, the findings reflect the significance attributed to marriage and the community in regard to parenting in the collective Arab society, as opposed to the value attached to socioeconomic status in the more individualistic Jewish society in Israel. Arabs mothers felt more parentally competent and satisfied with their parental role even though they

worked longer hours per week and held more full time job positions, and probably had less free time to spend with their children. Nevertheless, they felt less stress in their lives and reported greater satisfaction in their marriage and a higher degree of wellbeing. Although Arab society is characterized as a patriarchal society with relatively distinct, rigid gender role divisions, and distinctively low gender equality [36, 42], the mother's burden of taking care of her children and home while also working outside the home was mitigated by a higher sense of general satisfaction with life (wellbeing), marriage as well as satisfaction from her parenting role, all of which reflect compliance with the core values and norms of Arab society. In other words, the burden overload experienced by the Arab mother did not negatively impact her sense of parental capacity. This could be because she feels that she has succeeded in fulfilling the two major roles reserved for women in her society: getting married and raising children.

As noted before, marital satisfaction was found to be a significant factor in the Arab mothers' perception of her ability to perform parental tasks successfully. For Arab mothers, marital satisfaction remained a significant predictive factor of parental efficacy even after controlling for the family's financial condition. The findings may reflect the high importance accorded to marriage in traditional Arab society: it enjoys high social value and is considered a natural and necessary component in women's mature life. Moreover, in the collective Arab society, individuals form and maintain their identity through a net of social relationships and interactions within the family and community. The emphasis is on interdependency between members, a sense of belonging to the group, obedience and conformity to social norms [31]. The identity of a woman as a mother is formed through her relationship with her husband. This may also reflect male dominance in Arab culture: the mother's parental self-efficacy is based, at least in part, on her relationship with her spouse. Another related possible explanation is that marital satisfaction is a proxy for women's dependency on their husbands in matters related to parental capacity. A recent study found that the financial independence of Arab women in Israel is limited, reflecting the unequal gender and power relations of Arab society [43]. It could be that the women's high degree of marital satisfaction reflected their ability to maintain a good relationship with their husbands and hence greater access to the family's financial means, enabling them to more successfully execute the variety of tasks involved in parenting. Their higher level of marital satisfaction may also indicate that they perceive marriage as a source of security and refuge, financially and emotionally.

In our opinion, these findings on the predictive value of marital satisfaction with regard to parental self-efficacy and the higher level of marital satisfaction of Arab mothers reflect a cultural norm, and not just the dynamics of a normative functioning family, where the parents' marital relationship impacts on their relationship with the children. The findings with regard to the Jewish mothers corroborate this conclusion. Marriage is also accorded high social value in Jewish culture, specifically among religious Jewish mothers who comprised the majority of Jewish women in our sample (74% were traditional/religious). However, marital satisfaction was not a predictor of their parental self-efficacy. This may mean that Jewish mothers develop their parental self-efficacy separately from their perception of marital satisfaction.

The nature of the Arab society as a collective society may also explain the findings of higher sense of wellbeing, less reported stress and higher parental self-efficacy among Arab mothers. This type of culture values mutual help and assistance between members. The emphasis is on interdependency between members, a sense of belonging to the group, obedience and conformity to social norms [31]. Arab culture is more communal than the individualistic dominant Israeli culture. Indeed, most Arab mothers in the study resided in rural areas, which means in close physical proximity to the extended family of the husband and in a community that shares the same values and norms. The mothers were thus able to rely on assistance from other members in their social environment with regard to their children and home chores. The mothers knew that, in times of need, they could turn to members of the community for help. Social connections provide "social insurance" and "social reassurance" for mothers. This may explain why Arab mothers felt more competent as parents in spite of the fact that they spent more time outside the home working to provide for their family (they worked more hours per week than Jewish mothers).

Analysis of the findings relating to the Jewish mothers offers an additional glimpse into the importance of culture in shaping parental self-efficacy. In contrast to Arab collective society, Jewish society is considered to be a liberal, modern, individualistic society which emphasizes the values of self-determination, self-agency, autonomy, freedom and independence of individuals [1]. At the same time, Israeli society celebrates the family as a central value, and despite the increasing individualism, has remained a highly familial society with a strong marriage culture [35]. This cultural duality, of individuality and self-reliance on the one hand, and high value accorded to the family on the other hand, may be complex and challenging for Jewish mothers. Jewish parents usually live independently of their family of origin and social

support and assistance is therefore not readily available. As a Western capitalistic society that emphasizes materiality and encourages high social and economic mobility, Jewish parents are under a lot of pressure to successfully parent their children and meet all their needs while, at the same time, providing for their family and achieving high economic status.

Individual parenting can be more challenging than collective parenting of the child. In this cultural context, parenting can be a source of stress. Indeed, the Jewish mothers in the study reported a higher degree of stress even though they worked less hours per week, had more part-time jobs than Arab mothers, and probably more time with their children, did not have more children than their counterparts, and received more financial support from their families. Marital satisfaction was not predictive of parental self-efficacy among Jewish mothers. The fact that, in the regression model, indicators of the family's financial condition mitigated the impact of stress and wellbeing on parental self-efficacy, to the degree that these variables were no longer significant when financial indicators were entered, attests to the importance attributed by Jewish mothers to their financial situation. However, the family's monthly income and the fact that the husband had an academic degree correlated negatively with the mother's parental self-efficacy. These findings may reflect a conflict in the experience of Jewish mothers in Israel and possibly most mothers in the Western world: the economic circumstance of the family diminished the mother's level of stress but, at the same time, indicators of a better financial situation correlated with lower parental self-efficacy. It seems that, on the one hand, the Jewish mothers were strongly influenced by their family's financial condition, which reflected on their sense of wellbeing and stress level but, on the other hand, the improved financial status brought its own problems: the mothers reported lower parental self-efficacy as their family income increased and when the spouse had an academic degree, which could indicate a more demanding job and less time spent with the family.

When comparing the two groups of mothers in the study, paradoxically, it seems that women enjoy more the roles of parenting and marriage in a patriarchal-oriented and traditional society than in a liberal, individualistic and more progressive society. A possible explanation is that gender roles and expectations are more distinct and clearer in Arab society [1]. Women know what is expected from them and the social norms they need to conform to, while enjoying extensive assistance from the husband's extended family [44]. There may be less disappointments in the marital relationship since the work division in and outside the family is clearly defined. In Jewish society, in contrast, the work division between the sexes is less clear and more negotiable, with every family forming its own routine, working procedures and management practices. This leaves more leeway for arguments, role ambiguity, misunderstanding, miscommunication, disappointments and frustration on each side. Furthermore, even in modern Israeli society, the mothers carry out most of the burden of taking care of the children and the household tasks, while also working outside the home. This trend characterizes not only Israeli Jewish society but most Western countries where the division of labor is still highly unequal, and family care continues to be shouldered primarily by women [34, 35]. Managing the dual and sometimes triple roles of mother, wife, student and, in many cases employee, can be challenging.

It could also be that, for the Arab mothers in the sample, the fact that they were students empowered them and they were more prepared psychologically to pay the price of having less time for personal needs and suffering greater pressure due to more intensive work outside the house. For Arab women, pursuing higher education in their traditional and patriarchal society, is considered a special achievement. Consequently, the pursuance of higher education would have been seen by Arab student mothers as an important goal that enhanced their sense of wellbeing and did not harm their parental self-efficacy. In contrast, the multi-various roles performed by Jewish student mothers may have weakened their parental self-capacity and belief that they could successfully perform on multiple fronts.

Another possible explanation relates to the level of religiosity of the two groups. Arab society in Israel is more religious than the larger Jewish society. Religion provides the individual with a sense of meaning and purpose in life. Interestingly, the Jewish mothers in the sample defined themselves as more religious than the Arab mothers, most of whom said they were secular or traditional. In Judaism, giving birth to many children is considered a commandment. It is possible that the religious Jewish mothers, in the sample, felt the pressure of their society to bear children and this pressure impacted on their parental self-efficacy. It should be noted that, although there was no significant difference in the number of children born by the two groups, the fact that the Jewish mothers knew they would be expected to have more children in the years to come may have exacerbated their level of stress, which was a predictive factor of their parental self-efficacy.

Another finding that merits attention relates to social support. There was no difference between the level of social support reported by the Jewish and Arab mothers and both scored high on the social support scale (5.33 and 4.9, respectively, on a 7-point scale) even though

the Arab mothers resided in rural villages, in physical proximity to the extended family of the husband, and the Jewish mothers resided mostly in cities. Given that Arab culture is considered to be more communal and, one would assume, provide a higher level of social support, the finding with regard to the Arab mothers is surprising. A possible explanation could be that the Arab mothers tended less to seek social support in order to avoid the social cost often associated with the greater involvement of the husband's extended family. It could signify the mothers' need to demonstrate their independence and ability to handle multiple roles. The level of reported social support supports this explanation: the Arab mothers reported a balanced level of social support, which was neither very high or low (an average of 4.9). The finding is also surprising regarding the Jewish mothers. Since they lived in urban cities, one would have assumed that social support would have been less available. The fact that they reported a similar level of social support as the Arab women could be because both groups, being students, received support from the social environment regardless of cultural differences. It should be noted, however, that the level of social support, in their case, did not impact their parental self-efficacy or help predict parental self-efficacy.

## 5 Implications

The findings demonstrate the importance of considering the cultural context of parenting to the sense of parental efficacy and the need to understand the cultural norms and values of individuals whose parenting capacity comes under assessment. The findings may provide direction for intervention with families from both Jewish and Arab cultures. As the findings show, different variables impacted the parental self-efficacy of the two groups. For Arab mothers, marital satisfaction was a prominent influencer on their sense of successful parenting, so that strengthening the spousal relationship could be very helpful in enhancing parental self-efficacy. Family therapy or spousal therapy may provide benefit to mothers who report a low level of parenting competence. Also, enhancing the mother's sense of wellbeing seems to positively impact on her sense of parental competence. For Jewish mothers, alleviating financial hardship and providing material help could provide similar benefits, in addition to lowering the mother's level of stress.

## 6 Limitations and future studies directions

Certain limitations should be considered when interpreting the findings of this study. The sample of Arab mothers may not be representative of mothers in the larger Arab population. The Arab mothers, in the sample, reported a higher family monthly income than the Jewish mothers, a fact that is not reflected in the larger Arab population. Approximately 85% of the Arab population is characterized by higher rates of poverty and unemployment than the Jewish population [22]. This may limit the applicability of the findings to this population. Similarly, the Jewish mothers, in the sample, reported being religious, a fact that does not represent the majority of mothers in the larger Israeli society, who are secular [32]. The study also did not examine differences between various ethnic groups within the Arab population. The Arab population comprises Muslims, Christians who are considered less traditional and more urbanized than their Muslim counterparts, and Druze, a very religious and conservative community that resides mainly in rural villages in northern Israel [43]. Because the latter two groups were a very small part of the sample (7.6% and 14.7%, respectively), we were unable to consider them separately and included them in the larger Arab group. Future studies with more representative samples of mothers, as well as studies that examine the differences between subgroups in Arab and Jewish societies in Israel will enrich our understanding of intergroup cultural variability and provide a more nuanced picture of parenting in differing contexts. In addition, the cross-sectional design of the study means that issues of causation could not be examined. Finally the data collected in the study relies on self-reported information, and this may affect the accuracy of the information provided by participants. Future studies that use additional data (e.g., official records) and measures (e.g., observation, ethnographic study tools) will be helpful in providing further information. Despite these limitations, this study is an important extension of the research in the field of parenting and, particularly, parental self-efficacy. It provides insight into the factors relevant to the experience of mothers from different ethnic and cultural backgrounds, and emphasizes the importance of culture in the individual's experience of parenting and the family. Understanding the cultural component of parenting will foster a better understanding of parents in the context of their lives.

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