INTRODUCTION TO THREE CROSS-REGIONAL RESEARCH STUDIES ON PARENTING STYLES, INDIVIDUATION, AND MENTAL HEALTH IN ARAB SOCIETIES

MARWAN DWAIRY
AFFILIATION?

MUSTAFA ACHOUI
King Fahd University for Petroleum and Minerals

This is a general introduction to the series of three articles that follows. The study intended to examine cross-regional differences concerning parenting styles, adolescent-family connectedness, and mental health in eight Arab societies. Three questionnaires were administered to 2,893 Arab adolescents in eight Arab societies: Parental Authority Questionnaire, Multigenerational Interconnectedness Scale, and Psychological State Scale. The results of the analysis are presented in the following reports. The strength of our study is in the size and diversity of the sample, whereas its limitation is that all the study results are based on adolescents' self-report. To validate our results, more research is needed using other measures such as parents' self-report and observations of parents and adolescents.

Keywords: parenting; connectedness; individuation; mental health; Arab; Muslim; culture; collective

The psychosocial development of children depends, of course, to a great extent on how they are raised by their parents. Thus, the psychological autonomy (or individuation), adolescent-parent relationship, and mental health of adolescents are all influenced by the parenting styles that were practiced by their parents. This relationship between parents' behavior and children's adjustment does not comprise a straightforward influence of parenting on children. Children's behavior and development influence parents' behavior, too, interacting with it. Culture affects these parenting styles and practices and child-parent relationships, because parents usually raise and deal with their children according to the values and norms endorsed in their own culture. In collective cultures and "tight" (Pelto, 1968) or "uncertainty avoidance" (Hofstede, 2001) cultures, parents tend to be more authoritarian and to emphasize obedience and adherence to behavioral patterns that advance the benefit and harmony of the collective. Parents in more liberal and individualistic cultures, on the other hand, tend to give more freedom to their children and encourage their individuality and separateness. In the following three cross-regional research studies, we examine the parenting styles of parents, adolescent-family connectedness, and their impact on the mental health of Arab adolescents.

This introduction to the special section concerns the three articles that follow, which are all based on one study. It explains the relationships between parenting styles, psychological autonomy, and mental health in Arab cultures or societies. Included is a general

description of the various Arab societies and the samples that were selected; in addition, the general hypothesis that guided our research is introduced.

CROSS-CULTURAL DIFFERENCES IN THE IMPACT OF PARENTING STYLES

Parental behavior and attitudes have been conceptualized in various ways. Baumrind (1966, 1991) suggested two orthogonal dimensions, high-low warmth and high-low control, and Schaefer (1965) suggested another two similar orthogonal dimensions (warmth-hostility and detachment-involvement). Rohner (1986, 1999) focused on the acceptance-rejection dimension and postulated a universal relationship between this dimension and children's psychological adjustment and personality. According to Rohner's parental acceptance-rejection theory, the perceived rejection is the major parental factor and is associated with several personality dispositions of children such as hostility, emotional unresponsiveness, dependency, self-esteem, self-adequacy, emotional instability, and negative worldview "regardless of culture, race, ethnicity, gender, socioeconomic status, and other such defining conditions" (Khaleque & Rohner, 2002, p. 87). In the literature on parenting, readers will encounter different overlapping and ill-defined concepts indicating authoritarianism such as controlling, strict, dominating, coercive, restrictive, regimenting, intrusive, interfering, demanding, and power asserting. At the other end, readers may find terms such as permissive, autonomy granting, indulgent, egalitarian, democratic, and laissez-faire (Rohner & Khaleque, 2003).

Authoritarian parenting in the West has been associated with damage to the mental health and well-being of children. Becker (1964) found that parental hostility and control tend to disrupt the conscience development of children's consciences and encourage aggressiveness and resistance to authority. More current research suggests that authoritarian parenting is associated with a variety of future addictions, problems in intimate relationships, depression, low self-esteem, low initiative, and difficulties in making decisions in adulthood (Baumrind, 1991; Bigner, 1994; Forward, 1989; Wenar, 1994; Whitfield, 1987). Authoritative parenting, on the other hand, which nurtures the children's skills and whose proponents exercise moderate control, is associated with high self-esteem, self-reliance, and self-control. The children raised in this style are secure, popular, and inquisitive (Buri, Louiselle, Misukanis, & Mueller, 1988; Wenar, 1994). These children manifest fewer psychological and behavioral problems than youth raised by authoritarian or permissive parents (Lamborn, Mants, Steinberg, & Dornbusch, 1991). (For review of parental discipline, see Maccoby and Martin, 1983).

Some research suggests that the influence of parenting styles may differ across ethnic groups (Dwairy, 2004a, 2004b; Hill, 1995 PLS. PROVIDE REFERENCE). Steinberg, Mounts, Lamborn, and Dornbusch (1994 OR 1991?) found that the authoritarian parenting style was more advantageous to Asian Americans than the authoritative style in terms of adjustment and academic performance. Leung, Lau, and Lam (1998) studied Chinese families in Hong Kong and the People's Republic of China and found that the authoritarian parenting style affected the achievement of the children positively, whereas the authoritative style had no effect on achievement.

Although parenting behaviors may be similar across cultures, the meaning attached to them and their influences on the child's mental health may differ. Randolph (1995) noted that authoritarian child-rearing practices may be valued in the African American community because they are associated with caring, love, respect, protection, and the benefit of the child. Tobin, Wu, & Davidson (1989) claimed that the concept of *guan* in Chinese means "to govern" and has very positive connotations of "caring for" and "loving." Chao

(1994, 1997) claimed that authoritarian parenting has a positive meaning for Chinese children, and therefore its impact may be positive. She described a Chinese parenting style called *chiao shun*—translated as "training"—which overlaps the Western authoritarian style but has a different meaning for Chinese parents and children. All these findings and observations question the universality of the Western parenting typology and its impact on children.

PARENTING AND PSYCHOLOGICAL AUTONOMY

Parenting styles and practices influence the psychological individuation and autonomy as well as the mental and social well-being of adolescents. Based on the Western literature, authoritarian parenting that is associated with psychological control does not foster psychological autonomy and holds back the development of adolescents' individuation. On the other hand, authoritative parenting that is associated with noncoercive and democratic parenting encourages the child to express individuality within the family. (Barber, 1996, 1997; Steinberg et al., 1991).

The meaning of autonomy and individuation varies from culture to culture. Western cultures consider psychological individuation to be the healthy route of development (Levy-Warren, 1996). Erick Erikson (1950) described a process that moves toward autonomy in the second stage of development (autonomy vs. shame) and continues until an independent (or interdependent) identity is crystallized (identity vs. role confusion stage) at the end of adolescence. From an object-relations perspective, Blos (1967) claimed that the process of separation-individuation is usually renewed in adolescence and leads to an individuated self in adulthood. Families that have difficulty developing psychological individuation among their children are described as "emotionally fused" by Bowen (1978) and "enmeshed families" by Minuchin (1974). Bowen asserts that the goal of development is to allow for the individual to use his or her intellectual capacity as fully as possible, unimpeded by conflicting pressures of family-sanctioning mechanisms (Berg-Cross, 2000).

Contrary to this positive attitude toward individuation in the West, the collective and authoritarian (tight or uncertainty-avoidant) culture does not appreciate autonomy but rather considers it a threat to the harmony of the collective. Normally, people in these societies are raised to relinquish their individuality and work together toward maintaining the collective way of life (Triandis, 1995). Individuality is therefore considered a kind of egoism, and is condemned (Dwairy, 1997). These theories do not only describe the psychological development of the individual but also indicate the Western cultural view of development and individuality. For further reading on the differences in the concept of the self in collective as compared to Western societies, see two special issues of the *Journal of Cross-Cultural Psychology*: Volume 29, Number 1, titled "Personality and Its Measurement in Cross-Cultural Perspective," and Volume 32, Number 5, titled "Culture and the Self-Enhancement Bias."

Alternatively to Western scholars, who consider authoritative parenting, individuation, and autonomy to be desired ends as opposed to authoritarian parenting, relatedness, and dependency, Kagitcibasi (1996, 2005) postulated that authoritarian or controlling parents can be warm parents too, and that autonomy and relatedness are two compatible human needs. She proposed a fourfold combination of two dimensions: autonomy-heteronomy and separation-relatedness. This combined model questions the linear dichotomy of each dimension and suggests four possible combinations that describe the individual and his or her family: autonomous and separated, autonomous and related, heteronomous and separated, and heteronomous and related. According to this model, relatedness does not necessarily mean relinquishing autonomy, but rather it can be found in a fully autonomous person. In addition, a

heteronymous (authoritarian and controlling) social system is not necessarily associated with relatedness, but rather in some people it can be associated with separateness. This model describes better the compatibility between control, training, and warmth that Chao (1994, 1997) talked about among Chinese.

To our knowledge, there are only a few studies in which the influence of parenting styles on individuation of Arab adolescents and on their mental health has been examined (Dwairy, 2004a, 2004b; Keshroud & Bu Sennah, 2004). The three studies that follow this introduction examine parenting styles, adolescent-parent connectedness, and adolescents' mental health in eight Arab societies.

THE ARAB SOCIETIES

Arab people live in 22 countries in North and East Africa and the Middle East. Compared to societies in the West, Arab societies tend to be collective and authoritarian. The family (extended and nuclear) is more important than the individual. Children grow up with values of loyalty to and respect for their families. The socialization of children relies very much on punishment to enforce values, norms, and behavioral manners. Many studies have found that an authoritarian or abusive socialization style is adopted toward Arab children (Achoui, 2003; Dwairy, 1997, 1998). Some reports indicate that physical and emotional abuse characterizes a widespread style of parenting in Egypt (Saif El-Deen, 2001), Bahrain (Al-Mahroos, 2001), Kuwait (Qasem, Mustafa, Kazem, & Shah, 1998), Jordan (Al-Shqerat & Al-Masri, 2001), and Morocco (Al-Kittani, 2000), especially among lower-class, uneducated parents and large or dysfunctional families. Along with the collective-authoritarian social system, Arab individuals possess a collective identity. The self is not completely individuated but rather the person continues to be enmeshed in the collective family identity. Self-concept is very much a reflection of family approval, and self-esteem is very much a reflection of the familial affiliation (Dwairy, 1997, 2002; Gregg, 2005).

During the past few decades, Arab countries have been experiencing a rapid and varying process of modernization and urbanization (Al-Kathem, 1999; Bu-Makhloof, 1999; United Nations Development Program, 2002). Their populations are exposed to Western individualistic-liberal culture, and Arab families are influenced by this exposure. The extent and means of exposure vary from one Arab country to another. Lebanon, for instance, is a more democratic and liberal country that seems to be absorbing the Western culture more than other Arab countries (Hallaq, 2001). Saudi Arabia, on the other hand, although wealthy and absorbing Western technology has remained more collective and authoritarian and seems to be discouraging Western influences on the people's social and political life. Some Arab societies were exposed to Western culture through occupation, such as that of the Palestinians who are living under the Israeli occupation that denies and threatens their identity and existence. Many other Arab countries were exposed years ago to Western culture during the imperialistic period in the 19th century and the first half of the 20th century, when many Arab countries were ruled by Western countries. Under these circumstances, many Arabs developed negative attitudes toward Western culture as part of their resistance and their need to preserve their own identity and culture. In accordance with this varying process of exposure, Arab families are influenced by two cultural frames of reference: the Arab-Muslim authoritarian-collective culture and the Western liberal-individualistic culture. This dual influence is assumed to have its impact on parenting. Some research studies found an ambivalent parenting style among Saudi Arabian parents that is a mix of the authoritarian and permissive styles (Al-Mutlaq, 1981; Hussain, 1987).

All research studies conducted in the Arab world concerning parenting and mental health were regional and therefore do not allow generalizations to be extended to other Arab countries; each used different measurements that do not allow comparisons to be made between the Arab societies. This series of research studies is the first cross-regional research concerning parenting styles in Arab families and their influence on individuation and mental health. It examines eight Arab countries (societies) and tests the effect of country, sex, birth order, urbanization, parents' education, and economic level on parenting styles.

PROCEDURE

These three studies were conducted by a group of Arab researchers from different Arab societies. The idea was established in the Middle East/North Africa Regional Conference of Psychology held in Dubai, December 13-18, 2003, by the International Union of Psychological Science, the International Association for Cross-Cultural Psychology, and the International Association of Applied Psychology. This conference highlighted the lack of cross-regional research in the Arab countries. The researchers decided to expand the local research that Dwairy (2004a, 2004b) had started on parenting and mental health among Arab youth in Israel to cover more Arab countries. They shared the administration of three questionnaires, each in his or her country, and the encoding of the data. The analysis and interpretation of the data and the writing of the articles were done in small teams, as presented in this series of articles.

TOOLS AND SAMPLE

Three questionnaires were administered to Arab adolescents in eight Arab societies: the Parental Authority Questionnaire (PAQ), a scale that measures three styles of parenting; the Multigenerational Interconnectedness Scale (MIS), a scale that measures adolescent-family connectedness; and the Psychological State Scale (PSS), which measures psychological states (see details in the following three studies). These questionnaires were validated and had been used previously among Arabs in Israel (see Dwairy, 2003, 2004a, 2004b).

The three questionnaires were administered in Saudi Arabia, Yemen, Egypt, Algeria, Jordan, Lebanon, the Palestinian occupied territories, and Israel to a sample of 3,022 rural and urban Arab adolescents in the 11th grade of school (16-17 years old). The administration was held at the schools and lasted for 50-60 min in each class. In accordance with most Arab countries' rules, the consent of the school inspector and/or the parents' committee was obtained. Participation was voluntary; however, there were no refusals. Some students (98 males and 31 females) did not complete all the questionnaires and were therefore excluded from the sample. The final sample consisted of 2,893 adolescents: 1,712 females and 1,181 males. The imbalance between males and females in the sample size may be attributed to the higher dropout rate of males in Arabic high schools. The sample comprised 1,217 rural and 1,676 urban adolescents. The rural adolescents lived in small villages with a population of less than 20,000, and the urban adolescents lived in cities inhabited by many tens of thousands of people (see Table 1).

In addition to the PAQ, MIS, and PSS, the students were asked to fill out a demographic questionnaire concerning their families. They were asked to rank the education of each of their parents on a scale where 1 = illiterate, 2 = completed elementary school, 3 = completed high school, 4 = attended an institution of higher education but did not receive a bachelor's

TABLE 1
Numbers of Participants According to Country, Urbanization, and Sex

Country	Sex	Rural	Urban	Total
Jordan	Female	90	97	187
	Male	80	68	148
	Total	170	165	335
Egypt	Female	88	124	212
	Male	92	47	139
	Total	180	171	351
Palestinian/Israel	Female	217	207	424
	Male	135	126	261
	Total	352	333	685
Palestine	Female	90	148	238
	Male	48	100	148
	Total	138	248	386
Algeria	Female	1	108	109
	Male	1	50	51
	Total	2	158	160
Lebanon	Female	78	65	143
	Male	36	45	81
	Total	114	110	224
Saudi Arabia	Female	80	151	231
	Male	22	145	167
	Total	102	296	398
Yemen	Female	79	89	168
	Male	80	106	186
	Total	159	195	354
Total	Female	723	989	1,712
	Male	494	687	1,181
	Total	1,217	1,676	2,893

degree, and 5 = earned a bachelor's degree and above. The mean score of the parents'
education was 3.00 in the rural areas and 3.35 in the urban areas. The mean of the number
of siblings in the family was 6.36 and 4.93 in the rural and urban areas, respectively. The
percentage of the participants who were the first-born children in their families was 31.3%
and 30.9% in the rural and urban samples, respectively, suggesting that the Arab societies
are more concerned with keeping their first-born children in high school than their other
children. The mean of the subjective rating (on a scale from 1 = low to 5 = high) of the fam-
ily economic level was 3.0 in the rural sample and 3.6 in the urban sample. To make sense
of this scaling, readers may need to know that the GDP per capita in the Arab countries is
within the range of US$3,000 to US$10,000 (based on Central Intelligence Agency Web site
www.reference-guides.com/cia_world_factbook retrieved November 2003).

GENERIC HYPOTHESES

Based on the cultural diversity within the Arab society, we hypothesized that we would find
significant differences between the eight Arab societies in parenting, individuation, and mental
health. Based on the cultural features of the Arab societies and on the cross-cultural research
findings concerning parenting, individuation, and mental health, we hypothesized that we
would find a minor negative effect of authoritarian parenting on adolescents' mental health.

More specific hypotheses and the results of our cross-regional research are presented in the following three studies. The first study examines the parenting styles according to country, urbanization, sex, birth order, and socioeconomic level of the family. The second study examines adolescent-family connectedness according to the same independent variables. The third one is an integrative one that examines the relationship between parenting styles, adolescent-family connectedness, and mental health of adolescents.

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Marwan Dwairy is an Arab-Palestinian professor of psychology. He is a licensed expert and supervisor in three areas: educational, medical, and developmental psychology. In addition, he is a licensed clinical psychologist. He received his B.A. and M.A. degrees in psychology from Haifa University, and his D.Sc. from the Faculty of Medicine at the Technion in 1991. He established in 1978 the first psychological
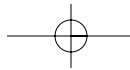
services center for Arabs in Nazareth, Israel. He continues to serve in his capacity as a supervisor in different psychological centers. Dr. Dwairy developed and standardized several psychological tests for Arabs. His forthcoming book (in press) is titled Culturally Sensitive Counseling and Psychotherapy: Working With Arabic and Muslim Clients *(New York: Teachers College Press).*

Mustapha M. Achoui is an associate professor in the Department of Management and Marketing, King Fahd University for Petroleum and Minerals. He has a Ph.D. in organizational communication from Rensselear Polytechnic Institute, Troy, New York. His research interest is in educational and organizational psychological issues such as parenting styles, leadership, and decision-making styles. He has published several books and articles in Arabic and English.