



A preliminary study of emotional and behavioral problems among Bedouin children living in ‘unrecognized villages’ in Southern Israel



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ABSTRACT

Aims: This study presents data on the emotional and behavioral problems of Bedouin children, the most underserved citizens of Israel.

Methods: 458 children aged 4 – 10 were rated by their mothers with the Strengths and Difficulties Questionnaire. Socio-demographic traits and children's exposure to traumatic events were recorded. Bedouin children were compared with independent samples of American, Chinese and Australian children.

Results: Boys had higher problems scores than girls. Bedouin children had higher problem scores than other children.

Conclusions: The higher problems scores of Bedouin children can be partly explained by their poverty, dire living conditions and consequent maternal distress.

1. Introduction

In 2012 the large minority of Palestinian Arab citizens in Israel constituted approximately 17% of the total Israeli population, with about 208,000 of them, mostly Bedouin, residing in the Negev in the Southern District (Central Bureau of Statistics [CBS], 2013). The Bedouins are the poorest Israeli citizens and their localities are classified in the lowest socio-economic clusters (Hesketh, 2011; Svirsky & Hason, 2005). About 37% of them live in 45 villages, each including between 500 and 5000 residents, whose existence is not officially recognized by the State of Israel. These unrecognized Bedouin villages are characterized by a scarcity of governmental provision of basic services, such as sewage, running water, educational institutions, primary care clinics, mental health facilities and public transportation, among others. Road infrastructure is deficient and this, together with old and defective vehicles, is related to the high numbers of road accidents and deaths that occur in the area. These dire conditions greatly impact the socio-economic status of the families. Among the Bedouin citizens living in these unrecognized localities 64.2% were classified in 2010 as living in poverty and among children aged between 4 and 10, who constitute nearly 40% of the population in these villages, 78.1% were classified as living in poverty (Sheikh Muhammad & Khatib, 2010). These unrecognized, widely dispersed Bedouin villages with their distinctly rural populations are defined by the Israeli government as “scattered settlements” and branded as illegal entities.

The Bedouin citizens, and in particular those living in unrecognized villages, suffer from high rates of unemployment and illiteracy, as compared with other Israeli population groups. Data presented to the Knesset Education Committee by Dr. El Haib, the Director of the Bedouin Education Department at the Israeli Ministry of Education, showed that nearly 5200 Bedouin children between the ages of 3 and 5 did not attend any preschool setting in 2015, and about 75% of them live in unrecognized villages. Among the reasons given for this were lack of access and public transportation and the lack of permits to build new schools or kindergartens in those localities (Ben Zichri, 2016). Thus, these children have their first contact with an educational setting at age 6, and are thus in a disadvantaged position vis-a-vis those who attend preschool settings and this further influences their employment chances in the future.

It is well-known that socio-economic constraints are likely to have an impact on the development and the needs of children (Costello, Farmer, Angold, Burns, & Erkanli, 1997; Scharte & Bolte, 2012). It has also been shown that children of socio-economic disadvantaged families are at higher risk for emotional and behavioral problems and have a higher prevalence of mental disorders than children of well-off families (Costello, Compton, Keeler, & Angold, 2003). A comprehensive study on the income-related variables that explain variance in children's cognitive, behavioral, social and emotional outcomes at age five, found home learning environment and maternal education to be two strong predictors of later functioning (Washbrook, 2010). It is

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highly probable that maternal stress due to economic hardship, as well as cultural constraints, serve as mediating factors that affect the mental health status of mothers, which, in turn, affects children (Ford, Goodman, & Meltzer, 2004).

The scarcity of all government services for this population is accompanied by a dearth of research about the health and educational needs of Bedouin children. One of the few studies carried out among Bedouin elementary school children living in government-recognized towns and villages in Israel found that these children had higher levels of internalizing problems, particularly anxiety and depression than American children (Auerbach, Godstein, & Elbedour, 2000).

Studies that have focused on the effect of polygamy, which is prevalent in this population, show that Arab Bedouin women who live in polygamous families suffer from lower self-image and higher rates of fear, anxiety, depression and somatic symptoms compared with women in monogamous families, and also suffer from more functional problems and less life satisfaction (Al-Krenawi & Slonim-Nevo, 2008). These symptoms have negative effects on their children, who report more mental distress, social difficulties, externalizing problems, school dropout, low achievement and more conflict with parents (Al-Krenawi & Slonim-Nevo, 2002; Elbedour, Onwuegbuzie, Caridin, & Abu-Saad, 2002).

Given the unique conditions of Bedouin children living in unrecognized villages, even if normative data for the general Israeli population of children in this age group were available, national estimates of mental health problems could not be straightforwardly generalized to these underserved children. However, in order to have a measure of the distress of these children in a broader perspective, comparisons are needed. Cross-cultural and cross-national comparisons of emotional and behavioral problems in children and adolescents have been made possible by the design and widespread use of measurement instruments that are considered to be relatively culture-free, as is the Strengths and Difficulties Questionnaire (SDQ) (Goodman, 1999). Four studies were found that could serve as comparison for our population group as they assessed emotional and behavioral problems among children in the same age group and with the same instrument: one in the USA (Bourdon, Goodman, Rae, Simpson, and Koretz, 2005), one in China (Du, Kou, & Coghill, 2008) and two in Australia (Hawes & Dadds, 2004). Unfortunately, no means and standard deviations for the SDQ scales for this age group were found in studies carried out in Arabic speaking countries nor in the Gaza Strip, where children were assessed with the SDQ and valuable psychometric traits were provided but the results did not include normative data (Thabet, Stretch, & Vostanis, 2000).

The purpose of this paper is to present the findings of this first attempt to assess the emotional and behavioral problems of 4–10 year old Bedouin children living in unrecognized villages in Southern Israel, according to their mothers' ratings, and their association with selected socio-demographic and family factors and with particular stressful life events. As well, we will attempt to compare these Bedouin children to same-aged children in other countries. Bringing attention to this particular population group and providing data is a first step that will be of great assistance to policy makers when preparing preventive measures and planning the promotion of strategies to improve and promote the mental health status of those children.

2. Materials and methods

2.1. The study population and sampling frame

There are 45 unrecognized Bedouin villages in southern Israel. Twenty one of them have more than 300 families and our sampling frame included only them. They were ordered according to their identification number, assigned by the RIKAZ Databank on the Palestinian Community in Israel in 2004 (Sheikh Muhammad & Khatib, 2010). Four of these 21 villages were chosen randomly, through a computer program, to participate in the study.

2.2. Characteristics of the study population

The study was carried out in the 4 villages between April and May, 2012. All families that had a child between the ages of 4 and 10 were visited and mothers were asked to rate each one of their children in that age group according to the SDQ. Four female interviewers participated in the data collection. In total, 205 mothers scored 458 children. Table 1 shows the socio-demographic characteristics of the children and their families. The average age of the children was 6.9 years with a range of 4–10, though for 13 children data regarding age was incomplete. There were slightly more males than females in the sample. As expected in this population, families were large with only 9% having 3 or less children, 31.4% having 4 or 5 children and 57% having 6 or more children. Fathers in one third of families practiced polygamy and had more than one wife. Among fathers, 36.1% had little or no education and 21.8% had a high school diploma or some post high school education. Among mothers, 51.3% had little or no education and 4.6% had a high school diploma or some post high school education. Thirty percent of the children were in preschool, 5.2% were not attending school, for 4.6% data was incomplete and the rest were attending grammar school. Regarding employment, 69% of fathers had worked in the previous month and 6.8% of mothers had as well. It is known that most mothers in this population group do not work out of the home, due partly to lack of employment opportunities nearby and lack of good transportation.

2.3. Response rates

Eleven mothers refused to participate in the study, yielding a response rate of 95%. The high response rate can be explained by the fact that mothers were easily located at home and were glad to have the opportunity to speak about their children and their problems with the interviewer. Other studies have also found high response rates among the Palestinian Arabs in Israel (Mansbach-Kleinfeld, et al., 2010b).

2.4. Measurements and instruments

Mothers provided information on number of children, maternal education, employment status of the father and whether they were part of a polygamous family. They were also asked whether their child had been exposed to a traumatic event such as a road accident, other kind of accident, a home demolition by the authorities due to lack of building permits, a natural disaster, violence in the family, a death of a close family member, an attack by police, or had been exposed to an attack by a family member or a stranger. In addition, mothers were asked to rate each one of their 4–10 year old children with the SDQ, a multi-informant screening measure designed to detect mental health problems in children and adolescents (Goodman, 1999). The SDQ has a parent-report form and a teacher-report form for children below 11 years of age. The SDQ is designed so that children below 11 years of age are not directly interviewed. The tool is being increasingly used in community and clinical settings and in cross-cultural research thanks to its brevity, accessibility and availability in the public domain (<http://www.sdqinfo.com>).

The SDQ's validity and reliability and its predictive power across cultures, languages and socio-economic backgrounds are supported by studies carried out in diverse settings, among them Arabic speaking communities (Alyahri & Goodman, 2006; Goodman, 2001; Mansbach-Kleinfeld, Apter, Farbstain, Levine, & Ponizovsky, 2010a; Vostanis, 2006). Most of them reported Cronbach α coefficients above .70 for the Total Difficulties score (TDS), but low coefficients for the Conduct (Koskelainen, Sourander, & Vauras, 2001), and Peer Problems scales (Goodman, 2001).

Structural validity of the SDQ varies, with some studies supporting the original 5-factor structure (Hawes & Dadds, 2004; Woerner, Becker, & Rothenberger, 2004), and others showing different patterns. (Koskelainen et al., 2001; Muris, Meesters, & Van Den Berg, 2003; Thabet et al., 2000). Concurrent validity has been generally supported (Goodman & Scott,

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