ATTITUDES OF ARABS IN ISRAEL TOWARD HELP SEEKING, GIVEN LEVELS OF
CULTURAL MISTRUST AND ETHNICITY OF HELP PROVIDER

A DISSERTATION
SUBMITTED TO THE GRADUATE SCHOOL
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE DEGREE
DOCTOR OF PHILOSOPHY
BY
JAMALAT DAOUD
DISSERTATION ADVISOR: DR. CHARLENE ALEXANDER

BALL STATE UNIVERSITY
MUNCIE, INDIANA
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MUNCIE, INDIANA

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Abstract

This study was designed to explore the relationship between attitudes toward help seeking, the ethnicity of the psychological help provider, and the level of cultural mistrust toward Jews. A sample of 102 Israeli Arab undergraduate students from Haifa, Israel, participated in this study. It was hypothesized that attitudes toward help seeking, as measured by Attitudes Toward Seeking Professional Psychological Help-Short Form (ATSPPH-S) and the Beliefs About Psychological Services (BAPS), will be related to the ethnicity of the psychological help provider and to the level of cultural mistrust toward Jews. A 2 x 2 between subjects multivariate analysis of variance (MANOVA) was employed. No significant relationship was found between attitudes toward help seeking, the ethnicity of the psychological help provider, and the level of cultural mistrust toward Jews. However, ANOVAs revealed that Freshmen had more favorable attitudes toward seeking professional psychological help as measured by ATSPPH-S than fourth and fifth year students and that sophomores had more favorable attitudes toward seeking psychological help as measured by BAPS than fourth and fifth year students. The results of the logistic regression indicated that Muslim and Christian participants are three times more likely to choose an Arab help provider than Druze participants. Further, the probability of choosing an Arab psychological help provider increased significantly as the participant’s level of cultural mistrust, in the domains of Politics and Law and Interpersonal Relations increased. On the other hand, the probability of choosing an Arab psychological help provider decreased significantly when participants had previous psychological help, and when their level of cultural mistrust increased in the domain of Business and Work. Results indicated strong significant correlations between attitudes toward help seeking and variables such as father’s highest level of education,
previous psychological help, age, and year in school. Significant correlations between beliefs about psychological help and year in school and gender were found. The level of cultural mistrust correlated significantly with religion, ethnicity of psychological help provider, previous psychological help, age, and gender. Limitations and implications for future research and practice are presented.
Chapter 1: Introduction

The Effectiveness of Psychotherapy

Psychotherapy is a growing field that has proven to be largely beneficial. For example, one meta-analytic review conducted by Smith, Glass, and Miller (1980) included 475 studies that compared treatment groups and control groups. The results of this review concluded that the average person who received treatment did better than 80% of participants in the control group who received no treatment. Another study conducted by Lipsey and Wilson (1993) reviewed 156 meta-analyses of psychological, educational, and behavioral treatment interventions. The review of these analyses concluded that each treatment intervention had positive effects on participants’ psychological well-being. Lambert and Ogles (2004) reviewed 26 meta-analyses that included 415 studies of various treatments with patients suffering from depressive disorders. The majority of these studies support the findings that psychotherapy is more efficacious than either no treatment or wait-list control groups. Similar findings were also reported in a meta-analysis of over 1000 studies employing various treatment modalities for anxiety disorders.

Not only has psychotherapy proven to be effective with adults, it was found to be effective with children and adolescents, as well. Eder and Whiston (2006) reviewed several meta-analyses that assessed the effectiveness of psychotherapy with children and adolescents. One of these meta-analyses was conducted by Casey and Berman (1985) on 75 studies. They examined the effectiveness of different types of psychotherapy with children and adolescents ranging in age from 3 to 15 years old and with various types of clinical problems. They found an average effect size of .71, which indicates the superiority of the treatment groups over the control groups on outcome measures such as social adjustment, global adjustment, achievement, and cognitive
skills. Stage and Quiroz (1997) conducted another meta-analysis on 99 studies, which pointed to the effectiveness of psychotherapy with children and adolescents. They studied the effectiveness of school based interventions in decreasing disruptive classroom behaviors. They detected an effect size of -0.78 (a negative effect size), which indicates that the disruptive behaviors decreased with the delivery of treatment. The preponderance of the data suggest that psychotherapy is effective across a wide range of mental disorders and with adults, adolescents, and children. However, therapy can be harmful in some cases. For example, Kozuki and Kennedy (2004) found that treatments conducted by Western therapists with Japanese clients using Psychodynamic psychotherapy were ineffective. The researchers found that the treatments caused misdiagnosis, labeling, and further harm to the clients as a result of misunderstandings and ignorant practices that did not take into consideration cultural differences. Therefore, psychotherapy should be conducted with caution and with consideration to many factors including culture. Researchers further explored the question of whether one form of psychotherapy is superior to another.

**Effectiveness of Various Psychotherapy Modalities**

When addressing the question of whether one form of psychotherapy is superior to another, the *Dodo bird effect* emerges. This effect refers to the Dodo bird verdict in Alice in Wonderland: “Everyone has won and all must have prizes” (Lambert & Ogles, 2004, p. 161). Wampold, Mondin, Moody, Stich, Benson, and Ahn (1997) conducted a meta-analysis on studies that compared various psychotherapies. They found that the effect sizes of the different treatments were closely distributed around 0, which supports the hypothesis of the Dodo bird, namely that all psychotherapies that have outcome data are equivalently good. Similarly, a more
recent study by Lambert and Archer (2006) found that regardless of the therapeutic orientation of the clinician, psychological treatment is effective for a wide range of mental health problems.

**Utilization of Psychotherapy**

In spite of the broad evidence that psychotherapy is effective in treating a wide range of mental disorders, the literature also indicates that psychotherapy services are underutilized by sub-sections of the public. According to the National Institute of Mental Health (2001c), 20% of adults in the United States of America will suffer from a psychological disorder in any given six months period. Howard, Cornille, Lyons, Vessey, Lueger, and Saunders (1996) utilized data from the Epidemiologic Catchment Area (ECA) survey and found that only 13% of individuals who suffered from a mental disorder sought help from a mental health professional, and more than 70% of these individuals did not receive any type of services whatsoever. Similarly, Andrews, Henderson, and Hall (2001) surveyed an Australian sample of 10,641 adults. They used the Composite International Diagnostic Interview (CIDI) and tools such as the ICD-10, the DSM-IV, and screening questions to diagnose participants. They found that according to the DSM-IV, 20.3% of the sample met criteria for some mental disorder in the past 12 months. Participants were asked whether they have seen anyone for their mental health problem during the past 12 months. They found that 65% of the participants who were diagnosed with a mental disorder did not consult anybody about their mental problem, and only 35% sought consultation for their mental problem. Of all the individuals who were diagnosed with mental disorders and who sought consultation, 75% sought help from a family physician. Half of those sought help solely from their family physician, and the other half saw a family physician in addition to a mental health professional such as a psychiatrist and a psychologist. Only a small percentage
(about a quarter) of those who were diagnosed with a mental disorder sought care primarily from a mental health professional.

**Minorities and Utilization of Psychotherapy**

Ethnic minorities in the United States have been known to underutilize mental health services compared to the majority population (U.S. Department of Health and Human Services, 2001). Temkin-Greener and Clark (1988) examined gender and ethnic differences in the utilization of mental health services in a Medicaid population in Monroe County, New York. They found that Whites utilized both the ambulatory mental health services and the ambulatory psychiatric services more than non-Whites.

Utilization rates of psychological services in the Arab world are even lower than those in many Western countries (Savaya, 1998). Additionally, the rates of early termination are also higher in the Arab world compared to those in Western countries (Savaya, 1995). Similar patterns of psychological underutilization rates within United States minorities can also be found within the Arab community in Israel. This underutilization rate was revealed in a national study conducted by the Israeli Ministry of Health (Feinson, Popper, & Handelsman, 1992). According to this study, only 0.5 per 1000 Arabs in Israel utilize mental health ambulatory services, whereas 3.3 per 1000 Israeli Jews utilize these services (Feinson et al., 1992). Other evidence of the underutilization of professional psychological services by Arabs in Israel is documented by the Human Rights Watch Report (2001). This report indicates that whereas 63% of Jewish schools in Israel receive educational counseling, only 32% of Arab schools in Israel receive this service. Similarly, the report shows that whereas 82% of Jewish schools in Israel provide psychological counseling, only 38% of the Arab schools in Israel provide psychological counseling. A more recent study conducted on both Jewish and Arab participants from Israel
indicated that although Arabs in Israel need psychological services, they still underutilize psychological services (Levav, Al-Krenawi, Ifrah, Geraisy, Grinshpoon, Khwaled, & Levinson, 2007). Levav et al. (2007) recruited close to 5,000 Arab and Jewish participants. They used the 12-item General Health Questionnaire (GHQ-12) to assess for psychiatric disorder and emotional distress. Additionally, they used the World Mental Health Composite International Diagnostic Interview (WHO CIDI) Survey to assess the prevalence of various disorders according to the ICD-10 and to the DSM-IV. Participants were also asked about their use of mental health services. “Arab-Israelis” scored significantly higher than their Jewish counterparts on the GHQ-12, indicating higher levels of emotional distress. The 12-month prevalence rates of affective disorders among “Arab-Israelis” were higher than those for their Jewish counterparts; however, the differences were not significant ($p = .06$). Findings of the study also showed that among the participants who had anxiety or affective disorders in the last 12 months, in comparison to the Arab participants, a considerably higher number of Jewish participants sought medical or psychiatric help albeit the finding of higher levels of emotional distress and higher rates of affective disorders among Arabs.

**Factors that Affect Help Seeking**

There are various reasons for not seeking professional psychological help by those who need this help. Clarkin and Levy (2004) summarize various factors that affect help seeking behavior. These factors are: 1) emotional distress, with those who are more distressed seeking help more frequently than others; 2) psychological symptoms and poor mental health, those who show psychological symptoms and who consider their mental health to be poor have a tendency to seek help more than others; 3) gender, as females are usually more likely to seek professional help and informal support; 4) age, as younger individuals were found to seek help more often
than the elderly; and 5) intensity of stressors and lack of social support, as those who experience stressors more intensely and who receive less social support tend to seek more psychological help. In addition to these reasons which influence the individual’s decision to seek professional psychological help, attitudes towards seeking professional psychological help have been identified as strong factors that influence one’s decision to seek this help. Kushner and Sher (1989) categorized factors that influence the individual’s help seeking behavior into approach and avoidance factors. Negative attitudes about mental health are one of the avoidance factors identified by Kushner and Sher (1989). Attitudes in general have been identified as important elements in an individual’s intention to perform an action, and since intentions can be the immediate antecedents to behavior, attitudes, then are important in predicting behavior (Ajzen, 1985).

**The Reasoned Action Theory**

According to the reasoned action theory (Ajzen, 1985), behavior, in general, is determined by intention unless unexpected events arise. Intentions are determined by two factors. The first factor is personal and it is the individual’s attitude toward the behavior. An attitude toward a behavior is an evaluation of carrying out the behavior. This evaluation can be either positive or negative. The second factor that determines intentions is a social one and it is the subjective norm. Subjective norms are the perception of the individual of what important others think regarding the action in question; in other words, subjective norms refer to whether the individual thinks that important others think he or she should or should not perform a certain action. According to the theory of the reasoned action, people in general would perform an action if they have a positive attitude about this action and if they think that important others also want them to perform that action. The relative importance of the attitudes and of the subjective
norms in determining the intentions differ depending on the intention in question and on the person. Symbolically, the theory of reasoned action can be summarized as follows:

\[ B \sim I \{w_1A_B + w_2SN\} \]

The equation above means that behavior (B) can be predicted from intentions (I) unless intentions have changed prior to performing the behavior. Intentions themselves are determined by attitudes toward the behavior (AB) and the subjective norm regarding the behavior in question (SN). Parameters \( w_1 \) and \( w_2 \) reflect the relative importance of the attitude toward the behavior and the subjective norm regarding the behavior respectively.

Van den Putte (1991, as cited in Ajzen, 1996) conducted a meta-analysis study on 150 data sets from studies related to the theory of reasoned action between 1969 and 1989. The results of the meta-analysis study show a strong positive correlation between attitudes and intentions and a strong positive correlation between intentions and behavior, which leads to the finding that attitudes are strongly related to behavior, as well. In other words, attitudes can predict behavior.

**Attitudes towards Help Seeking**

Since attitudes play an important role in determining one’s intention to perform a certain behavior and since intentions usually predict behaviors, it is plausible to assume that attitudes towards seeking psychological professional help play an important role in determining an individual’s intention to seek help, and this intention in turn determines whether or not the individual will seek professional psychological help. Studying the attitudes of the Arab population in Israel toward seeking professional psychological help is therefore important given the underutilization documented by the Israeli Ministry of Health (Feinson, Popper, & Handelsman, 1992) and by other studies (e.g., Levav et al., 2007).
Kelly and Achter (1995) studied 257 undergraduate students from the United States and found that attitudes toward help seeking were a significant predictor of the help seeking intentions of those students; they found a positive correlation between attitudes and intentions to seek help. Similar results were found by Deane and Todd (1996), who studied 107 older university students from the United States whose mean age was 40 years. The students indicated their attitudes toward seeking psychological help if they had a personal-emotional problem or if they had suicidal thoughts using the Attitudes Toward Seeking Professional Psychological Help Scale (ATSPPHS). This study reported a positive correlation between attitudes and intentions to seek professional psychological help. Those who had more positive attitudes toward seeking professional psychological help also indicated a higher likelihood to seek such help.

Whereas a considerable amount of studies have examined attitudes of different population groups toward seeking professional psychological help, only few studies have been conducted for the purpose of exploring the attitudes of Arabs in Israel toward seeking professional psychological help. For example, Al-Krenawi, Graham, Dean, and Eltaiba (2004) compared the attitudes toward mental health treatment among Muslim Arab undergraduate female students from Jordan, the United Arab Emirates, and Israel. They found that variables such as age, educational attainment, and marital status strongly influenced the participants’ attitudes toward help seeking. Participants aged 21 and above had more positive attitudes than younger participants. Married women had more positive attitudes toward seeking psychological help than single women. Finally, students in the third year of college and above had more positive attitudes than students in the first and second year of college.

In spite of the importance of Al-Krenawi, et al.’s (2004) study, some limitations were identified. Specifically, the sample used in Al-Krenawi, et al.’s study consisted solely of
women. This limitation makes it difficult to generalize the findings of the study to Arab males. This is important to investigate given that women’s attitudes in the United States toward seeking psychological help differ from those of males in the United States (Fischer & Turner, 1970; Kelly & Achter, 1995). Subsequently, the present study aims at using a more representative sample of both male and female Arab participants.

Since the Arab population in Israel is in strong need of psychological services (Savaya, 1998), it is important to explore their attitudes toward seeking professional help. Identifying the attitudes of this population toward seeking professional help is a necessary first step toward increasing the utilization of psychological services. Determining whether or not Israeli Arab men and women have negative attitudes toward seeking professional help, can determine their underutilization of mental health services. Thus, identifying negative attitudes toward seeking professional help will assist psychological help providers who work with Arabs in Israel in planning strategies to circumvent and/or avoid the negative attitudes among this population (Savaya, 1997).

**Purpose of the Study**

The present study will explore whether the client-psychological help provider dyad accounts for the underutilization of mental health services within the Arab population in Israel. Finally, this study will explore whether there is a relationship between the historical cultural mistrust of Arabs toward Jews and their attitudes toward help seeking from a Jewish psychological help provider. The last question of the present study has not been explored in previous studies, and the expectation is that the answer to these questions will shed light on the problem of underutilization of mental health services among the Arab population in Israel and
will eventually allow scholars and professionals to remedy the factors contributing to this problem.

The current study is designed to compare the attitudes of Arabs in Israel toward seeking professional psychological help when the help provider is Arab and when the help provider is Jewish. Given the tremendous lack of psychological services in the Arab sector in Israel, investigating the attitudes of this population toward help seeking and finding out whether the ethnicity of the help provider plays a role in determining their attitudes is important. If the results show that the ethnicity of the professional psychological help provider (Arab or Jew) influences the attitudes toward seeking help then recommendations can be made to increase the utilization of psychological services by Arabs in Israel accordingly.

**Hypotheses**

The following hypotheses were tested:

1.a. There will be a relationship between the attitudes and beliefs of Arabs in Israel toward seeking psychological help and the ethnicity of the psychological help provider such that when the psychological help provider’s ethnicity is Arab, the attitudes and beliefs of Arabs in Israel will be more favorable toward seeking professional psychological help.

1.b. When the psychological help provider’s ethnicity is Jewish, the attitudes and beliefs of Arabs in Israel will be less favorable toward seeking professional psychological help.

2.a. There will be a relationship between the level of cultural mistrust of the participants and their attitudes and beliefs toward seeking professional psychological help from a Jewish psychological help provider.
2.b. As the level of cultural mistrust increases, the attitudes and beliefs of the participants toward seeking professional psychological help from a Jewish psychological help provider will be less favorable.

Summary

Numerous studies indicate that psychotherapy is effective and beneficial for the psychological well being of those who receive it. This has been found true across a wide range of mental disorders and for different age groups. Moreover, research shows that all psychotherapies are equivalently good. In spite of the broad evidence on the effectiveness of psychotherapy, the general public has underutilized it. This underutilization is especially prominent among minorities in the United States. Research has indicated a need for psychological help among the Arab minority in Israel. In spite of this need, research shows underutilization of psychological services among this minority. There are various factors that affect seeking psychological help when needing it such as: Emotional distress, psychological symptoms and poor mental health, gender, age, and intensity of stressors and lack of social support. Attitudes have been identified as important factors that influence one’s decision to seek help. According to the reasoned action theory, behavior is determined by intention, and this in turn, is determined by one’s attitude and subjective norm. Therefore, attitudes toward help seeking are supposed to influence their intentions to seek help and eventually to actually seek that help. Research has shown a significant relationship between attitudes toward help seeking and intentions to seek help. Only a small number of studies have been conducted on attitudes toward help seeking among Arabs in Israel. These have limitations that make it difficult to generalize them to the Arab population in Israel. The present study will explore whether the ethnicity of the psychological help provider influences the attitudes of Arabs in Israel toward help seeking. Additionally, the present study
will explore whether the cultural mistrust of Arabs toward Jews influences their attitudes toward help seeking. These questions are intended to provide information about the reasons behind underutilization of psychological services among Arabs in Israel. This information, eventually, may help find ways to eradicate barriers to help seeking.
Chapter 2: Literature Review

In order to understand the attitudes of Arabs in Israel toward seeking mental health services, it is first important to understand history and culture of Arabs in Israel. This chapter will first introduce the complex history and culture of Arabs in general, followed by that of Arabs in Israel, and their relationships with Jews in Israel. This review is essential since sociopolitical factors and culture are among the variables that have been identified as important for enhancing the effectiveness of cross-cultural counseling (Sue & Sue, 1990). Next is a review of the literature on attitudes towards mental health services in the United States in general and also amongst Arabs.

Definition of Terms

Attitudes. According to the Merriam Webster dictionary (2002), one of the definitions of an attitude is a “behavior representative of feeling or conviction” (p.141). According to Forsyth (1995), attitudes go beyond simple liking or disliking. He contends that attitudes combine feelings, cognitions, and behaviors, and these components influence each other. In addition, changes in one of these components may lead to changes in the whole attitude. In this study, attitudes will be measured by the Attitudes Toward Seeking Professional Psychological Help-Short Form (ATSPPH-S) and by the Beliefs About Psychological Services (BAPS).

Ethnicity. Yinger (1976) defines an ethnic group as

A segment of the larger society whose members are thought, by themselves and/or others, to have a common origin and to share important segments of a common culture and who, in addition, participate in shared activities in which the common origin and culture are significant ingredients.

(p. 200)
Baruth and Manning (2007) define ethnicity as follows:

An ethnic group is a culturally distinct population whose members share a collective identity and a common heritage… Characteristics associated with ethnicity include (1) a shared group image and sense of identity derived from values, behaviors, beliefs, communication, and historical perspectives, (2) shared political, social, and economic interests; and (3) shared involuntary membership with a specific ethnic group. (pp. 7-8)

**Culture.** Baruth and Manning (2007) define culture as

… institutions, communication, values, religions, genders, sexual orientations, disabilities, thinking, artistic expressions, and social and interpersonal relationships. (p.6)

**Cultural mistrust.** Cultural mistrust was originally defined as the tendency of Blacks to mistrust Whites and their organizations (Terrell & Terrell, 1981). In the present study, cultural mistrust is the tendency of Arabs to mistrust Jews and their organizations. This mistrust results from direct or vicarious racism or unfair treatment by Jews. Cultural mistrust is usually manifested in four areas: 1) educational and training settings; 2) political and legal system; 3) work and business interactions; and 4) interpersonal and social interactions (Terrell & Terrell, 1981).

**History and Culture of Arabs in Israel**

**Arabs.** The Britannica Encyclopedia defines an Arab as an individual who speaks Arabic as his or her native language. In addition to speaking Arabic, others define an Arab as a member of a Semitic people who originated in the Arabian Peninsula and the surrounding territories and who mainly inhabits the Middle East and North Africa. Arabs number about 285 million and live in 22 Arab countries (Dwairy, 2006). The Arab countries are Saudi Arabia, Kuwait, Bahrain, Qatar, United Arab Emirates, Oman, Yemen, Jordan, Iraq, Syria, Lebanon, Palestine, Egypt, Sudan, Libya, Tunisia, Algeria, Morocco, Mauritania, Djibouti, Comoros, and Somalia.
Many mistakenly confuse Arab and Muslim as synonymous whereas in fact they are not. There are over one billion Muslims around the world; of these, about 20% are Arabs (Zahr & Hattar-Pollara, 1998). Whereas most Arabs are Muslim, a minority of Arabs are Christian, and they live in Egypt, Lebanon, Syria, Jordan, and Palestine (Dwairy, 2006).

**Characteristics of the Arab/Muslim Society**

Both the Arab and the Muslim worlds are characterized by being collectivistic and authoritarian. The individual does not maintain a high degree of freedom in his or her private choices, as he or she is often submissive to both the cultural and Islamic rules. In addition, the male is dominant and the family or tribe is central in the Arab and Muslim society (United Nations Development Program [UNDP], 2002). Among the indicators of perceived maturity of an Arab or Muslim individual are loyalty to his or her family, conformity to norms and values of the society, and emotional interdependence (Dwairy, 2006, p.80). Individuals in Arab society maintain an interdependent relationship with their families (Dwairy, 2006). The family is responsible for providing services to the individual such as education, housing, and financial support if needed. According to Triandis (1990), financial self-sufficiency contributes to the independence of individuals from their families. The Arab Human Development Report of the United Nations (UNDP, 2002) states that Arab countries’ share of poverty is the biggest in the world. Therefore, the interdependence between the individual and his or her family within Arab society may be reinforced by their financial need.

Traditional Arab families are hierarchical, with males and older members of the extended family at the top of the hierarchy (Timimi, 1995). According to Timimi (1995), fathers in Arab families are the heads of the family whose duty is to “win the bread”(bring money), discipline,
keep the family united, and save the order, honor, and social standing of the family. Mothers in Arab families, on the other hand, act as mediators between the father and the children.

The family is considered more important than the individual, and thus adolescents are expected to adjust their aspirations in a way that does not conflict with the family’s expectations (Timimi, 1995). Similarly, for Arabs, friends are more important than the schedules and deadlines of the individual, because they are affiliative; thus, Arabs raise their children toward interdependence (Timimi, 1995).

Despite their political status as a minority in Israel, Arabs in Israel are considered part of the Arab and Islamic world, as they share many traditions, culture, language, and religion, among other elements. The following is a brief review of Israel, its history, geographic and demographic characteristics, and a synopsis about Arabs in Israel.

**Israel: Overview of the Country**

**History.** Israel, which used to be Palestine, was ruled by the Ottoman Empire for four centuries until 1917, after which the British Mandate ruled until the establishment of the state of Israel in 1948 (HRW, 2001). The United Nations suggested partitioning the land of Palestine into two states: Israel and Palestine. Arabs rejected this suggestion (Central Intelligence Agency [CIA], 2008). Subsequently, Israel was involved in a series of wars with the Arabs and occupied more Arab land. Israel signed a Peace Treaty with Egypt in 1979 and withdrew from Sinai in 1982 (CIA, 2008). Israel occupied Southern Lebanon in 1982 but withdrew unilaterally in 2000. Israel signed a Peace treaty with Jordan in 1994.

The establishment of the state of Israel in 1948 caused traumas to Arabs in Israel who became a minority; Arabs in Israel lost land and lives; some families were separated, others were relocated, and yet others became refugees in other countries (Gelkopf, Solomon, Berger,
Bleich, 2008). In 1987, Palestinians in the West Bank and Gaza Strip began riots known as the *Intifada* (meaning ‘shaking off’ in Arabic) (Safra & Aguilar-Cauz, 2007), which continued until the early 1990s when Israel and the Palestinians began talks in Madrid (CIA, 2008). In 1993, Israel signed the Oslo Accords with the Palestinians, which stipulated that the Palestinians receive self-government in the West Bank and Gaza Strip. The agreements of Oslo, however, were not fully implemented and later talks between Israel and the Palestinians in 2000 failed (Safra & Aguilar-Cauz, 2007). These circumstances, followed by the visit to the Temple Mount of Ariel Sharon, the Likud party leader, started another *Intifada* in the occupied territories (Safra & Aguilar-Cauz, 2007). In 2005, Israel withdrew unilaterally from Gaza Strip (CIA, 2008).

Arabs in Israel have lived in what is now called the state of Israel for centuries (Britannica Encyclopedia, 2007) as a majority prior to the establishment of the state of Israel in 1948 (Rekhess, 2007). Currently, Israeli Jews constitute the majority of the population in Israel. Most of the Israeli Jewish population is composed of immigrants from Europe, Africa, Asia, and from America and Oceania. Between the years 1948 and 2005, about 3 million immigrants arrived in Israel from these continents, and the majority of them (1,801,530) arrived from Europe (MFA, 2007).

**Geographic and demographic characteristics.** Israel’s area is 20,770 sq. km, which is slightly smaller than the area of the state of New Jersey (CIA, 2008). It is located in a strategic place, as it “stands at the crossroads of Europe, Asia, and Africa.” (Israel Ministry of Foreign Affairs [MFA], 2007, p.1). Israel is located in the Middle East. It borders the Mediterranean Sea in the West, Lebanon and Syria in the North, Jordan in the East, and Egypt in the South. Israel’s population is slightly over 7 million (Central Bureau of Statistics [CBS], 2006). The population in Israel is composed mainly of Jews and Arabs. Arabs constitute 20% of the population, which
amounts to approximately 1.5 million people (CBS, 2008). The Arabs in Israel are divided into Muslims (16.2%), Christians (2.1%), and Druze (1.6%) (Israel Ministry of Foreign Affairs [MFA], 2007). Most Christians in Israel are Arabs (81%) (CBS, 2006). Only 3.9% of the Israeli population is not classified by religion (MFA, 2007).

Albeit with different religions, both Muslims and Christians in Israel identify themselves primarily as Arabs (Britannica Encyclopedia). Regarding Druze, even though members of the Druze religion in Israel share the Arabic culture and language with Arabs, they withdrew from the Arab nationalism in 1948 when they started to serve in the Israeli Defense Forces (IDF) first as volunteers and later as soldiers in the draft system (Aridi, 2002). Druze number approximately one million worldwide; about ten percent of them (104,000) live in Israel (Aridi, 2002). The Druze in Israel differ from the other minorities in the state; they hold high positions in different realms of community (Aridi, 2002).

The Jewish population in Israel is diverse. Jews in Israel are divided into two main groups: Ashkinazi, who are originally from Central and Eastern Europe, and Sephardic, who are originally from the Middle East and from the Mediterranean region (Safra & Aguilar-Cauz, 2007), who brought their different cultures with them (Bar-Tal, 2003). Additionally, there are secular and religious Jews, and there are capitalist and poor Jews (Contreras, Watson, & Dennis, 1998).

Arabs in Israel

Most Arabs in Israel live in Galilee in the North of Israel, in the Triangle area to the south east of Haifa, and in the Negev area in the South (HRW, 2001). A considerable number of Arabs in Israel live in ‘Unrecognized Villages,’ which are localities that the government considers illegal. These villages do not appear on any official maps. The situation for these Arabs is worst
of all Arabs in Israel, as they lack the most basic services such as schools, access roads, running water, and electricity (HRW, 2001).

Israel is characterized by conflicts between Jews and Arabs, as each group claims they have the right to possess the land (Britannica Encyclopedia, 2007). Arabs in Israel have lived in different phases since the inception of the state of Israel in 1948. From 1948 until 1966, Arabs in Israel lived under military ruling, which restricted their movement to a great extent (Rekhess, 2007). For example, Arabs in Israel could not travel without obtaining a permit from the authorities (HRW, 2001). During that period, Arabs in Israel did not have any ties with Arabs outside Israel. From 1967 to 1993, with the occupation of the West Bank and the Gaza Strip in the Six Day War in 1967, Arabs in Israel could reestablish their contacts with the Palestinian Arabs in the occupied territories (Rekhess, 2007). Since 1948, the Arabs in Israel have been attempting to compel the state to treat them as a national minority who can be granted collective rights (Rekhess, 2007). A national minority was defined by Amal Jamal, an Arab scholar from Israel, as a national group who was defeated by another national group and who stayed on their land alongside the conqueror (Rekhess, 2007).

To understand the culture of mistrust, it is important to know that Arabs and Jews in Israel are not close to each other. One example of this remoteness is their two separate school systems, except in mixed cities like Jaffa and Haifa (HRW, 2001). Even in these mixed cities, the two parties usually live in segregated neighborhoods. Neither party appears interested in integrating the two education systems. Many Arabs, however, would like to have their own autonomous education system (HRW, 2001).

Uri Avnery, a veteran journalist and commentator, a former member of Knesset (the Israeli Parliament), and an activist in Gush Shalom, wrote about the situation in Israel and about
a potential solution to the Israeli-Arab conflict. Gush Shalom is an Israeli left-wing peace activism group. He commented that the situation in Israel is both “depressing and shocking—the settlements are getting bigger, the wall is getting longer, the occupation is causing untold injustices every day”—(Avnery, 2007, p. 6). Even though Avnery is alluding to the Palestinian Arabs in the West Bank, this situation influences the Arabs in Israel as well, as they used to be one nation and they still share the same ethnicity, language, religion, and culture, and sometimes blood relationships.

The state of Israel identifies itself as a Jewish state and endows privileges to its Jewish citizens. This reality positioned Arabs in Israel in exclusion, discrimination, and a growing socioeconomic disadvantage. One of the significant gaps between the Arab and the Jewish sectors is evident in the availability of educational and psychological counseling at schools. The State Comptroller’s Report (1997) criticized the government for giving Arab schools “only 35 percent of the counseling hours to which they were entitled” (HRW, 2001). Some of the consequences of discrimination against the Arab population in Israel are reflected in a high percentage of drop-outs at Arab schools, lower performance on national examinations, and less access to higher education and employment (HRW, 2001).

Arabs in Israel are viewed as “second class citizens in their own homeland” as a result of the conflict between Palestinians and Jews and the dominance of the Jews in Israel (Shor & Yonay, 2011, p. 232). Some Jewish scholars, such as Shor and Yonay (2011), admit that Arabs in Israel are considered a threat to the security and the demography of Israel and that “most Jews hold hostile views toward [them]” (p. 232).

Savaya (1998) points out that this population lives under cultural and political pressures that are extremely stressful. She indicates that the Arab society in Israel is undergoing “transition
from a highly conservative and traditional society to a more modern, liberal one” (p. 446). Simultaneously, Arabs in Israel face a political dilemma, as they are torn between being loyal to their ethnic group and to the Jewish state of Israel, as they are its citizens (Savaya, 1997). Moreover, this community suffers from economic hardship; 42% of those who live under the poverty line in Israel are Arabs (Al-Krenawi & Graham, 1998), although Arabs in Israel constitute no more than 20% of the whole population (Al-Krenawi et al., 2004). Furthermore, the unemployment rate in Israel is 9%, but it is higher among the Arab population (Al-Krenawi et al., 2004). These cultural, political, and economic pressures are accompanied by high rates of juvenile delinquency (Healu, 1991), substance and alcohol abuse (Barnea, Teichman, & Rehav, 1990), and divorce (Savaya, 1994).

Another study by Bleich, Gelkopf, Melamed, and Solomon (2007) confirms that Arabs in Israel live under a large amount of stress. Bleich et al. (2007) studied the long term effects of terrorism on both Arabs and Jews in Israel. The researchers examined stress related symptoms, symptoms of post traumatic stress disorder, traumatic stress resiliency, depression, anxiety, optimism, sense of safety, and help seeking. The findings of this study showed that Arab participants in Israel had even more traumatic stress-related symptoms, symptoms of post-traumatic stress disorder, and less traumatic stress resiliency than their Israeli Jewish counterparts.

In spite of the great need for psychological services among the Arab population in Israel, which is evidenced by the cultural, political, and economic pressures and stress (and the resulting symptomology), Arabs in Israel underutilize psychological services. However, the Arab minority in Israel is not the only minority that underutilizes psychological services. Minorities in other parts of the world, for example in the United States, also underutilize psychological
Attitudes toward Help Seeking

services. Numerous studies about the utilization of psychological services in the United States also indicate that minorities in general underutilize psychological services. Next, the existing literature on help seeking and the utilization patterns of minorities will be explored.

Help Seeking

Definition of Attitudes toward Help Seeking

Fischer and Turner (1970) defined attitudes toward help seeking as a person’s “general orientation toward seeking professional help for psychological problems” (p. 81), which can be either positive or negative. Hinson and Swanson (1993) defined help seeking as “seeking help from anyone including friends, family, minister, or professional counselor” (Vogel & Wester, 2007, p.352).

The Importance of Attitudes toward Help Seeking

Several studies have explored attitudes toward help seeking. Some studies found that attitudes toward seeking professional psychological help predicted satisfaction with psychological services (Constantine, 2002). Other studies found a significant positive correlation between attitudes toward help seeking and utilization propensity (Smith, 2007). Yet other studies found that self concealment together with attitudes toward help seeking significantly predicted actual help seeking (Kelly & Achter, 1995). Self concealment refers to the extent to which individuals tend to keep secrets to themselves. Finally, some studies (Cramer, 1999) found that attitudes and high distress, as mediated by social support and self concealment, significantly predicted help seeking. Therefore, it can be assumed that an individual’s attitudes toward seeking professional help determine whether he or she will utilize mental health services. Next, the studies which explored this concept will be discussed in greater detail.
For example, Constantine (2002) found that attitudes toward seeking professional psychological help predicted satisfaction with the psychological services. She studied 112 students of color, the majority (89.3%) of whom were undergraduate students. The researcher recruited students who met the DSM-IV criteria for an adjustment disorder. Each of the participants saw a counselor for an average number of 6.5 individual sessions. The majority of counselors (75.7%) were White Americans. Following termination, the participants were asked to fill in a client demographic questionnaire, the Attitudes Toward Seeking Professional Psychological Help Scale-Short Form (ATSPPHS-S; Fischer & Farina, 1995), and the Client Satisfaction Questionnaire-8 (CSQ-8; Larsen, Attkisson, Hargreaves, & Nguyen, 1979). The results indicated that the attitudes of the clients toward seeking professional psychological help accounted for significant variance in their satisfaction with the counseling experience.

Another study conducted by Smith (2007) utilized 202 undergraduate students. The participants filled out the ATSPPHS and answered one question regarding the Perceived Utilization Propensity: “Rank the probability that you would utilize, or would recommend an immediate family member to utilize, mental health services if a need was identified” (Smith, 2007, p. 31). They rated their responses on a five-point Likert type scale ranging from 1 (very unlikely) to 5 (very likely). Smith conducted intercorrelations between the dependent variables of the attitudes toward seeking professional psychological help and the utilization propensity of mental health services. Smith (2007) found a significant positive correlation between attitudes toward mental health help seeking and utilization propensity ($r = .56$).

Kelly and Achter (1995) and Cepeda-Benito and Short (1998) conducted two separate studies on undergraduate students of psychology. They explored the relationships among distress, attitudes toward counseling, social support, self-concealment, and help seeking. Kelly
and Achter (1995) measured attitudes toward counseling using the 29-item Fischer-Turner Attitudes Toward Seeking Professional Psychological Help Scale (ATSPPH). They found that only self concealment and attitudes toward counseling significantly predicted help seeking, while Cepeda-Benito and Short (1998) found that distress, attitudes towards counseling, social support, and the interaction between social support and self concealment predicted help seeking significantly. One of the reasons Cramer (1999) suggested for explaining the disparity in results in the two studies is that some variables are interrelated, and as such, some of these variables, such as social support, may predict help seeking indirectly (mediated by distress). Cramer found that high distress and positive attitudes toward counseling predicted seeking help. Additionally, social support and self-concealment predicted distress, in that impaired social support and high levels of keeping secrets lead to distress. Finally, Cramer’s study showed that self concealment correlates negatively with attitudes toward counseling, so that when individuals tend to keep secrets to themselves, they usually have negative attitudes toward counseling because they fear sharing their secrets with others, as would be the case within Arab cultures.

Thus, it appears that attitudes toward seeking professional psychological help significantly predict variables that are important to the mental health field. Therefore, attitudes are an important variable to consider when investigating help seeking patterns. Attitudes predict clients’ satisfaction with the counseling experience, predict intentions to seek help, and actual help seeking patterns. None of these studies, however, has investigated the influence of the mental health provider’s ethnicity on the attitudes of Arabs in Israel toward seeking help. The present study will explore this question in addition to investigating whether the cultural mistrust of Arabs in Israel toward Jews influences their attitudes toward help seeking, as well.
Factors Influencing Attitudes toward Help Seeking

Acculturation/enculturation. Kim (2007) differentiated between acculturation and enculturation. He explained that acculturation refers to adaptation to the dominant group values whereas enculturation refers to maintaining indigenous norms. Kim (2007) examined the relationship between the acculturation among Asian Americans to European American values and their enculturation to Asian values and their attitudes toward seeking professional psychological help. He recruited 146 Asian American college students as participants. The participants filled out the Asian Values Scale (AVS), the European American Values Scale for Asian Americans (EAVS-AA), and the Attitudes Toward Seeking Professional Psychological Help-Shortened Form (ATSPPH-S). He found that enculturation to Asian values correlated negatively with the participants’ attitudes toward seeking professional psychological help. This finding supports earlier findings by Kim and Omizo (2003). This study found that adherence to Asian values was inversely related to attitudes toward seeking professional psychological help and to intentions to see a counselor. Another finding by Kim (2007) was that there was no relation between acculturation to European American values and attitudes toward seeking professional psychological help.

However, in one study conducted by Tata and Leong (1994), a positive relation between acculturation to European American values and attitudes toward seeking professional psychological help was reported. Kim (2007) suggested that the positive relation between acculturation to European American values and attitudes toward seeking professional psychological help is a result of enculturation to Asian values rather than acculturation to European American values. In other words, the positive attitudes toward counseling that Asian
American students express are associated with having less indigenous norms rather than having more European American norms.

A more recent study by Shea and Yeh (2008) supported the results obtained by Kim (2007) and Kim and Omizo (2003). Shea and Yeh (2008) studied 219 graduate and undergraduate Asian American students. They also found a significant inverse correlation between the adherence to Asian values and attitudes toward seeking professional psychological help.

**Gender.** Numerous studies have found that females have significantly more positive attitudes toward seeking professional psychological help than men (e.g. Fischer & Farina, 1995; Fischer & Turner, 1970; Kelly & Achter, 1995; Lopez, Melendez, Sauer, Berger, & Wyssmann, 1998; Tata & Leong, 1994; Vogel & Wester, 2003). This trend has been found among different cultures. For example, Chang (1994) found that female Chinese students had more favorable attitudes toward seeking professional psychological help than their male peers. Similarly, Asian American female students have more positive attitudes toward seeking professional psychological help than their male counterparts. Shea and Yeh (2008) conducted a study on Asian American graduate and undergraduate students and found that females had more positive attitudes toward seeking professional psychological help than their male counterparts. This pattern was also found among Arab women (Abu-Baker, 2006).

**Stigma.** Shea and Yeh (2008) explored the perceptions of stigma related to receiving psychological help. They measured the perceptions of Asian American students using the Stigma Scale for Receiving Psychological Help (SSRPH), and found a significant inverse correlation between stigma for receiving psychological help and attitudes toward seeking professional
psychological help. Lin (2002) explained that “shame and embarrassment of sharing problems with relative strangers” (p. 207) are reasons why people avoid counseling.

Another study by Vogel, Wade, and Hackler (2007) found that the perceptions of undergraduate participants about public stigma related to mental health influenced their attitudes toward help seeking. Through the use of structural equation modeling, they found that self stigma mediates attitudes toward help seeking and that these attitudes, in turn, mediate the willingness to seek help. In addition to confirming the hypothesis that stigma influences attitudes toward help seeking, the results further support the notion that one’s attitudes toward help seeking predict his or her willingness to seek help. Similarly, Vogel, Wester, Wei, and Boysen (2005) also found that stigma influences attitudes toward seeking help. They found that stigma related to seeking counseling predicts attitudes toward counseling.

Deane and Todd (1996) found that the social stigma concerns subscale of the Thoughts About Psychotherapy Survey (TAPS; Kushner & Sher, 1989) had a predictive effect on attitudes toward help seeking. The items on this subscale include fears that seeking psychological help would cause others to judge the individual negatively.

**Emotional openness and self-concealment.** Komiya, Good, and Sherrod (2000) found that emotional openness can predict attitudes toward seeking psychological help. They found that those individuals who are not afraid to show their emotions have more favorable attitudes toward seeking psychological help than those individuals who are afraid to experience emotions. They studied 311 undergraduate students. They asked the participants to fill in a Test of Emotional Styles (TES), Attitudes toward Seeking Professional Psychological Help, the short version (ATSPPH-S), and other measures. The TES scores, together with other predictors, were entered into a simultaneous regression model that predicts ATSPPH-S. They found that the Test of
Emotional Style was a significant predictor of ATSPPH-S. They found that more emotional openness was related to more positive attitudes toward seeking psychological help.

Vogel and Wester (2003) found five predictors of attitudes toward help seeking: a. tendency to disclose distressing information in general; b. perceived risk in disclosing emotional material to a counselor; c. perceived utility of disclosing emotional material to a counselor; d. sex (male or female); and e. previous counseling experience (yes or no). The participants were asked to fill in the DDI (Distress Disclosure Inventory), the ESDS (Emotional Self-Disclosure Scale), and the ATSPPHS (Attitudes Toward Seeking Professional Psychological Help Scale). Each of the predictors was significant. This means that all the above factors were good predictors of attitudes toward seeking help.

Vogel and Wester (2003) conducted a second study in which they examined the extent to which several factors can predict intentions to seek help. Among these factors were participants’ attitudes toward counseling and previous counseling experience. The overall regression was significant. Two factors predicted intentions to seek counseling. These factors were attitudes toward counseling (beta = .52) and tendency to disclose distressing information (beta = .14). Similarly, Komiya et al. (2000) found that those individuals who experienced more difficulty disclosing emotional material had less favorable attitudes toward counseling. Therefore, the tendency to disclose distressing information seems to have some effect on both attitudes toward seeking help and on intentions to seek help. This issue would be worth investigating among Arab clients since disclosing sensitive private issues in front of strangers is not acceptable in the Arab culture. This question, though, is beyond the scope of the present study.

Attitudes toward seeking professional psychological help were found to be related to self-concealment, as well. Self-concealment is the tendency to keep personal information private.
Kelly and Achter (1995) conducted two studies of 256 students. Kelly and Achter’s study supported their first hypothesis that high self-concealers (people who tend to keep personal information secret) have less favorable attitudes toward seeking professional psychological help. Their study supported their second hypothesis which stated that one of the reasons that high self-concealers have less favorable attitudes toward seeking professional psychological help is that they fear that they will have to reveal highly personal information during the therapy process. In the first study, the participants filled out the Self Concealment Scale (SCS) and the Attitudes toward Seeking Professional Psychological Help (ATSPPH). In the second study, the participants filled out the SCS, the ATSPPH and were given either of two descriptions of counseling. Half of the participants were given a description of counseling that emphasized that clients should reveal personal information to the counselor. The second half of the participants were given a description of counseling that did not mention the need to disclose personal information in counseling. The results showed that high self-concealers among the first half of participants had less favorable attitudes toward counseling than low self concealers. The results also showed that there was no significant difference between the high and low concealers among the second half of participants.

**Previous counseling experience.** Vogel and Wester (2003) found that previous counseling experience predicted attitudes toward counseling, as well. They asked participants, who indicated that they have been in counseling in the past, to rate their experience on a scale from 1 (very poor) to 5 (very good). These ratings were then correlated with the participants’ attitude toward counseling, with their intentions to seek help, and with their perceived risk and utility of self disclosure to a counselor. The results show that positive counseling experiences
were correlated with positive attitudes toward counseling \((r = .57)\), with stronger intentions to seek counseling \((r = .48)\), and with anticipation of better counseling results.

**Counselor client match.** As mentioned earlier, the utilization of psychological services in general is low. The utilization of psychological services among minorities is still lower than that among the mainstream population. Sue and McKinney (1975) studied a sample of Asian Americans in the Seattle area and found that 52% of Asian American clients dropped out after one session and that 48% of those who returned for treatment had an average of 2.35 sessions. According to S. Sue (1998), when clients work with clinicians who share their ethnicity and their language, they stay longer in therapy than clients whose ethnicity and language do not match those of the clinician.

Lin (1994) studied a sample of 145 Chinese Americans who were assigned a therapist who spoke their primary language and who shared their ethnicity. The results showed that when clients are seen by therapists who spoke their language and who shared their ethnicity, they stayed in therapy for a length similar to that of the mainstream American population. The results showed that the clients stayed in therapy for a mean duration of 12 therapy sessions and that the median duration in therapy was 8 sessions.

Sue, Fujino, Hu, Takeuchi, and Zane (1991) examined the relationship between the therapist-client match, in ethnicity and language, and therapy duration and treatment outcomes. Sue et al. (1991) studied thousands of Asian-American, African-American, Mexican-American, and White clients. They found that when there was an ethnic match between the therapist and client, all clients from four different ethnic groups stayed in therapy for a longer time, measured by the number of sessions.
Gim, Atkinson, and Kim (1991) studied high and low acculturated Asian American students. The participants were randomly assigned to one of the following four cultural sensitivity and ethnicity of the counselor conditions: 1) culture blind Asian-American counselor; 2) culture sensitive Asian-American counselor; 3) culture blind Caucasian counselor; and 4) culture sensitive Caucasian counselor. The participants read a description of the client and the counselor and later listened to a tape recorded counseling session. The client was introduced as an Asian-American woman and the ethnicity of the counselor was manipulated through changing her last name and her country of origin. In the two conditions, where the counselor was culture-sensitive, the counselor showed empathy and acknowledged the importance of the ethnic and cultural values in the client’s life. In the other two conditions, where the counselor was culture-blind, the counselor was only empathic toward the client and she did not acknowledge the importance of the ethnic and cultural values in the client’s life. The participants rated the counselor as more credible and as more culturally competent when they perceived her as culture sensitive and when she was introduced as Asian-American.

From the results of this study it seems that the sensitivity of the counselor to the client’s culture plays an important role in the cross-cultural competence and the effectiveness of the counselor as perceived by the client. It also seems that clients prefer to see counselors of their own ethnicity because they expect counselors from their ethnicity to be sensitive to their culture.

Yeh, Eastman, and Cheung (1994) studied the effect of ethnic match between the therapist and client on treatment among over 3,000 Asian-American, Mexican-American, African-American, and Caucasian American adolescents. The results indicated that when African American, Mexican American and Asian American adolescents saw a counselor of a similar ethnicity, they were significantly less likely to drop out of treatment after the first session as
compared to their peers who did not share the same ethnicity as their therapist. Also, the results showed that Mexican American and Asian American adolescents stayed longer in treatment when they saw a therapist from their own ethnic minority group (Yeh, Eastman, & Cheung, 1994).

Client-health provider match in race/ethnicity has proven effective not only between clients and psychological health providers, but between clients and physicians as well. Cooper-Patrick, Gallo, Gonzales, Vu, Powe, Nelson, Ford (1999) explored the relationship between the race/ethnicity of patients and physicians and the physicians’ participatory decision making (PDM) styles. The PDM reflects the extent to which the physician involves the client in treatment decisions. Research has shown that clients report more satisfaction when physicians employ the participatory decision-making style. It is measured by three variables: 1. how often does the physician ask the client to choose between treatments; 2. how often does the physician allow the client to have control over his or her treatment; 3. how often does the doctor ask the client to take responsibility for his or her treatment. The results showed that clients who saw physicians from their same race/ethnicity rated their visits to these physicians as significantly more participatory than clients who saw physicians from a race/ethnicity different from theirs.

From the above studies, it appears that the match in ethnicity between clients and their psychological health providers influences the counseling experience. This match was also found to help clients stay longer in therapy and to decrease the likelihood of dropping out of treatment. Additionally, the match in ethnicity contributes to the perceptions of clients about psychological health providers. Clients who see psychological health providers from the same ethnicity were found to perceive them as more credible and as more competent. One of the reasons behind these perceptions is that clients expect the psychological health provider from their culture to be more
sensitive to their culture than psychological health providers from a different culture. This match in ethnicity was found effective between clients and physicians as well.

The current study will explore the therapist-client ethnic similarity among Arabs in Israel. Since the Arab population in Israel is in strong need for psychological services (Savaya, 1998), it is important to explore the relationship between their attitudes toward seeking professional help and the ethnicity of the psychological health provider. Identifying this relationship is a necessary first step in increasing the utilization of psychological services. If they have negative attitudes toward seeking professional help from a Jewish psychological health provider, as opposed to an Arab health provider, it is very likely that these attitudes contribute to their underutilization of the mental health services, given that the majority of mental health providers in Israel are Jewish. Negative attitudes toward help seeking have been found to be one of the reasons for the underutilization of professional services by people who need them (Veroff, Kulka, & Douvan, 1981). Thus, identifying negative attitudes toward seeking professional help will assist professional help providers in planning strategies to circumvent and/or avoid the negative attitudes among this population (Savaya, 1997).

**Cultural mistrust and utilization of psychological services.** Snowden (1999) revealed significant underutilization of mental health services by African Americans. Whaley (2001) examined whether the underutilization of the mental health services by African Americans is due to their cultural mistrust. He conducted a meta-analysis of the correlations between the attitudes and behaviors of African Americans toward mental health services use and their cultural mistrust. In addition, Whaley (2001) compared these correlations to those between measures of other social situations and the cultural mistrust experienced by African Americans. The results demonstrated a medium effect size of the meta-analytic correlations between the African
Americans’ cultural mistrust and attitudes and behaviors toward the use of mental health services. Additionally, the results showed that the cultural mistrust toward mental health services was not significantly different from that toward other social situations. This supports the argument that the broader cultural context influences the interracial mental health encounters (Whaley, 1998b).

Duncan and Darrell (2007) studied the attitudes toward seeking professional psychological help and counselor preference of 315 Black college students. They performed a simultaneous multiple regression analysis and found that cultural mistrust was a significant predictor of attitudes toward seeking professional psychological help. They found that Black students, who had lower cultural mistrust on the Cultural Mistrust Inventory (CMI), had more positive attitudes toward seeking professional psychological help. In the same study, Duncan and Darrell (2007) performed canonical analyses of some participants’ attributes, such as their attitudes toward seeking professional psychological help and cultural mistrust, and some counselors’ attributes, such as their race, when the participants face personal problems. The results of the canonical analyses showed that participants with high cultural mistrust prefer a Black counselor when they face a personal problem.

The current study investigated whether cultural mistrust of Arabs in Israel toward Jews affected their attitudes toward help seeking from a Jewish psychological health provider. Again, the results of such a study are intended to further inform psychological health providers about factors that influence the attitudes of Arabs in Israel toward help seeking. Identifying these factors may help these providers find appropriate methods to counteract them and to increase the utilization of psychological services and eventually enhance the psychological well being of the Arab minority in Israel.
Mental Health in the Arab/Muslim Society

Causes of mental illness in Arab/Muslim society. It is important to understand how Arabs in general perceive the causes of mental illness and how psychotherapy among Arabs is different from that in the West. It is believed in the Arab/Muslim society that mental illness or insanity is caused by the devil’s possession so that the word for mental illness or insanity, jinnon, is derived from the word jinn, which means the devil. According to this belief, the devil will possess an individual either because he or she or a member in their family has committed a sin, or because somebody has given them the evil eye out of jealousy (Dwairy, 2006). In the Arab world, the ‘evil eye’ is considered one of the main causes of behavioral and emotional problems (Sayed, 2003). Many Arabs believe that if an individual envies the beauty, wealth, or health of another individual, he or she can harm them just by looking at them. The traditional healer or the Sheikh is the one who can drive the ‘evil spirit’ or the ‘evil eye’ away (Sayed, 2003).

In accordance with the above widespread beliefs, many Arabs/Muslims go to Sheikhs, traditional or religious healers, to help them exorcise the jinn or to reverse the effect of the evil eye (Dwairy, 2006), and to relieve their behavioral and emotional problems (Timimi, 1995). Moreover, besides seeking help from religious healers, many Arab patients believe that only religious practices such as prayers can treat mental illnesses (Al-Subai & Alhamed, 2000).

These beliefs about the causes of mental illness are very similar to those held in Europe and the United States of America in the 17th century. People believed that individuals with mental illness were not quite human, as they were possessed by demons, and as such these individuals were treated with fear and despised by others (Farina, Fisher, Getter, & Fischer, 1978). All these beliefs promote the idea that individuals with mental illness do not need to claim
responsibility and take part in the healing process. This is one of the characteristics of psychotherapy in the Arab world (Dwairy, 2006).

**Psychotherapy in the Arab World**

Psychotherapy in general addresses the intrapsychic dimension of an individual who has a psychological problem (Dwairy, 2002). In collectivistic cultures, like the Arab culture, however, psychotherapy addresses the effects of the family on the individual first. Mostly, individuals in collectivistic cultures present with intrafamilial rather than intrapsychic conflicts. Dwairy (2002) contends that psychotherapy, which relies on individualistic values, usually contradicts collectivistic/authoritarian values of the Arab culture. This contradiction contributes to the premature therapy termination of clients from collective/authoritarian cultures. He explains that clients from these cultures usually quit therapy when they realize that therapy constitutes a threat against the unity of their family and culture.

Seeking psychological help in the Arab culture is perceived as an act that brings shame to the family (Sayed, 2003), which might explain why many Arab patients experience somatization (El-Islam, 1998). One of the reasons these patients claim they are physically ‘sick’ is to avoid being stigmatized as having mental illness (Sayed, 2003). Arab patients in therapy are usually passive, and they wait for the therapist to do everything for them (Dwairy, 2002). This behavior may stem from their conceptions of traditional doctors. They view traditional doctors as persons who know everything and who are able to cure them, and thus they only need to conform to what is asked of them. Additionally, Arab patients are very hesitant to self disclose. This hesitance is due to two reasons; first, they will be considered traitors of their family, and second, self-disclosure is synonymous to them with weakness and failure. Whereas psychotherapy encourages clients to discuss their family relationships openly, the Arab family discourages the
individual from revealing family issues to strangers in order to save the reputation of the family. In the Arab culture it is not unusual to see family members escorting the patient and attending therapy sessions to ensure that the patient does not reveal the family secrets to the therapist. An Arab woman who discusses her family issues with a psychologist, who is a stranger, may be perceived as a traitor and may even be punished for airing the family’s ‘dirty laundry’ (Dwairy, 2002, p.262). Dwairy (2002) presents a case study with one Arab woman and contrasts psychotherapy values with the collectivistic values of the Arab culture. Whereas psychotherapy will help a client realize that he or she is a victim of abuse, psychotherapy in the Arab culture may steer the individual toward feeling guilty and blaming himself or herself for this abuse.

Furthermore, psychotherapy in an individualistic culture gives the client the option to identify with himself or herself and to make free choices, while the Arab culture teaches the individual to identify with his or her family and stipulates feeling worthy is a result of meeting the family’s expectations. Psychotherapy in individualistic cultures helps the client realize that he or she is strong enough to handle the pressure that he or she had when younger and vulnerable. The Arab cultural values, on the other hand, suggest that the individual is still vulnerable and dependent. Whereas psychotherapy in individualistic cultures helps the client realize that anxiety may represent passive resistance of his or her parents, anxiety in the Arab culture is usually perceived as standing in the way of fulfilling the family wishes and thus the individual should feel guilty about that belief. Furthermore, in Arab culture anger toward one’s parents is not acceptable and thus children are not allowed to express anger toward their family.

Since Arabs in Israel typically see Jewish psychological health providers, and since Arabs and Jews hold different beliefs and may operate from different perspectives due to their different cultural backgrounds, the current study will investigate whether the ethnicity of the
counselor influences the attitudes of Arabs in Israel toward seeking psychological help. This in turn will shed light on potential causes of the underutilization of psychological services by this population. This information will assist in identifying barriers to the appropriate utilization of psychological services. This first step may inspire new plans to remove these barriers and enhance the utilization of psychological services by Arabs in Israel and promote their psychological well-being. In addition, in order to better understand the causes of the underutilization of psychological services by the Israeli Arab population, the current study will explore whether the cultural mistrust of Arabs in Israel toward Jews influences their attitudes toward seeking help from a Jewish psychological health provider.

Ethnic Minorities and Utilization of Psychological Services

Research has shown that minorities in the United States underutilize professional psychological services, and that the majority population utilizes these services more than minority groups. Temkin-Greener and Clark (1988) examined gender and ethnic differences in the utilization of mental health services in a Medicaid population in Monroe County, New York. They found that Whites utilize both the ambulatory mental health services and the ambulatory psychiatric services more so than non-Whites.

Vernon and Roberts (1982) conducted a study on Whites, Blacks, and Mexican Americans to examine the pattern and overlap of both treated and untreated rates of psychiatric symptoms and disorders. They found that when personal or family problems are encountered, Whites were more likely than both Blacks and Mexican Americans to seek professional help. The underutilization of mental health services by Mexican Americans may be explained by their resort to other informal support systems. Keefe (1979) noted that Mexican Americans consult clergymen and relatives when they face family or marital problems.
Another minority group in the United States that underutilizes mental health services is Haitian Americans. Most Haitian Americans do not seek mental health services voluntarily; usually they are referred to these services by their primary care providers, social service agencies, schools, and courts (Astrid & St. Fleurose, 2002). The reason for this underutilization of mental health services might be their beliefs about the etiology of mental illnesses; many believe that mental illnesses result from neglecting their gods, the Laos (Astrid & St. Fleurose, 2002). Therefore, Astrid and St. Fleurose (2002) contend that many Haitian Americans with mental illnesses may want to travel back to Haiti and organize ceremonies to honor the Laos in an attempt to make restitution to them and to heal as a result.

Utilization of Psychological Services by Arabs in Israel

Utilization rates of mental health services in the Arab world in general are lower than those in many Western countries (Savaya, 1998), and the rates of early termination are also higher in the Arab world compared to those in Western countries (Savaya, 1995). The Arab community in Israel, just like other Arabs in the world and like other minorities in the United States (as previously discussed), underutilizes professional psychological services. This underutilization was revealed in a national study conducted by the Israeli Ministry of Health (Feinson, Popper, & Handelsman, 1992). According to this study, only 0.5 per 1000 Arabs in Israel utilize mental health ambulatory services, whereas 3.3 per 1000 Israeli Jews utilize these services (Feinson, et al., 1992). Moreover, mental health services in the Arab sector in Israel are not well developed (Dwairy, 1998; Feinson et al., 1992), which may be another reason for the underutilization of the mental health services by the Arab population in Israel.

One also cannot ignore the impact of stigma on psychotherapy utilization rates. Arabs consider family and marital therapies stigmatizing (Savaya, 1995). This state applies especially
to women, as the stigma of mental health services could damage their marriage (Al-Krenawi, Garham, & Fakhr-Aldin, 2003), or among Muslims could be used by the husband as an excuse to obtain a second wife (Al-Krenawi & Graham, 1999a). Therefore, understanding the attitudes of the Arab population in Israel toward seeking professional help can inform researchers about whether the stigma of mental health inhibits Arabs from using mental health services. If this is the case, stigma may be overcome by delivering mental health services at non-stigmatizing settings such as medical clinics (Al-Krenawi & Graham, 2000).

The underutilization of the mental health services by Arabs in Israel may be attributed to the differences between Arabs and Jews in Israel both in language and culture. According to Al-Krenawi and Graham (1997), Arabs in Israel often see practitioners from different cultural backgrounds, and thus the cultural and linguistic barriers that can arise may lead to misunderstandings, premature termination, or poor therapeutic alliances with the practitioners. Thus, it is reasonable to assume that the ethnicity of the psychological health provider influences the attitudes of Arabs in Israel toward seeking psychological help. Since this issue has not been studied before, the current study will investigate whether Arabs in Israel have less favorable attitudes toward seeking psychological help from a Jewish psychological health provider than from an Arab psychological health provider.

**International Studies about Attitudes toward Help Seeking**

A wide range of studies has been conducted to examine the attitudes of various populations toward seeking professional psychological help. Russel, Gaffney, Collins, Bergin, and Delcan (2004) conducted two focus groups in a rural area in Ireland; one included young men aged 16-18 and the other included young men aged 18-30. The focus groups were conducted to come up with themes for a questionnaire that aimed at examining several issues,
one of which was the participants’ attitudes toward seeking help. The results showed that the participants considered their friends and family as the preferred sources of support and that they viewed much of professional help as unacceptable.

Studies about attitudes toward help seeking have also been conducted on adolescents in the United Kingdom. Fox and Butler (2007) conducted a study of 415 students in grades 7 through 11 from five different schools in the United Kingdom. The majority of the participants (92%) reported that they had not used any counseling services in the past. The participants were asked to answer open ended questions about the benefits and problems of participating in school counseling, the issues they would discuss with the counselor during counseling, their intentions to seek counseling and the reasons behind seeking counseling, and suggestions to improve school counseling. Finally, they were asked whether having counseling services at school is useful and whether they knew about the existence of counseling services at their school. Even though the results indicated that the majority of the participants (79%) knew about the existence of the school counseling service, one of the problems they reported about the counseling service is that ‘it is not widely known about’ (Fox & Butler, 2007, p. 102). During later focus groups, the participants reported that even though they knew that school counseling was available, they did not know who the counselor was, where he or she was, and how to access her or him. Regarding the usefulness of the service, 84% of the participants reported that it was useful. However, 64% of the participants responded ‘no’ when asked if they would see the school counselor. Two of the common reasons the participants gave for not intending to see the school counselor were ‘I would keep it to myself/handle it myself’ (p. 104) and ‘I can turn to other people’ (p. 104). The majority of the focus groups reported that the stigma attached to seeing a counselor is one of the reasons they would not see a counselor. They agreed that this stigma is harder for boys than for
girls, as they would be called a ‘wimp’ if they saw a counselor. Some participants related that they would feel uncomfortable sharing their problems with a stranger whom they did not know they could trust. The researchers found that girls rated the counseling service as more useful than boys. Similarly, more girls (68%) than boys expressed intentions to see a school counselor. The participants reported the issue of confidentiality as both a benefit and a problem. Most of the focus groups appreciated the fact that counseling was confidential; many participants, however, had doubts that the counselor would not betray their confidence.

Studies about Attitudes of Arabs in Israel toward Help Seeking

Only a few studies have been conducted with the purpose of exploring the attitudes of Arabs in Israel toward seeking professional help. Several limitations have been detected with the studies that have been conducted. Al-Krenawi et al. (2004) compared the attitudes toward mental health treatment among Muslim Arab undergraduate female students from Jordan, the United Arab Emirates, and Israel. They found that variables such as age, educational attainment, and marital status strongly influenced the participants’ attitudes toward help seeking. Participants aged 21 and above had more positive attitudes toward seeking professional psychological help than younger participants. Married women had more positive attitudes toward seeking professional psychological help than single women. Finally, students in the third year and above in their undergraduate program had more positive attitudes toward seeking professional psychological help than students in the first and second year in their undergraduate program. One limitation of this study is that the sample consisted solely of women, thus making it difficult to generalize the findings of the study to Arab males.

Savaya (1997) examined the relationship between political position, self-esteem, economic need, and socio-demographic features and the utilization of psychotherapeutic services
among Arab women from the mixed Arab-Jewish town of Jaffa in Israel. The findings show that political position, economic need, and socio-demographic features predicted the use of psychotherapeutic services. Participants who had a stronger Palestinian identity used psychotherapeutic services more than those who identified themselves as more Israeli. Those participants with a lower economic status were more likely to use psychotherapeutic services than those participants who had a higher social status. Self-esteem, however, was found to be unrelated to the use of the psychotherapeutic services.

Similarly, this sample consisted of women, all from the mixed Arab-Jewish town of Jaffa. Furthermore, some measures developed for this study had low internal reliability. One explanation for the low reliability of the measures might be the nature of the questions asked to the participants; the questions were both personal and politically sensitive, which may have left the participants uneager to respond and less likely to give candid answers. For example, the participants were required to respond to statements regarding the existence of the Zionist State and regarding the Arab activism within the state of Israel.

**Help seeking among Israeli adolescents.** Grinstein-Weiss, Fishman, and Eisikovits (2005) conducted a study in Israel to explore the formal and informal help seeking patterns among Jews and Arabs in Israel. Formal help sources included professionals such as social workers, psychologists, school teachers, and family doctors. Informal help sources included relatives and friends. They studied 6,017 high school students from 150 schools. Jewish participants constituted 83.2% of the study sample, and Arab participants constituted 16.8%. In comparison to the Jewish participants, the Arab participants were significantly more likely to seek formal help and help from the family. However, they were significantly less likely than their Jewish counterparts to seek help from friends. The researchers contend that since the
research assistants who conducted the study with the Arab participants were Arab, the Arab participants responded to the questions of the research bearing in mind that the formal help providers are Arab and not Jewish. This has left a gap in the study regarding the responses of the Arab participants if they were told that the formal help providers were Jewish. Future studies, therefore, need to be conducted in order to explore the response of Israeli Arab participants when the psychological help provider is identified as either Arab or Jewish. The present study will explore this question and will attempt to see whether the ethnicity of the psychological help provider influences the attitudes of the participants toward help seeking and eventually toward their willingness to seek help.

There are in fact few studies about the attitudes of the Arab population in Israel toward seeking professional help. The studies conducted thus far, as described earlier, have several limitations as outlined above. The current study will expand on previous investigations by examining whether the ethnicity of the psychological help provider influences the attitudes of Arabs in Israel toward help seeking. Additionally, the present study will examine whether the cultural mistrust toward Jews accounts for the attitudes of this population toward help seeking from a Jewish psychological help provider.

Summary

Based on existing research and literature, it is obvious that further investigation is needed regarding the attitudes of Arabs in Israel toward help seeking. In spite of their need for psychological services, just like other minorities around the world, Arabs in Israel underutilize psychological services. It was very important to initially introduce the history and culture of Arabs in Israel, as Sue and Sue (1990) identified sociopolitical factors and culture as important elements in cross-cultural counseling. Thus, Arabs in general were introduced. Next,
characteristics of the Arab/Muslim society were introduced. Then, an overview of Israel was presented including its history, geography, and demographic characteristics. The Arab minority in Israel was then introduced. Attitudes toward help seeking were defined. Attitudes toward help seeking are important, as they were found to predict the actual help seeking behavior. Several factors influence attitudes toward help seeking: acculturation/enculturation, gender, stigma, emotional openness and self concealment, previous counseling experience, counselor-client match, and cultural mistrust. Mental health in the Arab/Muslim culture was discussed. The perceived causes of mental illness and the characteristics of psychotherapy in the Arab/Muslim society were discussed. Utilization of psychological services by ethnic minorities and by Arabs in Israel was presented. Finally, international studies about attitudes toward help seeking both internationally and among Arabs in Israel were presented. Since the counselor-client match in ethnicity and cultural mistrust were found to influence attitudes toward help seeking, the present study explored the relationship between attitudes toward help seeking given the ethnicity of the help provider and given the level of cultural mistrust toward Jews.
Chapter 3: Methodology

Participants

One hundred twenty-one Arab under-graduate students from Israel participated in this study. Ten participants were eliminated from the study because they did not complete the entire survey. Eight participants were eliminated because they were older than 24 years old and two participants were eliminated because they did not report their age on the demographic questionnaire. The final analysis is based on a sample of 102 participants. Participants were Arab undergraduate students from Israel, mainly from the University of Haifa, Israel, enrolled in the Summer of 2010. A few participants were recruited from other higher education institutions in Israel, mainly from the Israel Institute of Technology, Haifa. Both female and male students were recruited for this study. The sample for this study came from diverse departments. A snowball sampling method was used to recruit participants. The ages of the participants ranged from 18 to 24 with a mean of 21.21 and a standard deviation of 1.62. Participants received a small amount of money, in the form of gift cards, at the conclusion of their participation in the study.

Instruments

This study included a demographic questionnaire developed specifically for this study, the Attitudes Toward Seeking Professional Psychological Help- Short Form (ATSPPH-S), the Beliefs About Psychological Services (BAPS), the Cultural Mistrust Inventory (CMI), and two vignettes, also developed specifically for this study.

**Demographic questionnaire.** A demographic questionnaire in Arabic was developed specifically for this study. Participants were asked to indicate their age, gender, religion, year in school, place of birth, current place of residence, marital status, year in college, grade point
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average (GPA), parents’ educational level, income of parents or their own income if they lived independently, previous experience with a psychological help provider, and the ethnicity of the psychological help provider.

**Attitudes Toward Seeking Professional Psychological Help-Short Form (ATSPPH-S).** The ATSPPH-S is a 10-item brief version of the original 29-item scale of the ATSPPH developed by Fischer and Turner (1970). The shortened form of the ATSPPH was developed by Fischer and Farina (1995) to measure attitudes toward seeking professional psychological help.

Fischer and Farina (1995) selected fourteen items from the original ATSPPH (Fischer & Turner, 1970). They selected those items that had the highest item-total scale correlation ($rs > .45$). In order to conceal the main purpose of the study, the researchers embedded the fourteen items within a larger set of items that deal with several social issues. The participants, undergraduate students, were asked to rate the items on a Likert-type response format that ranged from 0 (disagree) to 3 (agree). A factor analysis was conducted with two, three, and four factor solutions on the 14 item scale. The best factorial solution was the two-factor solution. The first factor contained 10 items that loaded above .50 and reflected attitudes toward seeking professional psychological help. The second factor was disclosure/interpersonal openness and the internal consistency of the four items on this factor was weak ($r = .64$), and thus the researchers dropped these items. Test-retest reliability of the brief version of the ATSPPH was .80. Higher scores on the ATSPPH-S indicate more favorable attitudes toward seeking psychological help. Examples of items on the ATSPPH-S include: “I would want to get psychological help if I were worried or upset for a long period of time,” and “The idea of talking about problems with a psychologist strikes me as a poor way to get rid of emotional conflicts.” The ATSPPH-S has been used with many international populations and proven to be both valid.
Beliefs About Psychological Services (BAPS). The Beliefs About Psychological Services scale was developed by Ægisdóttir and Gerstein (2009) to measure attitudes toward seeking psychological help from psychologists was administered to participants. The final version of the BAPS consists of 18 items. Responses are rated on a 6-point Likert-type scale, ranging from 1 (strongly disagree) to 6 (strongly agree). Seven of the 18 items are negatively worded. Higher scores on the BAPS mean more favorable attitudes toward psychological services.

Even though the BAPS and the ATSPPH-S measure the same construct, the BAPS has some advantages over the ATSPPH-S. For example, the attitude construct may be better covered in the BAPS, as more diverse sources contributed in generating its items, such as potential target respondents, literature, and professionals from the field of mental health (Æegisdóttir & Gerstein, 2009). This makes the content validity of the BAPS better than that of the ATSPPH-S. Additionally, none of the ATSPPH-S’s items addresses the stigma related to seeking psychological services. Given the well supported evidence of the influence of stigma related to seeking psychological help on the actual seeking of this help (e.g. Fischer & Turner, 1970; Timlin-Scalera, Ponterotto, Blumberg, & Jackson, 2003), the lack of items that address this factor contributes to a weak construct validity of the ATSPPH-S and makes the BAPS a better instrument.

Ægisdóttir and Gerstein (2009) conducted an exploratory factor analysis to evaluate the factorial validity of the BAPS. Three factors were revealed: ‘intent,’ ‘stigma tolerance,’ and ‘expertness.’ The ‘intent’ factor refers to the individual’s intent to seek psychological help. Six items loaded on this factor. Examples of these items are item 1: “If a good friend asked my
advice about a serious problem, I would recommend that he/she see a psychologist,” and item 4: “At some future time, I might want to see a psychologist.” The ‘stigma tolerance’ factor refers to the stigma and negative beliefs about seeking psychological help. Eight items loaded on this factor. Examples of items of this factor are item 7: “Because of their training, psychologists can help you find solutions to your problems,” and item 13: “Psychologists make people feel that they cannot deal with their problems.” The third factor of ‘expertness’ refers to the unique characteristic of expertness of the psychological help provider. This factor includes four items. Examples of items of this factor are item 12: “I would see a psychologist if I were worried or upset for a long period of time,” and item 14: “It is good to talk to someone like a psychologist because everything you say is confidential.” All three factors explained 48% of the total variance. Ægisdóttir and Gerstein (2006) initially kept 19 items out of the original 30 item scale. Each of these 19 items loaded .40 or higher on one of the three factors. The 11 items dropped from this measure loaded .40 or higher on two factors (Ægisdóttir & Gerstein, 2009).

Next, an item analysis on the BAPS scale was conducted. The results of this item analysis indicated an item-to-total-scale correlation that ranged from .28 to .70. The square multiple correlation ranged from .21 to .61. Cronbach’s alpha for the total scale was .88. Cronbach’s alpha decreased each time an item was deleted, which proved that each item made a significant contribution to the BAPS scale. Additionally, the researchers conducted an item analysis on the three factors. The item-to-factor correlation for each of the three factors ranged from .33 to .69. The Cronbach’s alphas for the factors ranged from .72 to .81. The square multiple correlations for the factors ranged from .14 to .50.

In another study, Ægisdóttir and Gerstein (2009) conducted a confirmatory factorial analysis on the BAPS in an effort to evaluate its factorial stability. They tested the three-factor
model using the $\chi^2$, goodness-of-fit index (GFI), adjusted goodness-of-fit index (AGFI), Comparative fit index (CFI), the root-mean-square error of approximation (RMSEA), and the single-sample expected cross-validation index (ECVI). In addition, the Marlowe-Crowne Social Desirability Scale (M-C SDS; 1960) was used to test the discriminant validity of the BAPS. All items, with the exception of item number 3, loaded .40 or higher on their respective factors. The $\chi^2$ for the three-factor model was significantly lower than that of the one factor model. This means that the three-factor model is the best fit for this measure. According to the values of the GFI, AGFI, CFI, and RMSEA, the 18 item BAPS was the best fit. Once again, the internal reliability of the BAPS was assessed using Cronbach’s alpha. The results showed that the alpha coefficients were similar to those found in the first study, which indicated again an acceptable internal consistency reliability. All the items except for item 3 had a moderate correlation with their respective factors, which ranged from .38 to .69. Finally, the BAPS seemed to have discriminant validity, as the correlation between its total score and the total score of the M-C SDS was not significant ($r = .08$).

A third study was conducted to assess the test-retest reliability and internal reliability of the BAPS (Ægisdóttir & Gerstein, 2009). The participants for this study were 59 undergraduate students. Participants were administered the BAPS and a demographic sheet in a counterbalanced order. These instruments were administered twice within a two-week interval. Cronbach’s alpha coefficients for the BAPS and for its three subscales at the first administration were as follows: .85 for the total score of the BAPS, .86 for the Intent Subscale, .59 for the Stigma Tolerance Subscale, and .75 for the Expertness Subscale. These coefficients were .90, .90, 59, and .78 respectively at the second administration. The test-retest reliability coefficients for the BAPS and its subscales after two weeks ranged from .75 to .88. This indicated that the
BAPS is stable over time.

**Cultural Mistrust Inventory (CMI).** The Cultural Mistrust Inventory is a 48-item inventory that was developed by Terrell and Terrell (1981) to assess four domains of cultural mistrust of Whites by Blacks in the U.S. These domains are Education and Training (ET), Interpersonal Relations (IR), Business and Work (BW), and Politics and Law (PL). Four Black psychologists, separately, read the items and rated them for clarity and for domain appropriateness; those that were either unclear or inappropriate were either dropped or rewritten. This process resulted in an 81-item measure. The CMI was also administered to 172 Black freshmen and sophomores. In addition, the participants filled out a demographic questionnaire, the Jackson Social Desirability Scale, and the Terrell and Miller Racial Discrimination Index (RDI; 1980). An item discrimination analysis was conducted and those items that were endorsed by the majority of participants were eliminated. Next, the researchers examined the homogeneity of the items by computing a Pearson correlation between each item and its own subscale. No items were eliminated, as none of the items lacked significant correlation with its own subscale. Then, the researchers tested the items for contamination. They eliminated 23 items which correlated significantly with scores on the Social Desirability Scale. Following this, the researchers tested the convergent and divergent validity of the items by correlating each of the items with each score of the other subscales. One item that correlated with one of the other scales more than its own scale was omitted. Finally, the domain appropriateness of the items was computed using the inter-scale correlations. The results indicated that the CMI is composed of four distinct domains of mistrust.

In another study, the researchers assessed the test-retest reliability of the CMI. They administered the CMI to 69 Black college students within a two-week period. The test-retest
reliability score obtained was .86. Finally, the researchers assessed the external validity of the CMI. It was hypothesized first that those who scored higher on the RDI were exposed to more instances of racial discrimination, and would score higher on the CMI than those who scored lower on the RDI. For this purpose, they did an F-test between the quartile groups on the RDI and scores on the CMI and the results indicated significant differences between them. A later study by Nickerson, Helms, and Terrell (1994), which used the CMI with 105 Black male and female undergraduate students, revealed that the CMI has adequate internal consistency; Cronbach’s alpha was .89.

For the purposes of this study, the CMI was modified to use it with the sample of Arabs from Israel by replacing the term “Blacks” with “Arabs” and the term “Whites” with “Jews.” Therefore, the CMI version used in the current study included items such as “Jewish teachers are more likely to slant the subject matter to make Arabs look inferior,” “Arabs should be suspicious of a white person who tries to be friendly,” and “Jews are usually honest with Arabs.” The CMI was used with populations other than African Americans; it was utilized with a Filipino American sample and proved to be reliable, as Cronbach’s alpha was .93 (David, 2010).

**Vignettes.** The researcher developed two separate vignettes specifically for this study. Each vignette describes a male psychological help provider in terms of his qualifications, qualities, and years of experience. The qualifications, qualities, and experience of the psychological help providers in the two vignettes were identical. The psychological help providers differed only in their ethnicity. As in one vignette the psychological help provider was Jewish and in the other vignette he was Arab.

The researcher translated all instruments (the Demographic Questionnaire, the ATSPPH-S, the BAPS, the CMI, and the vignettes) into Arabic. In order to guarantee the accuracy of the
translation, a second competent, professional scholar back-translated the instruments into English. The original and back translations were compared to ensure there is only minimal loss of meaning. The comparison revealed that the original and the translation were similar.

**Procedures**

An approval was obtained from the Institutional Review Board (IRB) at both Ball State University and at the University of Haifa, Israel to conduct this study (See Appendices A and B for approvals).

Data were collected anonymously using INQSIT, an on-line survey program that the researcher translated into Arabic. Introductory letters with the survey’s URL address were sent via email to students from the University of Haifa. This letter included the following information: A description of the purpose of the study, the confidential and voluntary nature, the incentive for participation, and the contact information of the primary researcher (Appendix C). Once the participants entered the URL address of the survey, they were directed to the informed consent form (Appendix E). Upon consent, participants were taken to the survey and were asked to complete the following measures: Demographic Questionnaire (Appendix G), ATSPPH-S (Appendix I), BAPS (Appendix K), CMI (Appendix M), and they were asked to answer two questions following the presentation of two vignettes (Appendix O). The Demographic Questionnaire was presented first. Then, participants were alternately shown a statement advising them that the psychological help provider in the questions to follow will be either Jewish or Arab. Following this statement, the ATSPPH-S, the BAPS, the CMI, and the vignettes were presented in a randomized order. Upon completing the survey and submitting their answers, participants were directed to a letter with the contact information of the primary researcher asking for their information so that the researcher can send them the gift card (their incentive).
On average, the survey required approximately 30 minutes to complete.

**Design**

The first hypothesis stated that there will be a relationship between the attitudes and beliefs of Arabs in Israel toward seeking psychological help and the ethnicity of the psychological help provider such that when the psychological help provider’s ethnicity is Arab, the attitudes and beliefs of Arabs in Israel will be more favorable toward seeking professional psychological help.

The second hypothesis stated that when the psychological help provider’s ethnicity is Jewish, the attitudes and beliefs of Arabs in Israel will be less favorable toward seeking professional psychological help.

The third hypothesis stated that there will be a relationship between the level of cultural mistrust of the participants and their attitudes and beliefs toward seeking professional psychological help from a Jewish psychological help provider.

The fourth hypothesis stated that as the level of cultural mistrust increases, the attitudes and beliefs of the participants toward seeking professional psychological help from a Jewish psychological help provider will be less favorable.

The short version of the Attitudes Toward Seeking Professional Psychological Help scale (ATSPPH-S) and the Beliefs About Psychological Services scale (BAPS) were employed to assess the attitudes and beliefs of Arabs in Israel toward seeking professional psychological help, and the Cultural Mistrust Inventory was utilized to assess their level of cultural mistrust toward the Jews.

The Statistical Package for the Social Sciences (SPSS) was used to analyze the study’s data. This study used frequency counts, chi-square analyses, MANOVA, and logistic analyses to
examine the relationship between attitudes and beliefs about help seeking, ethnicity of the help provider and the cultural mistrust of undergraduate Arabs in Israel. In addition, correlations (Pearson’s $r$) were computed among the various variables (or among the demographic characteristics and the participants’ attitudes and beliefs toward help seeking and their cultural mistrust toward Jews).

Prior to the statistical analyses, all the negatively worded items on the ATSPPH-S, BAPS, and the CMI were recoded. Then, the three measures were scored. For the CMI, in addition to their total scale score, participants had four individual CMI subscale scores on the CMI Education and Training (ET), CMI- Interpersonal Relations (IR), CMI- Business and Work (BW), and CMI- Politics and Law (PL). In order to test the influence of the level of cultural mistrust of Arabs towards Jews on the participants’ attitudes and beliefs about help seeking, their scores on the CMI were categorized into high and low levels of cultural mistrust using the median split. A chi-square analysis was employed to ensure that the CMI values were irrelevant to the ethnicity of the psychological help provider. Chi Square was not significant.

The three instruments’ internal consistency reliability was measured using Cronbach’s alpha. To determine whether the ethnicity and the cultural mistrust towards Jews influenced the participants’ attitudes and beliefs about help seeking, the study used a 2 (Ethnicity of psychological professional: Arab & Jewish) x 2 (Level of cultural mistrust: High & Low) between subjects multivariate analysis of variance (MANOVA), with the ATSPPH-S and the BAPS as the dependent variables. An alpha level of .05 was used in the study.
Chapter 4: Results

Data were collected using the following: A demographic questionnaire, the Attitudes Toward Seeking Professional Psychological Help – Short Form (ATSPPH-S), the Beliefs About Psychological Services (BAPS), the Cultural Mistrust Inventory (CMI), and two vignettes. The internal consistency of the ATSPPH-S, the BAPS, and the CMI was computed utilizing Cronbach’s coefficient alpha. In order to explore the relationship between the attitudes and beliefs of Arabs in Israel toward help seeking, given the ethnicity of the psychological help provider, and the cultural mistrust of Arabs in Israel toward Jews, a Multivariate Analysis of Variance (MANOVA) was conducted.

Sample

Sample size. One hundred twenty-one Arab under-graduate students from Israel participated in this study. Ten participants were eliminated from the study because they did not complete the entire survey. Eight participants were eliminated because they were older than 24 years old and two participants were eliminated because they did not report their age on the demographic questionnaire. The final analysis is based on a sample of 102 participants.

Demographic characteristics of the sample. The mean age of the participants was 21.21 (SD = 1.62) with a range between 18 and 24. Forty-four (43.1%) of the participants were male, 57 (55.9%) were female, and one (1%) did not report his or her gender. Of the 102 participants, 68 (66.7%) were Muslim, 23 (22.5%) were Christian, 7 (6.9%) were Druze, 3 (2.9%) reported their religion as ‘other,’ and 1 (1%) did not report his or her religion. The sample consisted of 35 (34%) freshmen, 31 (30%) sophomores, 20 (20%) juniors, and 15 (15%) fourth and fifth year students. Sixty one (60%) of the participants lived in a village (a small town) and 41 (40%) lived in a city. Fifty-six (55%) of participants reported their mothers having up to a
high school level of education, while 46 (45%) of mothers had a Bachelor’s degree and above. Forty-six (45%) of participants reported their fathers having up to a high school level of education, while 56 (55%) of fathers had a Bachelor’s degree and above. Most of the sample (87%) had no previous experience with psychological help and only 13 (13%) had such experience. Of those who had previous experience with psychological help, 6 (46%) had an Arab psychological help provider and 7 (54%) had a Jewish psychological help provider. Participants were asked to indicate which psychological help provider they would prefer to see after reading two vignettes describing psychological help providers with identical qualifications, qualities, and experience, but who differ only in their ethnicity. Seventy-seven (76%) chose to see the Arab psychological help provider and 23 (23%) chose to see the Jewish psychological help provider for psychological help in the future. See Table 1 for participants’ demographics.

Table 1

Demographics

<table>
<thead>
<tr>
<th>Demographics</th>
<th>%</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
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<td>Females</td>
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<td>Christian</td>
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<td>Druze</td>
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<td>Other</td>
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<td>3</td>
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<td>Year in School</td>
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Mother’s Level of Education
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<th>Jewish</th>
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</thead>
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<td>56</td>
</tr>
<tr>
<td>BA and above</td>
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<td>46</td>
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</table>

Father’s Level of Education
<table>
<thead>
<tr>
<th>Level</th>
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</thead>
<tbody>
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<td>Elementary, Junior HS, HS</td>
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<td>46</td>
</tr>
<tr>
<td>BA and above</td>
<td>55</td>
<td>56</td>
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Experience with Psychological Help
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<th>Jewish</th>
</tr>
</thead>
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<td>87</td>
<td>89</td>
</tr>
<tr>
<td>Yes</td>
<td>13</td>
<td>13</td>
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Previous Help Provider
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<th>Jewish</th>
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</thead>
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<td>6</td>
</tr>
<tr>
<td>Jewish</td>
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<td>7</td>
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</table>

Choice of Help Provider
<table>
<thead>
<tr>
<th>Provider</th>
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<th>Jewish</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jewish</td>
<td>23</td>
<td>23</td>
</tr>
<tr>
<td>Arab</td>
<td>76</td>
<td>77</td>
</tr>
</tbody>
</table>

**Preliminary Analysis**

Before testing the hypotheses of the study, preliminary analyses were conducted. Reliability analysis (Cronbach’s alpha) was conducted on the Attitudes Toward Seeking Professional Psychological Help (ATSPPH-S), on the Beliefs About Psychological Services (BAPS), and on the Cultural Mistrust Inventory (CMI) to ensure that the internal consistency of these scales in Arabic is similar to that of the original scales in English.

Cronbach’s alpha for the ATSPPH-S was .67 and for the BAPS was .84. Cronbach’s alpha for the total CMI was .79 and for the four subscales of Business and Work, Politics and Law, Education and Training, and Interpersonal Relations was .84, .86, .77, & .78, respectively. Cronbach’s alpha values for the BAPS and for the CMI were very similar to those obtained with samples from the United States.

Means and standard deviations for the ATSPPH-S, the BAPS, the total CMI, and for the four subscales of Politics and Law, Education and Training, Business and Work, and Interpersonal Relations are presented in Table 2. Higher scores on the ATSPPH-S and that BAPS
indicate more favorable attitudes and beliefs toward seeking psychological help. Higher scores on the CMI indicate a higher level of cultural mistrust toward Jews.

Table 2

*Means and Standard Deviations for Entire Sample for CMI, ATSSPH-S, and BAPS*

<table>
<thead>
<tr>
<th></th>
<th>Means</th>
<th>Standard Deviations</th>
</tr>
</thead>
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<tr>
<td></td>
<td>N = 102</td>
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<tr>
<td>ATSSPH-S</td>
<td>1.7785</td>
<td>.4350</td>
</tr>
<tr>
<td>BAPS</td>
<td>4.3170</td>
<td>.7111</td>
</tr>
<tr>
<td>Total CMI</td>
<td>4.4593</td>
<td>1.1207</td>
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<tr>
<td>Politics and Law</td>
<td>6.2876</td>
<td>1.5618</td>
</tr>
<tr>
<td>Education and Training</td>
<td>3.0322</td>
<td>1.6961</td>
</tr>
<tr>
<td>Business and Work</td>
<td>4.2905</td>
<td>1.2067</td>
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<tr>
<td>Interpersonal Relations</td>
<td>4.2270</td>
<td>1.2082</td>
</tr>
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</table>

*Note.* N = 102. ATSSPH-S = Attitudes Toward Seeking Professional Psychological Help (Fischer & Farina, 1995); BAPS = Beliefs About Psychological Services (Ægisdóttir & Gerstein, 2009); CMI = Cultural Mistrust Inventory (Terrell & Terrell, 1981).

**Main Analyses**

The following hypotheses were tested with alpha level set at .05:

1.a. There will be a relationship between the attitudes and beliefs of Arabs in Israel toward seeking psychological help and the ethnicity of the psychological health provider such that when the psychological help provider’s ethnicity is Arab, the attitudes and beliefs of Arabs in Israel will be more favorable toward seeking professional psychological help.
1.b. When the psychological help provider’s ethnicity is Jewish, the attitudes and beliefs of Arabs in Israel will be less favorable toward seeking professional psychological help.

2.a. There will be a relationship between the level of cultural mistrust of the participants and their attitudes and beliefs toward seeking professional psychological help from a Jewish psychological help provider.

2.b. As the level of cultural mistrust increases, the attitudes and beliefs of the participants toward seeking professional psychological help from a Jewish psychological help provider will be less favorable.

To test the above hypotheses, a between-subjects multivariate analysis of variance (MANOVA) was conducted with the ethnicity of the psychological help provider and the level of cultural mistrust toward Jews as the independent variables and scores on the Attitudes Toward Seeking Professional Psychological Services (ATSPPH-S) and the Beliefs About Psychological Services (BAPS) as the dependent variables. This resulted in a 2 x 2 (ethnicity of psychological help provider x level of cultural mistrust) design. Before conducting the MANOVA, a Box’s M test was computed to ensure that the population covariance matrices for the dependent variables are equal (Stevens, 2002). The Box’s M test was insignificant (F = .75, p > .05) indicating equal covariance matrices and a robust MANOVA. In addition, the normality assumption was tested for each variable using the Shapiro-Wilk test. The univariate normality assumptions were met, which indicated that the multivariate normality assumption of the MANOVA would likely be met.
Figure 1: Test of the assumption of normality with the independent variable of cultural mistrust

Means and standard deviations for the scores on the ATSPPH-S and the BAPS by the ethnicity of the psychological help provider and the level of cultural mistrust are presented in Table 3.
Table 3

*Adjusted Means and Standard Deviations for the BAPS and the ATSPPH-S*

<table>
<thead>
<tr>
<th>Independent Variables</th>
<th>BAPS</th>
<th></th>
<th>ATSPPH-S</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>Jewish Help Provider</td>
<td>4.26</td>
<td>.693</td>
<td>1.79</td>
<td>.420</td>
</tr>
<tr>
<td>Arab Help Provider</td>
<td>4.37</td>
<td>.730</td>
<td>1.76</td>
<td>.452</td>
</tr>
<tr>
<td>Hi CMI</td>
<td>4.32</td>
<td>.750</td>
<td>1.76</td>
<td>.480</td>
</tr>
<tr>
<td>Lo CMI</td>
<td>4.32</td>
<td>.677</td>
<td>1.80</td>
<td>.389</td>
</tr>
<tr>
<td>Jewish Help Provider</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hi CMI</td>
<td>4.30</td>
<td>.716</td>
<td>1.80</td>
<td>.440</td>
</tr>
<tr>
<td>Lo CMI</td>
<td>4.23</td>
<td>.682</td>
<td>1.78</td>
<td>.407</td>
</tr>
<tr>
<td>Arab Help Provider</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hi CMI</td>
<td>4.33</td>
<td>.796</td>
<td>1.72</td>
<td>.521</td>
</tr>
<tr>
<td>Lo CMI</td>
<td>4.40</td>
<td>.674</td>
<td>1.81</td>
<td>.380</td>
</tr>
</tbody>
</table>

*Note.*  
*N* = 102. ATSPPH-S = Attitudes Toward Seeking Professional Psychological Help (Fischer & Farina, 1995); BAPS = Beliefs About Psychological Services (Ægisdóttir & Gerstein, 2009); CMI = Cultural Mistrust Inventory (Terrell & Terrell, 1981).

**Hypotheses 1.a. and 1.b.** Results of the MANOVA are presented in Table 4 and in figure 2 and figure 3. As can be seen in Table 4 and in figures 2 and 3, the attitudes of the participants toward seeking professional psychological help and their beliefs about psychological services...
when the psychological help provider was Arab were not significantly different from those attitudes and beliefs when the psychological help provider was Jewish $F(2, 97) = .85, p > .05$. Instead, the participants’ scores on the ATSPPH-S and the BAPS when the psychological help provider was Arab were similar to scores on these scales when the psychological help provider was Jewish. Thus, it appears that the attitudes toward seeking professional psychological help and beliefs about psychological services are not related to the ethnicity of the psychological help provider. Thus, Hypotheses 1.a. and 1.b. were not supported.

Table 4

Results of the MANOVAs

<table>
<thead>
<tr>
<th>Effects</th>
<th>Pillai’s Trace</th>
<th>F</th>
<th>Hypoth.</th>
<th>DF</th>
<th>Error DF</th>
<th>Sign. of F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethnicity of Help Provider</td>
<td>.017</td>
<td>.851</td>
<td>2</td>
<td>97</td>
<td>.430</td>
<td></td>
</tr>
<tr>
<td>Level of CMI</td>
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<td>.130</td>
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<td>97</td>
<td>.878</td>
<td></td>
</tr>
<tr>
<td>Ethnicity by CMI</td>
<td>.004</td>
<td>.194</td>
<td>2</td>
<td>97</td>
<td>.824</td>
<td></td>
</tr>
</tbody>
</table>

Note. $N = 102$. CMI = Cultural Mistrust Inventory (Terrell & Terrell, 1981).
Attitudes toward Help Seeking

A series of one-way ANOVAs were conducted and indicated a significant difference in Attitudes Toward Seeking Professional Psychological Help. Differences on the ATSPPH-S were found for academic class rank ($F(3,97) = 3.78$, $p < .05$) (see Table 5). A post-hoc Tukey test
revealed that freshmen scored significantly higher on ATSPPH-S than forth and fifth year students (p < .05) (see Table 6).

Table 5

*One-way ANOVA for Year in School Differences on ATSPPH-S*

<table>
<thead>
<tr>
<th></th>
<th>Sum of Squares</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>ATSPPH-S Between Groups</td>
<td>1.988</td>
<td>3</td>
<td>.633</td>
<td>3.776</td>
<td>.013*</td>
</tr>
<tr>
<td>ATSPPH-S Within Groups</td>
<td>17.021</td>
<td>97</td>
<td>.175</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>19.009</td>
<td>100</td>
<td></td>
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<td></td>
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</table>

Note.  

*N = 102. ATSPPH-S = Attitudes Toward Seeking Professional Psychological Help (Fischer & Farina, 1995).

*p < .05.
### Table 6

*Tukey HSD for ATSPPH-S for Entire Sample*

<table>
<thead>
<tr>
<th>Scale</th>
<th>Year in School</th>
<th>Mean Difference</th>
<th>Standard Error</th>
<th>Sig.</th>
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</thead>
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<tr>
<td>ATSPPH-S</td>
<td>Freshman</td>
<td>.126</td>
<td>.103</td>
<td>.618</td>
</tr>
<tr>
<td></td>
<td>Sophomore</td>
<td>.126</td>
<td>.103</td>
<td>.618</td>
</tr>
<tr>
<td></td>
<td>Junior</td>
<td>.243</td>
<td>.117</td>
<td>.171</td>
</tr>
<tr>
<td></td>
<td>Fourth &amp; Fifth Yr.</td>
<td>.410</td>
<td>.129</td>
<td>.011*</td>
</tr>
</tbody>
</table>

*Note.*  
$N = 102$. ATSPPH-S = Attitudes Toward Seeking Professional Psychological Help (Fischer & Farina, 1995).

*p < .05.*

Research reports a relationship between previous experience with psychological help services and attitudes toward help seeking. Participants with prior counseling experience tend to express more favorable attitudes toward seeking psychological help than those without prior counseling experience (Fischer & Farina, 1995; Fischer & Turner, 1970). The researcher wanted to explore the relationships between the attitudes and beliefs of Arabs in Israel toward help seeking, the ethnicity of the psychological help provider, and the level of cultural mistrust toward Jews when participants with previous experience with psychological help were excluded. Thus, another between subjects MANOVA was conducted with the exclusion of participants who reported having received psychological help. A total of 13 participants who received previous psychological help were excluded from further analysis.
Means and standard deviations for the scores on the ATSPPH-S and the BAPS by the ethnicity of the psychological help provider and the level of cultural mistrust when participants with previous experience with psychological services were excluded are presented in Table 7.

Table 7

Adjusted Means and Standard Deviations for the BAPS and the ATSPPH-S when Participants with Previous Experience were Excluded

<table>
<thead>
<tr>
<th>Independent Variables</th>
<th>BAPS</th>
<th>ATSPPH-S</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>Jewish Help Provider</td>
<td>4.29</td>
<td>.712</td>
</tr>
<tr>
<td>Arab Help Provider</td>
<td>4.32</td>
<td>.717</td>
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<tr>
<td>Hi CMI</td>
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<td>Lo CMI</td>
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</tr>
<tr>
<td>Lo CMI</td>
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</tr>
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<td>.803</td>
</tr>
<tr>
<td>Lo CMI</td>
<td>4.36</td>
<td>.635</td>
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</table>

Note. N = 89. ATSPPH-S = Attitudes Toward Seeking Professional Psychological Help (Fischer & Farina, 1995); BAPS = Beliefs About Psychological Services (Ægisdóttir & Gerstein, 2009); CMI = Cultural Mistrust Inventory (Terrell & Terrell, 1981).

The MANOVA results indicated no significant main or interaction effects on the ATSPPH-S and the BAPS with this sample (see Table 8). A series of one-way ANOVAs were conducted and
indicated a significant difference in Attitudes Toward Seeking Professional Psychological Help ($F(3,85) = 3.34$, $p < .05$) (see Table 9), which post-hoc tests showed was between freshmen and fourth and fifth year students ($p < .05$) (see Figure 4); freshmen scored higher on the ATSPPH-S than the fourth and fifth year students (see Table 9). In addition, there was a significant difference in the Beliefs About Psychological Services ($F(3,85) = 3.13$, $p < .05$), with post-hoc tests showing differences between sophomores and fourth and fifth year students ($p < .05$); sophomores scored higher on the BAPS than the fourth and fifth year students, $p < .05$) (see Table 10 and Figure 5).

Table 8

*Results of the MANOVAs when Participants with Previous Psychological Help were Excluded*

<table>
<thead>
<tr>
<th>Effects</th>
<th>Pillai’s Trace</th>
<th>F</th>
<th>Hypoth. DF</th>
<th>Error DF</th>
<th>Sign. of F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethnicity of Help Provider</td>
<td>.018</td>
<td>.763</td>
<td>2</td>
<td>84</td>
<td>.469</td>
</tr>
<tr>
<td>Level of CMI</td>
<td>.014</td>
<td>.593</td>
<td>2</td>
<td>84</td>
<td>.555</td>
</tr>
<tr>
<td>Ethnicity by CMI</td>
<td>.022</td>
<td>.931</td>
<td>2</td>
<td>84</td>
<td>.398</td>
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</table>

*Note.* $N = 89$. CMI = Cultural Mistrust Inventory (Terrell & Terrell, 1981).
Table 9

ANOVA when Previous Psychological Help is Excluded

<table>
<thead>
<tr>
<th></th>
<th>Sum of Squares</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
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<td>ATSPPH-S</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Between Groups</td>
<td>1.740</td>
<td>3</td>
<td>.580</td>
<td>3.343</td>
<td>.023*</td>
</tr>
<tr>
<td>Within Groups</td>
<td>14.743</td>
<td>85</td>
<td>.175</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>16.483</td>
<td>88</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BAPS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Between Groups</td>
<td>4.428</td>
<td>3</td>
<td>1.476</td>
<td>3.134</td>
<td>.030*</td>
</tr>
<tr>
<td>Within Groups</td>
<td>40.036</td>
<td>85</td>
<td>.471</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>44.464</td>
<td>88</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note.  
N = 89. ATSPPH-S = Attitudes Toward Seeking Professional Psychological Help (Fischer & Farina, 1995); BAPS = Beliefs About Psychological Services (Ægisdóttir & Gerstein, 2009).

*p < .05.
Table 10

*Tukey HSD for ATSPPH-S and BAPS when Previous Psychological Help is Excluded*

<table>
<thead>
<tr>
<th>Year in School</th>
<th>Mean Difference</th>
<th>Standard Error</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freshman</td>
<td>.081</td>
<td>.112</td>
<td>.890</td>
</tr>
<tr>
<td>Sophomore</td>
<td>.198</td>
<td>.123</td>
<td>.379</td>
</tr>
<tr>
<td>Junior</td>
<td>.413</td>
<td>.137</td>
<td>.018*</td>
</tr>
<tr>
<td>Fourth &amp; Fifth Yr.</td>
<td>.604</td>
<td>.225</td>
<td>.042*</td>
</tr>
</tbody>
</table>

**ATSPPH-S**

**BAPS**

<table>
<thead>
<tr>
<th>Year in School</th>
<th>Mean Difference</th>
<th>Standard Error</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sophomore</td>
<td>.025</td>
<td>.185</td>
<td>.999</td>
</tr>
<tr>
<td>Freshman</td>
<td>.314</td>
<td>.201</td>
<td>.406</td>
</tr>
<tr>
<td>Junior</td>
<td>.604</td>
<td>.225</td>
<td>.042*</td>
</tr>
</tbody>
</table>

*Note.* $N = 89$. ATSPPH-S = Attitudes Toward Seeking Professional Psychological Help (Fischer & Farina, 1995); BAPS = Beliefs About Psychological Services (Ægisdóttir & Gerstein, 2009).

*$p < .05$.***
Figure 4. Means of ATSPPH-S as a Function of Year in School.

Figure 5. Means of BAPS as a Function of Year in School.
Cultural Mistrust and ATSPPH-S and BAPS

**Hypothesis 2.a.** Results of the MANOVA, as presented in Table 4, indicate that the attitudes of the participants toward seeking professional psychological help and their beliefs about psychological services were not related to their cultural mistrust. The attitudes of the participants toward seeking professional psychological help and their beliefs about psychological services when their cultural mistrust was high were not significantly different from those attitudes and beliefs when the cultural mistrust of the participants was low, $F(2,97) = .88, p > .05$. Instead, the participants’ scores on the ATSPPH-S and the BAPS when cultural mistrust was high were similar to their scores on these scales when their cultural mistrust was low. Thus, it appears that the attitudes toward seeking professional psychological help and beliefs about psychological services are not related to the cultural mistrust level. Therefore, hypothesis 2.a. was not supported.

**Hypothesis 2.b.** The results of the MANOVA in table 4 show that the Ethnicity of the psychological help provider X Cultural Mistrust level interaction was not significant. The attitudes and beliefs about psychological services when the cultural mistrust was high and when the psychological help provider was Jewish were similar to those attitudes and beliefs when cultural mistrust was low and when the psychological help provider was Arab, $F(2,97) = .19, p < .05$. Hypothesis 2.b. was not supported.

**Additional Analyses**

The results indicated that after reading the vignettes about the Jewish and the Arab psychological help providers, 82% of the Muslim participants, 78% of the Christian participants, and 50% of the Druze or ‘other’ religion participants reported they would choose to see an Arab psychological help provider. This result has led the researcher to hypothesize that the likelihood
that a participant would choose an Arab psychological help provider is related to his or her religion. A chi-square test of independence was performed to examine the relation between the religion of participants and the choice of an Arab help provider. The relation between these two variables was significant $\chi^2 (2, N = 95) = 6.27, p < .05$. Muslims and Christians were more likely to choose to see an Arab help provider than Druze and participants who reported ‘other’ as religion. Thus, logistic regression analysis was conducted.

**Logistic Regression Analysis**

Logistic regression analysis was conducted to test the hypothesis regarding the relationship between the likelihood that participants will choose an Arab psychological help provider based on their religion. The dependent variable was the ethnicity of the psychological help provider (1 = Arab, 0 = Jewish) and the predictors were the religion of the participant, which was coded as 1 = Muslim, 2 = Christian, and 3 = Druze or ‘other’ religion. This sample consisted of 67% ($n = 65$) Muslim, 23% ($n = 22$) Christian, and 10% ($n = 10$) Druze or ‘other.’ Other variables such as previous psychological help, cultural mistrust, beliefs about psychological servicers, and attitudes toward seeking professional psychological services were also used as predictors. Results of the logistic regression analysis are presented in Table 11.
Table 11

Logistic Regression Analysis of 97 participant’s choice of Psychological Help Provider

<table>
<thead>
<tr>
<th>Predictor</th>
<th>B</th>
<th>SE B</th>
<th>Wald’s df</th>
<th>p</th>
<th>Exp(B)</th>
<th>lower</th>
<th>upper</th>
</tr>
</thead>
<tbody>
<tr>
<td>Religion (Muslim)</td>
<td>1.091</td>
<td>.958</td>
<td>1.296</td>
<td>.255</td>
<td>2.978</td>
<td>.455</td>
<td>19.490</td>
</tr>
<tr>
<td>Religion (Christian)</td>
<td>1.089</td>
<td>1.120</td>
<td>.945</td>
<td>.331</td>
<td>2.970</td>
<td>.331</td>
<td>26.685</td>
</tr>
<tr>
<td>Previous psych. help</td>
<td>-2.093</td>
<td>.992</td>
<td>4.450</td>
<td>.035</td>
<td>.123</td>
<td>.018</td>
<td>.862</td>
</tr>
<tr>
<td>CMI-PL</td>
<td>.591</td>
<td>.262</td>
<td>5.078</td>
<td>.024</td>
<td>1.805</td>
<td>1.080</td>
<td>3.018</td>
</tr>
<tr>
<td>CMI-BW</td>
<td>-1.556</td>
<td>.530</td>
<td>8.611</td>
<td>.003</td>
<td>.211</td>
<td>.075</td>
<td>.596</td>
</tr>
<tr>
<td>CMI-IR</td>
<td>1.508</td>
<td>.580</td>
<td>6.767</td>
<td>.009</td>
<td>4.520</td>
<td>1.451</td>
<td>14.084</td>
</tr>
</tbody>
</table>

Note. CMI = Cultural Mistrust Inventory (Terrell & Terrell, 1981). PL = Politics and Law; BW = Business and Work; IR = Interpersonal Relations.

The log of the odds of a Muslim or a Christian participant choosing an Arab psychological help provider was not significantly related to their religion. Even though Muslims and Christian were about 3 times more likely to choose an Arab psychological help provider (Exp(B) = 2.98, p > .05, and Exp(B) = 2.97, p > .05 respectively), this probability did not reach the level of significance.

The log-odds of choosing an Arab psychological help provider was negatively related to their previous psychological help (Exp(B) = .12, p < .05). In other words, the odds of choosing an Arab psychological help provider decreased 88% when the participant had previous psychological help.

The log-odds of a participant choosing an Arab psychological help provider was positively related to their cultural mistrust toward Jews in the areas of Politics and Law and
Attitudes toward Help Seeking

Interpersonal Relations (Exp (B) = 1.81; \( p < .05 \)). The odds of choosing an Arab psychological help provider increased as their cultural mistrust toward Jews in the areas of Politics and Law and Interpersonal Relations increased. However, the log-odds of a participant choosing an Arab psychological help provider was negatively related to their cultural mistrust toward Jews in the area of Business and Work (Exp (B) = .21, \( p > .05 \)). In other words, the odds of choosing an Arab psychological help provider decreased 79% as their cultural mistrust toward Jews in the area of Business and Work increased.

Correlations

A series of Pearson correlations were calculated to examine relationships among the measures and all the demographic variables. Bonferroni corrections were made for all correlations to decrease type I error. Correlations between measures and variables and significant relationships are displayed in Table 12.

The relationships between participants’ scores on the four subscales of the CMI were examined. All subscale scores on the CMI had statistically significant positive correlations with each other indicating that participants tended to score similarly on all subscales of the CMI. Pearson’s r for the correlations among the subscales ranged from .395 to .785 at the .01 level. Significant correlation was also found between scores on the total CMI and all the subscales CMI-PL (\( r = .763, p < .01 \)), CMI-ET (\( r = .764, p < .01 \)), CMI-BW (\( r = .804, p < .01 \)), and CMI-IR (\( r = .849, p < .01 \)).

Significantly positive correlations were identified between scores on the overall CMI and religion, specifically being Muslim, (\( r = .206, p < .05 \)), ethnicity of psychological help provider (\( r = .222, p < .05 \)), and previous help (\( r = .217, p < .05 \)). This indicates that Muslim participants hold more cultural mistrust toward Jews than Christian, Druze, and other participants. In
addition, these correlations indicate that participants with a higher level of cultural mistrust toward Jews would choose an Arab psychological help provider rather than a Jewish one. Furthermore, participants with a higher level of cultural mistrust toward Jews tended to have no previous experience with psychological help.

Similarly, significantly positive correlations were found between scores on the CMI-PL and religion ($r = .202, p < .05$) and ethnicity of psychological help provider ($r = .291, p < .01$). These correlations indicate that Muslim participants had a higher level of cultural mistrust toward Jews on the PL subscale and that those participants with a higher level of cultural mistrust toward Jews on the PL subscale would choose an Arab psychological help provider if the need arises and if they are given the chance to choose between an Arab or a Jewish help provider.

Similarly, a significant positive correlation was identified between scores on the CMI-IR and choosing an Arab psychological help provider ($r = .205, p < .05$). This indicates that those participants who hold more cultural mistrust toward Jews on the Interpersonal Relations subscale
### Table 12
**Correlations Matrix of Variables Measured**

<table>
<thead>
<tr>
<th>Variables</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
<th>13</th>
<th>14</th>
<th>15</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. ATSPPH-S</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. BAPS</td>
<td>.668**</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. CMI (total)</td>
<td>-.078</td>
<td>-.062</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. CMI-PL</td>
<td>-.006</td>
<td>.085</td>
<td>.763**</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>5. CMI-ET</td>
<td>-.074</td>
<td>-.024</td>
<td>.764**</td>
<td>.395**</td>
<td>1.00</td>
<td></td>
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<td></td>
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<td></td>
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</tr>
<tr>
<td>6. CMI-BW</td>
<td>-.091</td>
<td>-.179</td>
<td>.804**</td>
<td>.470**</td>
<td>.420**</td>
<td>1.00</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>7. CMI-IR</td>
<td>-.087</td>
<td>-.127</td>
<td>.849**</td>
<td>.514**</td>
<td>.500**</td>
<td>.785**</td>
<td>1.00</td>
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<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>8. Muslim</td>
<td>-.012</td>
<td>.010</td>
<td>.206*</td>
<td>.202*</td>
<td>.188</td>
<td>.133</td>
<td>.106</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>9. Age</td>
<td>-.251*</td>
<td>-.174</td>
<td>-.230*</td>
<td>-.140</td>
<td>-.128</td>
<td>-.227*</td>
<td>-.267**</td>
<td>-.237*</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Gender</td>
<td>.159</td>
<td>.276**</td>
<td>-.233*</td>
<td>.027</td>
<td>-.233</td>
<td>.040</td>
<td>-.030</td>
<td>.010</td>
<td>-.133</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Provider Ethnicity</td>
<td>.135</td>
<td>.157</td>
<td>.222*</td>
<td>.291**</td>
<td>.154</td>
<td>.030</td>
<td>.205*</td>
<td>-.113</td>
<td>.196*</td>
<td>-.174</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Father’s education</td>
<td>.323**</td>
<td>.127</td>
<td>.144</td>
<td>.187</td>
<td>.084</td>
<td>.055</td>
<td>.120</td>
<td>.144</td>
<td>-.234*</td>
<td>-.044</td>
<td>.249*</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Previous help</td>
<td>.215*</td>
<td>.048</td>
<td>.217*</td>
<td>-.022</td>
<td>.005</td>
<td>.217*</td>
<td>.169</td>
<td>-.005</td>
<td>-.177</td>
<td>.159</td>
<td>.014</td>
<td>-.004</td>
<td>1.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Year in school</td>
<td>-.322**</td>
<td>-.246*</td>
<td>-.065</td>
<td>-.034</td>
<td>.046</td>
<td>-.131</td>
<td>-.131</td>
<td>-.041</td>
<td>.751**</td>
<td>-.130</td>
<td>.096</td>
<td>-.212*</td>
<td>-.225*</td>
<td>1.00</td>
<td></td>
</tr>
<tr>
<td>15. Place of residence</td>
<td>.048</td>
<td>-.066</td>
<td>-.060</td>
<td>.014</td>
<td>-.102</td>
<td>.005</td>
<td>-.103</td>
<td>-.268**</td>
<td>-.229*</td>
<td>-.134</td>
<td>-.248*</td>
<td>.057</td>
<td>-.011</td>
<td>.131</td>
<td>1.00</td>
</tr>
</tbody>
</table>

**Note.**  
ATSPPH-S = Attitudes Toward Seeking Professional Psychological Help-Short Form (Fischer & Farina, 1995); BAPS = Beliefs About Psychological Services (Ægisdóttir and Gerstein, 2009); CMI = Cultural Mistrust Inventory (Terrell & Terrell, 1981); CMI-PL = CMI- Politics and Law; CMI-ET = CMI- Education and Training; CMI-BW = CMI- Business and Work; CMI-IR = CMI – Interpersonal Relations.  
*p < .05  **p < .01
would choose an Arab help provider if given the opportunity to choose between an Arab and a Jewish help provider. Another significantly positive correlation was identified between the CMI-BW and prior experience with psychological help \( (r = .217, p < .05) \). This indicates that as cultural mistrust of participants toward Jews in the Interpersonal Relations domain increased, they tended to have no previous experience with psychological help.

Significantly positive correlations were identified between ATSPPH-S and the BAPS \( (r = .668, p < .01) \). This indicates that participants expressed their attitudes toward help seeking similarly on both scales. Furthermore, significant positive correlations were identified between scores on the ATSPPH-S and the father’s education \( (r = .323, p < .01) \) and between scores on the ATSPPH-S and previous help \( (r = .215, p < .05) \). This shows that participants whose fathers had a higher level of education and who had previous experience with psychological help, had more favorable attitudes toward seeking help.

The BAPS and gender were also significantly correlated in a positive direction \( (r = .276, p < .01) \) indicating that females had more favorable beliefs about psychological services than males. Finally, a significantly positive correlation was found between the ethnicity of the psychological help provider and age \( (r = .196, p < .05) \) and between the ethnicity of the psychological help provider and the father’s highest education \( (r = .249, p < .05) \). This indicates that participants who are older and whose fathers have a higher level of education would prefer to see an Arab psychological help provider.

Significantly negative correlations were also identified. ATSPPH-S had a significantly negative correlation with age \( (r = -.251, p < .05) \) and with year in school \( (r = -.322, p < .01) \) indicating that older participants and those who were more advanced in
their year of study had less favorable attitudes toward seeking help. Similarly, BAPS and year in school correlated negatively ($r = -0.246, p < 0.05$), indicating that participants who were more advanced in their year of study had less favorable beliefs about seeking psychological help. In addition, scores on the CMI, CMI-BW, and CMI-IR had significantly negative correlations with age ($r = -0.230, p < 0.05$, $r = -0.227, p < 0.05$, and $r = -0.267, p < 0.01$ respectively). These correlations indicate that younger participants had more cultural mistrust toward Jews, in general, and in the domains of Business and Work and Interpersonal Relations. Moreover, scores on the CMI were significantly correlated in the negative direction with gender ($r = -0.233, p < 0.05$). This correlation indicates that males had significantly more cultural mistrust toward Jews than females. Also, a significantly negative correlation was found between the ethnicity of the psychological help provider and the current place of residence ($r = -0.248, p < 0.05$). In other words, participants who lived in a city tended to choose a Jewish help provider compared to those who lived in a village. Finally, a significantly negative correlation was found between the year in school and having received psychological help in the past ($r = -0.225, p < 0.05$) indicating that participants who are more advanced in their studies were more likely to have had received psychological help.

**Summary**

In Summary, hypotheses 1.a., 1.b., 2.a., and 2.b. were not supported. For this sample, there was not a significant relationship between the attitudes and beliefs of Arabs in Israel toward seeking psychological help and the ethnicity of the psychological help provider. Further, there was not a significant relationship between cultural mistrust of this sample and their attitudes and beliefs toward seeking professional psychological help.
from a Jewish psychological health provider. However, significant differences were
found between freshmen and fourth and fifth year students on the ATSPPH-S. Freshmen
had significantly more favorable attitudes toward seeking professional psychological help
than fourth and fifth year students. When participants with previous psychological help
were excluded, significant differences were found on the ATSPPH-S between freshmen
and fourth and fifth year students. Freshmen had more favorable attitudes toward seeking
professional psychological help than fourth and fifth year students. Significant differences
were also found on the BAPS between sophomores and fourth and fifth year students.
Sophomores had significantly more positive beliefs about psychological services than
fourth and fifth year students. Muslim and Christian participants were more likely to
choose an Arab psychological help provider as their cultural mistrust in the domains of
Politics and Law and Interpersonal Relations increased. However, Muslim and Christian
participants were less likely to choose an Arab psychological help provider when they
had previous psychological help and as their cultural mistrust in the realm of business and
work increased. Results indicated strong significant and positive correlations between
attitudes toward help seeking and variables such as father’s highest level of education and
previous psychological help. There was a significant negative correlation between
attitudes toward help seeking and age and year in school. Similarly, beliefs about
psychological help correlated negatively with year in school. Furthermore, a strong
positive correlation was found between beliefs about psychological help and gender. The
level of cultural mistrust correlated significantly in the positive direction with variables
such as religion, ethnicity of psychological help provider, and previous psychological
help. The level of cultural mistrust had significant negative correlations with age and
gender. Limitations in the study, and implications for future research and practice will be discussed.
Chapter 5: Discussion

The purpose of this study was to explore the relationship between the attitudes of Arabs in Israel toward seeking psychological help, the ethnicity of the psychological health provider, and the level of cultural mistrust toward Jews. The first two hypotheses of this study stated that attitudes toward seeking professional psychological help of Arabs in Israel would be related to the ethnicity of the psychological help provider. It was expected that these attitudes and beliefs would be more favorable when the psychological help provider is Arab and that they would be less favorable when the psychological help provider is Jewish. Results obtained indicated that the attitudes and beliefs toward help seeking among Arabs in Israel were not significantly related to the ethnicity of the psychological help provider. These findings did not provide evidence that the attitudes and beliefs of Arab undergraduate students from Israel in this sample were related to the ethnicity of the psychological help provider. Therefore, the first two hypotheses in this study were rejected.

Attitudes toward Help Seeking

An examination of the means on the ATSPPH-S indicated that when the psychological help provider was Arab or Jewish the means were very similar; this was also true for the BAPS. Overall, this sample tended to have more favorable attitudes toward help seeking as evident in their mean scores on the BAPS. One explanation for these findings might be that participants in this sample only considered their attitudes toward seeking help regardless of the ethnicity of the help provider, as the ethnicity of the help provider was irrelevant.
Cultural Mistrust

Hypothesis 2.a. indicated that there would be a relationship between the level of cultural mistrust of the participants and their attitudes toward seeking professional psychological help from a Jewish psychological health provider. The results did not find a significant relationship between the attitudes toward seeking professional psychological help of Arab undergraduates from Israel and their cultural mistrust toward Jews. Therefore, hypothesis 2.a. was also rejected.

This finding is consistent with the results of a study conducted by McNeil (2002). McNeil examined the influence of cultural mistrust on help seeking preferences of African American college students. She found African American students with low cultural mistrust preferred to seek help from informal help providers such as friends. Moreover, when considering seeking help from formal help providers, African American students did not indicate that it was important to receive that help from an African American help provider. Cultural mistrust was not a significant factor in seeking help from formal help providers for this population.

Hypothesis 2.b. stated that a higher level of cultural mistrust toward Jews would predict less favorable attitudes and beliefs toward seeking help from a Jewish psychological help provider. Results of analyses for Hypothesis 2.b. indicated that a high level of cultural mistrust toward Jews was not significantly related to less favorable attitudes and beliefs toward help seeking from a Jewish psychological help provider. These findings did not provide any significant evidence that attitudes and beliefs toward help seeking from a Jewish psychological help provider are less favorable when cultural mistrust toward Jews is high. These results are inconsistent with previous research. David
(2010) studied 118 Filipino Americans. David examined the relationship between cultural mistrust among Filipino Americans toward White Americans and their attitudes toward help seeking. The results indicated a negative correlation between cultural mistrust and attitudes toward help seeking.

The results of the present study indicate that the scores on the CMI for this sample varied on the CMI subscales. Scores were highest on the Politics and Law subscale and lowest on the Education and Training subscale. Scores on the Business and Work subscale and on the Interpersonal Relations subscale fell in the mid range. These results suggest that the highest level of cultural mistrust among this sample was in the area of politics and law. One might hypothesize that psychological help falls within the realm of “interpersonal relations.” Since scores on this subscale were moderate, it is not surprising that cultural mistrust did not influence this sample’s attitudes about seeking help from a Jewish help provider.

Year in School

Results indicated a significant difference in attitudes toward help seeking on the ATSPPH-S between freshmen and 4th and 5th year students such that freshmen had significantly more favorable attitudes toward help seeking than 4th and 5th year students. Further, when participants who received psychological help in the past were excluded from data analysis a significant difference in attitudes toward help seeking between freshmen and 4th and 5th year students was also found. Additionally, a significant difference in attitudes toward help seeking as measured by the BAPS was found between sophomores and 4th and 5th year students. This pattern of less favorable attitudes toward
help seeking as participants advance in their year in school of may be explained by more endorsement of cultural and religious beliefs as participants advance in age.

Al-Krenawi and Graham (2011) studied the attitudes toward help seeking of 195 Arab undergraduate students from Haifa University, Israel. The participants were Muslim, Christian, and Druze. The researchers used the Orientations for Seeking Professional Help Scale (OSPH), which has four factors: Recognition of need for psychological help, stigma tolerance, interpersonal openness, and confidence in mental health professionals. In addition, using a focus group, they developed an instrument that assessed cultural beliefs about traditional healing and biomedical health system. Their findings indicated that Christian participants showed more interpersonal openness on the OSPH than Muslim and Druze participants. The results also showed that Christian participants were more stigma tolerant and were more ready to use mental health systems. Moreover, Christian participants believed significantly less in traditional healing than Muslims and Druze participants. This finding may explain the decrease in favorable attitudes and beliefs toward help seeking among Arab undergraduates from Israel in the present study. This finding is not solely reserved to the Arab minority community in Israel, as African Americans with strong ethnic affiliations, have also been found to explain behavior and emotions according to supernatural, spiritual, and religious theories (Cheung & Snowden, 1990). Thus, as So, Gilbert, and Romero (2005) contend, individuals in many ethnic minorities utilize prayers and spirituality as coping resources instead of psychotherapy.

Faith based treatments are not only specific to Muslims and African Americans; Pentecostals, for example, believe that if depression persists for a long time the person is
not practicing his or her faith properly, as practices such as fasting, reading the Bible, and confessing sin, are believed to be the best solutions for psychological problems (Trice & Bjorck, 2006). Trice and Bjorck assessed views about treatments for depression among 230 Pentecostal students at a Charismatic Bible training school in the US and found that participants rated faith as the most effective treatment for depression. Specifically, they endorsed reading the Bible as the most effective practice for treating depression. The participants also reported doubts about the effectiveness of psychological help. These findings may explain the underutilization of psychological services by some religious groups. Since it was found that Muslims, more than members of other religions, believe in supernatural causes of mental illness (Al-Krenawi & Graham, 2011), it is reasonable to assume that as our sample advance in age, they may endorse religious views regarding mental health causes and believe in faith based approaches to relieve psychological problems.

Similarly, using a hierarchical multiple regression, Aloud (2004) found that cultural and traditional beliefs about psychological problems, among an Arab Muslim population in Columbus, Ohio was one of the best predictors of attitudes toward formal psychological services. Aloud recruited 281 Arab Muslims from Columbus, Ohio and developed the Attitude Toward Seeking Formal Mental Health Service (ATSFMHS) to assess participants’ attitudes toward help seeking. The ATSFMHS is an adapted version of the Attitudes Toward Seeking Professional Psychological Help (ATSPPH; Fischer & Turner, 1970). It uses Arabic and Islamic terms and concepts. For example, the item “A person with a strong character can get over mental conflicts by himself, and would have little need of a therapist” in the ATSPPH was changed into “A person with strong IMAN
[faith] can get rid of a mental health or psychological problem without the need of professional help” (Aloud, 2004, p. 50). Aloud also assessed participants’ cultural, traditional, and religious beliefs about the causes and treatment of psychological problems among Arab Muslims using the Cultural Beliefs About Mental Health Problems (CBMHP) that he developed specifically for this study.

The significant difference in attitudes and beliefs about help seeking identified in the present study, between freshmen and sophomores on the one hand and 4th and 5th year students on the other hand may be accounted for by differences in stages of Racial/Cultural Identity Development model (R/CID) (Sue & Sue, 1990). The R/CID includes five stages of development: conformity, dissonance, resistance and immersion, introspection, and integrative awareness. In the first stage, the conformity stage, the individual prefers the cultural values of the dominant group to his own group and his/her attitudes toward him/herself and toward his/her minority group and other minority groups are negative (Sue & Sue, 2003).

In the second stage, dissonance, the individual comes across information that is inconsistent with the values, attitudes, and beliefs of the dominant group. The individual at this stage may experience a conflict between attitudes appreciating and depreciating himself or herself, his minority group, other minority groups, and the dominant group. In the third stage, resistance and immersion, the individual endorses his minority group’s views entirely and rejects those of the dominant group. At this stage, the individual appreciates himself, his minority group, and holds depreciative attitudes toward the dominant group. In the fourth stage, introspection, the individual begins to question his negativity toward the dominant group. In the last stage, integrative awareness, the
individual develops an inner sense of security and can appreciate aspects of his own culture and of the dominant culture, as well. At this stage, the individual may feel that he should eliminate racism at all levels (Sue & Sue, 2003). The freshmen and sophomores in this study might still be at the initial stage of their cultural identity development and, the conformity stage, when they prefer the cultural values of the dominant group over their own group and when they view their minority group and other minority groups negatively (Sue & Sue, 2003). As for the 4th and 5th year students who have more experience at the university, they might be at a later stage of racial/cultural identity development. For example, they might be at the stage of resistance and immersion, when they endorse the views of their minority group and reject those of the dominant group.

Since cultural and religious beliefs about causes and treatments of psychological disorders influence attitudes toward help seeking, it is very probable that 4th and 5th year students might accept the common religious beliefs about causes and treatments of psychological disorders, which leads to less favorable attitudes and beliefs about seeking help from professional psychological help providers. This hypothesis should be explored in future research.

**Previous Psychological Help**

Participants who had previous psychological help were significantly less likely to choose an Arab psychological help provider than participants who did not have previous psychological help. Participants who had a higher level of cultural mistrust toward Jews in the domains of Politics and Law and Interpersonal Relations were significantly more likely to choose an Arab psychological help provider. Finally, participants who had a higher level of cultural mistrust in the realm of Business and Work were significantly less
likely to choose an Arab psychological help provider. One explanation of this finding for Arab participants might be that while they may hold cultural mistrust in the domain of Business and Work, they can still appreciate the competence and skills of Jewish psychological help providers.

**Correlations**

The attitudes toward help seeking as measured by the ATSPPH-S correlated positively with those attitudes as measured by the BAPS, with the father’s highest level of education and with previous psychological help. Those who had more favorable attitudes toward help seeking on the BAPS, those whose fathers had a higher level of education, and those who never had previous psychological help, had more favorable attitudes toward help seeking on the ATSPPH-S. The positive correlation between the attitudes toward help seeking on the ATSPPH-S and on the BAPS are consistent with previous studies (e.g., Ægisdóttir & Gerstein, 2009). The positive correlation between attitudes toward help seeking and the level of the father’s education is consistent with previous research by Fischer and Cohen (1972), where a higher level of education was related to more favorable attitudes toward help seeking. The positive correlation between attitudes toward help seeking and lack of previous psychological help is inconsistent with previous research and warrants further research.

Attitudes toward help seeking correlated negatively with age and with year in school. Older participants and those who were more advanced in their year in school had less favorable attitudes toward help seeking. These correlations are consistent with the results of other analyses of the present study.
The level of cultural mistrust correlated positively with religion, ethnicity of psychological help provider, and previous psychological help. Muslim participants had more cultural mistrust toward Jews. As the level of cultural mistrust toward Jews increased, participants chose an Arab psychological help provider. Those who had no previous psychological help tended to hold more cultural mistrust toward Jews. Cultural mistrust correlated negatively with age and gender; older participants had more cultural mistrust toward Jews. Also, males had more cultural mistrust than females toward Jews. Age correlated positively with the ethnicity of the psychological help provider. Older participants tended to choose an Arab psychological help provider.

**Limitations of the Study**

The results of the current study must be interpreted with caution. The external validity of the study was threatened by the use of convenience sampling. Thus, the generalizability of the study’s results to the Arab population in Israel in general is limited. Future researchers should attempt to obtain a more random sample of Arabs in Israel.

Moreover, research shows that the education level of an individual influences their attitudes toward seeking help (Fischer & Cohen, 1972). Therefore, involving only college students in the study poses another threat to the external validity of the study and limits the generalizability of the results to the Arab population in Israel in general. Future researchers should attempt to obtain a more random sample that is not limited to only college students. The fact that most of the participants were from the University of Haifa posed a potential selection bias. The situation of Arab students in Israel at the University of Haifa is unique and differs from that at other higher education institutions, as the
University of Haifa embraces the highest number of Arab students in Israel, which reaches 20 percent of the overall students (The Jewish-Arab Center [JAC], n.d.). Thus, future researchers should obtain a more representative sample by including participants from various higher education institutions.

The use of self-report data constituted a threat against the internal validity of the study. Even though participants were assured of anonymity, the validity of their responses could not be guaranteed. Future research should use computer-assisted technology to measure attitudes. For example, the Implicit Association Test (IAT) is a computer based measure of implicit attitudes and has been used in several studies. Greenwald and Banaji (1995) defined implicit attitudes as “introspectively unidentified (or inaccurately) identified traces of past experience that mediate favorable or unfavorable feeling, thought, or action toward social objects” (p. 8). They are actions or judgments that are controlled by automatic evaluation without the awareness of the individual of such causation (Greenwald and Banaji, 1995). The IAT would be a good measure as it may resist masking and may reveal attitudes which participants otherwise would not prefer to express (Greenwald, McGhee, & Schwartz, 1998).

Researchers may need to form focus groups and gather information about barriers for seeking help among Arabs in Israel and identify what environmental conditions would foster better utilization of psychological services. As a follow up, researchers may want to validate those barriers through further research. When these barriers are confirmed as significant contributors for the underutilization of psychological services, efforts to eradicate these barriers should be implemented. For example, if stigma proves to be the main barrier to seeking psychological help, universities can assist students in receiving
psychological help in a non-stigmatizing manner. Universities can make a requirement for all students, without exception, to receive a certain number of psychotherapy sessions during the first year.

Participants may have not noticed the ethnicity of psychological help provider that was briefly mentioned at the beginning of the instructions. Future studies need to include a manipulation check in order to verify that participants have noticed the ethnicity of the psychological help provider. Furthermore, the explicit questions about the ethnicity of psychological help provider if participants have received psychological help previously and if they need to seek psychological help in the future may have given strong clues to the study’s focus. Further studies need to ask these questions in a different manner.

Furthermore, future studies need to explore the relationship between other demographic variables, such as the socio-economic status (SES) variables, and attitudes and beliefs toward help seeking among the Arab population in Israel.

Despite the above limitations, the current study provided important information regarding the attitudes and beliefs of Arab college students in Israel toward help seeking; it added to the knowledge base gathered on the relationship between attitudes and beliefs of Arabs in Israel toward help seeking and the ethnicity of psychological help provider and the level of cultural mistrust. Researchers can conduct future studies with a larger sample while addressing the drawbacks of the present study. These future studies can assist relevant entities and policy makers can utilize the results of the study in order to help increase the utilization of psychological services by the Arab population in Israel.
Moreover, despite the limitations of the present study, it provides further validation of the BAPS and the CMI by utilizing them with a non-American sample. The Cronbach’s alpha reliabilities of the BAPS and the CMI in the present study were very similar to those obtained with American samples. This implies that the same constructs have been measured with diverse groups, which contributes to the construct validity of these measures and make them good candidates for use in future studies for further investigation in the realm of attitudes toward help seeking and cultural mistrust among the Arab minority in Israel.

**Implications for Practice**

The present results indicated that only a very small percentage of Arab undergraduates from Israel in this sample have utilized psychological services. Higher education institutions should make college students aware of psychological services available on campus during the orientation of freshmen to college. Additionally, institutions may want to encourage students to use these services through identifying ways to make visiting the college psychological center less threatening and less stigmatizing.

Arabs in Israel may be afraid that approaching ‘Western’ psychological services implies negating their cultural and religious beliefs. Therefore, psychological help providers need to follow the ethical obligation of respecting their clients and make sure they are not biased against their cultural and religious beliefs. Furthermore, psychological help providers working with Muslim Arab clients in Israel may want to follow the advice Trice and Bjorck (2006) suggested for clinicians working with Pentecostal clients. They suggested that clinicians adopt “a “both/and” versus an “either/or” psychoeducational
approach regarding spiritual and psychological models, while not challenging Pentecostals’ view that spiritual models are primary, may be most efficacious” (p. 288).

**Summary**

The present study tested four hypotheses about the relationship between attitudes and beliefs toward help seeking and the ethnicity of the psychological help provider and cultural mistrust toward Jews among Arab undergraduates in Israel. Results indicated that no significant relationship was present between the attitudes and beliefs toward help seeking, the ethnicity of the psychological help provider, and the level of cultural mistrust toward Jews. However, attitudes toward help seeking as measured by ATSPPH-S of freshmen were significantly more favorable than those of 4th and 5th year students. When participants with previous experience with psychological help were excluded, significant differences in attitudes were detected on the ATSPPH-S and the BAPS. Freshmen had significantly more favorable attitudes toward help seeking than 4th and 5th year students on the ATSPPH-S and sophomores had significantly more favorable attitudes toward help seeking than 4th and 5th year students on the BAPS. Results of logistic regression indicated that Muslim and Christian participants are three times more likely to choose an Arab help provider. However, this finding did not reach the significance level. The probability of choosing an Arab psychological help provider increased significantly, though, as the participants’ level of cultural mistrust in the domains of Politics and Law and Interpersonal Relations increased. On the other hand, this probability decreased significantly when participants had previous psychological help and when their level of cultural mistrust increased in the domain of Business and Work. Results indicated strong significant correlations between attitudes and beliefs toward help seeking and variables
such as age, gender, father’s highest level of education, previous psychological help, and year in school. The level of cultural mistrust correlated significantly with variables such as religion, age, gender, ethnicity of help provider, and previous psychological help. Limitations in the study, and implications for future research and practice were also discussed.
References


Springfield, MA: Merriam Webster, Inc.


Appendix A

Ball State IRB Letter of Approval
Institutional Review Board

DATE: April 1, 2010
TO: Jamalat Daoud, M.A.
FROM: Ball State University IRB
RE: IRB protocol # 131749-2
TITLE: Attitudes toward Help Seeking among Israeli Arabs
SUBMISSION TYPE: New Project
ACTION: DETERMINATION OF EXEMPT STATUS
DECISION DATE: March 31, 2010

The Institutional Review Board reviewed your protocol on March 31, 2010 and has determined the procedures you have proposed are appropriate for exemption under the federal regulations. As such, there will be no further review of your protocol, and you are cleared to proceed with the procedures outlined in your protocol. As an exempt study, there is no requirement for continuing review. Your protocol will remain on file with the IRB as a matter of record.

While your project does not require continuing review, it is the responsibility of the P.I. (and, if applicable, faculty supervisor) to inform the IRB if the procedures presented in this protocol are to be modified or if problems related to human research participants arise in connection with this project. **Any procedural modifications must be evaluated by the IRB before being implemented, as some modifications may change the review status of this project.** Please contact Amy Boos at (765) 285-5034 or akboos@bsu.edu if you are unsure whether your proposed modification requires review or have any questions. Proposed modifications should be addressed in writing and submitted electronically to the IRB (http://www.bsu.edu/irb) for review. Please reference the above IRB protocol number in any communication to the IRB regarding this project.

**Reminder:** Even though your study is exempt from the relevant federal regulations of the Common Rule (45 CFR 46, subpart A), you and your research team are not exempt from ethical research practices and should therefore employ all protections for your participants and their data which are appropriate to your project.
Appendix B

Haifa University Ethics Committee Letter of Approval
6 June, 2010

To:
Jamalat Daoud
Counseling and Guidance Services Department
Ball State University

Dear Colleagues,

The Committee on Human Participant Research at the University has reviewed: a) your research proposal entitled: "Attitudes toward Help Seeking Among Israeli Arabs" (No. 083/10); b) your formal application to the committee; and c) all other supporting documents.

In our opinion, the proposed research complies with current university and international standards for ethical research practice and we have approved it as such.

As we all know, approval by the committee is but one part of the process of ensuring that research conducted by our colleagues conforms to the highest standards of ethical practice in science. The primary responsibility for ethical practice in research remains with the investigators. We wish you good luck in your scientific endeavors.

In addition, we request you to please include your approval registration number on all advertisements for participants, reports, publications etc.

Sincerely,

Prof. Nissim Leshem
Chairman – Committed on Research with Human Participants

cc. Research Authority file
Chairman – personal file

Chairman - Committee to Evaluate
Human Subject Research
University of Haifa
Appendix C

Introductory Letter, English Version
Hello,

My name is Jamalat Daoud. I am a doctoral student at the Counseling and Guidance Services Department at Ball State University in Muncie, IN, U.S.A. I am currently conducting research for my dissertation on Attitudes toward Help Seeking among Arabs in Israel. This study has obtained the approval of the Ethics Committee at the University of Haifa, number 083/10. The study is intended to further our understanding of factors that affect individual's decision to seek help from a professional psychologist.

If you choose to participate, you will be asked to complete a series of internet surveys involving basic background information including questions about your gender, religion, income, year of study, and questions about attitudes toward help seeking and toward Jews. You will not be asked to provide your name, as to ensure your confidentiality. It will take approximately 25 minutes to complete the surveys, and upon completion, you will be given a gift certificate worth approximately NIS.10 in appreciation for your time. The results of this study will help the field of psychology to better understand the factors that affect one’s decision to seek help from a professional psychologist.

If you choose to participate in the study, click the following URL:
http://inquisitor.bsu.edu/inqsit/inqsit.cgi/daoud?Full+Survey

After you have completed the surveys you will be directed to another link that would ask for your name and information in order to send you the gift certificate. Your answers will not be linked with your information. Please email me at jsaadi@bsu.edu if you have any questions regarding the surveys.

Jamalat Daoud, M.A.
Doctoral Candidate
Counseling and Guidance Services Department
Ball State University
Teachers College
Muncie, IN 47304
Tel.: (765) 285-8040
jsaadi@bsu.edu
Appendix D

Introductory Letter, Arabic Version
Attitudes toward Help Seeking 113

مرحباً،

اسمي جمالات داود. أنا طالبة للقب الدكتوراه في قسم الاستشارة النفسية والخدمات التوجيهية في جامعة بول ستيت في منسي، إنديانا في الولايات المتحدة الأمريكية. أجري بحثًا عن مواقف العرب في إسرائيل تجاه طلب المساعدة النفسية. نال هذا البحث على موافقة لجنة الأخلاقيات للأبحاث الإنسانية في جامعة حيفا رقم 0131080. هدف البحث هو تعميق فهمنا للعوامل التي تؤثر على قرار الفرد في طلب المساعدة من أخصائي نفسي.

لو اختارتم أن تشاركوني في البحث سوف يطلب منك أن تكمل سلسلة من الاستمارات عبر شبكة الإنترنت والتي تتضمن معلومات تعتمد على أسئلة عن جنسك، دينك، السن، السنة الدراسية، و أسئلة عن مواقفك تجاه طلب الخدمات النفسية وتجاه اليهود. سوف لا يطلب منك أن تعطي اسمك، من أجل الحفاظ على سرية كرامة التسجيل. سوف يستغرق البحث حوالي 25 دقيقة. نتائج البحث سوف تساعد العلماء في فهم العوامل التي تؤثر على قرار الفرد في طلب المساعدة من أخصائي نفسي.

لو اختارتم أن تشاركوني في البحث، اضغطوا على الرابط التالي:

http://inquisitor.bsu.edu/inqsit/inqsit.cgi/daoud?Full+Survey

بعد ملء الاستمارات سوف نوجهك إلى موقع آخر يطلب منك اسمك ومعلوماتك وسوف نرسل لك المبلغ المالي. سوف لا نرتبط بمعلوماتك الشخصية. من فضلك ارسل لي رسالة على البريد الإلكتروني لو كنت لديك أي أسئلة عن البحث.

jsaadi@bsu.edu

جمالات داود، ماجستير مرشحة للقب الدكتوراه قسم الاستشارة النفسية والخدمات التوجيهية جامعة بول ستيت عمارة التشيرز كوليج منسي، إنديانا، الولايات المتحدة الأمريكية 47304

(765)-285-8040
jsaadi@bsu.edu
Appendix E

Consent Form, English Version
You may print a copy of this form for your records.

You are invited to participate in a research study conducted by Jamalat Daoud, M.A., a doctoral candidate in the counseling psychology program at Ball State University, Muncie, Indiana, USA. This study has obtained the approval of the Ethics Committee at the University of Haifa, number 083/10. The purpose of the study is to expand current knowledge and understanding about factors that affect individuals’ decision to seek help from a professional psychologist.

You are eligible to participate in this study if you:

- are 18 years or older
- are working toward a Bachelor degree
- are an Arab who lives in Israel

You will be asked to fill out a series of surveys that will take approximately 25 minutes. Participation in the study is completely voluntary, and you may discontinue participation at any time without penalty. Participation in the study involves no more than minimal risk. Only the researcher will have access to survey materials.

By participating in the study, you are making a significant contribution to research that may enhance the well being of the Arab community in Israel based on findings from this study. Further, responses will enable relevant entities to plan and implement projects that aim at increasing the utilization of mental health services among the community of Arabs in Israel.

As a participant in this study, you will be given NIS.10 in appreciation for your time. You will submit your contact information (phone number and email address) in addition to the answers on your survey battery so you can be given the gift certificate. Your identifying and contact information will not be linked in any way to your answers in the survey battery.

If you have any questions or concerns about the surveys or your participation, please feel free to contact the primary researcher or her dissertation research advisor:

Jamalat Daoud, M.A. Charlene Alexander, Ph.D.
Doctoral Candidate Associate Professor
Counseling Psychology & Guidance Services calexander@bsu.edu
Ball State University
765-285-8040
jsaadi@bsu.edu

For one’s rights as a research subject, you may contact the following: Research Compliance, Sponsored Programs Office, Ball State University, Muncie, IN 47306, (765)285-5070, irb@bsu.edu.

_____ I agree
_____ I decline
Appendix F

Consent Form, Arabic Version
Attitudes toward Help Seeking 117

بامكانك أن تطبع نسخة من هذه الرسالة.

ندعوك للاشتراك في بحث تجريه جمالات داود ، ماجستير ، مرشحة للدكتوراة في قسم الاستشارة النفسية والخدمات التوجيهية في جامعة بول ستيت في منسي ، انديانا في الولايات المتحدة الأمريكية. نال هذا البحث موافقة لجنة الأخلاقيات للأبحاث الإنسانية في جامعة حيفا ، رقم 01/180. هدف البحث هو توسيع المعرفة والفهم عن العوامل التي تؤثر على قرار الفرد في طلب المساعدة النفسية من أخصائي نفسي.

بامكانك الاشتراك في هذا البحث إذا كان:

- عمرك 18 سنة وما فوق
- تدرس/ين لتحصيل اللقب الجامعي الأول
- تعيش/ين في إسرائيل
- تدرس/ين عربيا/ة وتميل إلى العربية

سوف يطلب منك أن تملئ سلسلة من الاستمارات التي تستغرق حوالي 25 دقيقة. إنك، إذا أنت شاب عن 18 سنة ، والكفاءة ، والدين، والتعليم، والوظيفة، والصحة النفسية، والصحة البدنية، وال🏠، والمسكن/السكن. في إسرائيل، يمكن أن تتوقف عن الاشتراك في البحث في أي وقت وبدون أي جزاء.

هدف البحث هو توسيع المعرفة والفهم عن العوامل التي تؤثر على قرار الفرد في طلب المساعدة النفسية من أخصائي نفسي.

إذا كنت مشاركًا في هذا البحث، سوف نعطيك مبلغًا بقيمة $10.00 كREWards. يُشجَّع على المشاركة في البحث. إجاباتك مستخدمة في تطوير وتنفيذ المشاريع، وتهدف إلى زيادة استخدام الخدمات النفسية لدى المجتمع العربي الإسرائيلي.

مشاركةكم مهمه وقد تساهم في الدراسات التي من شأنها أن تطور رفاهية المجتمع العربي في إسرائيل. تلقي الأبحاث هذه الاستمارات في آخر الأحجام المختلفة، وهي مجهولة للباحثين. معلوماتكم الخاصة سوف لن ترتبط بأي شكل من الاستمارات.

إذا كنت لديكم أي أسئلة عن الاستمارات أو عن الاشتراك أو البحوث، يمكنكم الاتصال بالمكتب المتدرب، أو اتصل بالباحثة الرئيسية أو المسؤولة عن رساولة البحث:

د. شارلين أليكساندر
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أوافق
أرفض

د. جمالات داود
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jsaadi@bsu.edu
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+1 765 285-5070

من أجل حقوقك كمشارك في البحث، يمكنكم الاتصال بمكتب البرامج المدعومة، أو اتصل بالباحثة الرئيسية أو المسؤولة عن رساولة البحث.

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+1 765 285 8040

أوافق
أرفض
Appendix G

Demographic Questionnaire, English Version
1.) Age: _______ years old

2.) Sex:
   _____ Male
   _____ Female

3.) Religion:
   _____ Muslim
   _____ Christian
   _____ Druze
   _____ Other*
   * Please Specify: _________________________________________

4.) Place of Birth:
   _____ Village
   _____ City

5.) Current Place of Residence:
   _____ Village
   _____ City

6.) Year in School
   _____ Freshman
   _____ Sophomore
   _____ Junior
   _____ Senior
   _____ Fifth Year (or more) Undergraduate

7.) Grade Point Average: _______

8.) The Highest Level of Education Parents or Primary Caregivers Have:
   Mother or primary caregiver’s highest level of education:
   _____ Elementary
   _____ Junior high school
   _____ High school
   _____ B.A.
   _____ M.A.
   _____ Ph.D.
Father or primary caregiver’s highest level of education:
   _____ Elementary
   _____ Junior high school
   _____ High school
   _____ B.A.
   _____ M.A.
   _____ Ph.D.

9.) Living Arrangement (check one)
    _____ Live Independently
    _____ Live with Parents
    _____ Live with ‘other’

10.) Parents’ Income:
   Mother or primary caregiver’s income: ______
   Father or primary caregiver’s income: ______

11.) Own Income: ______

12.) Have you ever received mental health services?
    _____ Yes
    _____ No

   If yes, was the mental health provider
   a. Arab
   b. Jewish

13.) If you need mental health services in the future, would you choose a mental health
     provider who is:
     a. Jewish
     b. Arab
Appendix H

Demographic Questionnaire, Arabic Version
1. العمر : _______ سنة
2. الجنس
ذكر _______ أنثى _______ 
3. الديانة (ضع صح إلى جانب الإجابة المنسوبة)
   مسلم _______ 
   مسيحي _______ 
   درزي _______ 
   آخر _______ 
* أشرح من فضلك ! _______
4. مكان الولادة:
   قرية _______ 
   مدينة _______
5. مكان الإقامة الحالي:
   قرية _______ 
   مدينة _______
6. سنة الدراسة الجامعية
   سنة أولى _______ 
   سنة ثانية _______ 
   سنة الثالثة _______ 
   سنة رابعة _______
   سنة خامسة وما بعد في الدراسة للقب الأول _______
7. العامل السنوي: _______
8. أعلى مستوى تعلمي حصل عليه الوالدان أو مقدم الرعاية الرئيسيان:
   أعلى مستوى تعلمي حصلت عليه الأم أو مقدم الرعاية الرئيسية: _______
   ابتدائي _______ 
   اعدادي _______ 
   ثانوي _______ 
   جامعي – اللقب الأول _______
   جامعي – اللقب الثاني _______
   جامعي – اللقب الثالث _______
   أعلى مستوى تعلمي حصل عليه الأب أو مقدم الرعاية الرئيسي: _______
   ابتدائي _______ 
   اعدادي _______ 
   ثانوي _______ 
   جامعي – اللقب الأول _______
   جامعي – اللقب الثاني _______
9. نوعية السكن
اين ين تسكن
اين ين مع والديك
اين تسكن اين مع أخر

10. دخل الولدین:
دخل الأم أو مقدم الرعاية الرئيسية:
دخل الأب أو مقدم الرعاية الرئيسي:

11. دخلك:

12. هل تلقيت خدمات نفسية في السابق؟

13. لو احتجت إلى أخصائي نفسي في المستقبل، هل ستختار أخصائي نفسي

- عربي
- يهودي
Appendix I

ATSPPH-S (Fischer & Farina, 1995), English Version
Please reflect upon your thoughts and feelings when responding to the following statements.

Choose the appropriate rating for each item

<table>
<thead>
<tr>
<th></th>
<th>Disagree</th>
<th>Probably Disagree</th>
<th>Probably Agree</th>
<th>Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>If I believed I was having a mental breakdown, my first inclination would be to get professional attention.</td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
</tr>
<tr>
<td>2.</td>
<td>The idea of talking about problems with a psychologist strikes me as a poor way to get rid of emotional conflicts.</td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
</tr>
<tr>
<td>3.</td>
<td>If I were experiencing a serious emotional crisis at this point in my life, I would be confident that I could find relief in psychotherapy.</td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
</tr>
<tr>
<td>4.</td>
<td>There is something admirable in the attitude of a person who is willing to cope with his or her conflicts and fears without resorting to professional help.</td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
</tr>
<tr>
<td>5.</td>
<td>I would want to get psychological help if I were worried or upset for a long period of time.</td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
</tr>
<tr>
<td>6.</td>
<td>I might want to have psychological counseling in the future.</td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
</tr>
<tr>
<td>7.</td>
<td>A person with an emotional problem is not likely to solve it alone; he or she is likely to solve it with professional help.</td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
</tr>
<tr>
<td>8.</td>
<td>Considering the time and expense involved in psychotherapy, it would have doubtful value for a person like me.</td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
</tr>
<tr>
<td>9.</td>
<td>A person should work out his or her own problems; getting psychological counseling would be a last resort.</td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
</tr>
<tr>
<td>10.</td>
<td>Personal and emotional troubles, like many things, tend to work out by themselves.</td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
<td><img src="image" alt="Rating" /></td>
</tr>
</tbody>
</table>
Appendix J

ATSPPH-S (Fischer & Farina, 1995), Arabic Version
من فضلك عبّر عن أفكارك ومشاعرك عندما تجيب عن المقولات التالية. اختار الدائرة التي تعبّر عن الاختيار المناسب.

<table>
<thead>
<tr>
<th>أوافق</th>
<th>على الأرجح</th>
<th>لا أوافق</th>
<th>لا أوافق</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.</strong> لو أمنت بأنني أمر بانهيار عقلي ، توجهي الأول سيكون أن أحصل على عناية نفسية مهنية.</td>
<td>أوافق</td>
<td>على الأرجح</td>
<td>لا أوافق</td>
</tr>
<tr>
<td><strong>2.</strong> فكرة أن أتحدث مع أخصائيي نفسي عن مشاكلتي هي طريقة غير ناجحة للخلص من الصراعات العاطفية.</td>
<td>لا أتوقع</td>
<td>لا أتوقع</td>
<td>أتوقع</td>
</tr>
<tr>
<td><strong>3.</strong> لوأني كنت أمربزمة عاطفية شديدة في هذه المرحلة في حياتي ، سأكون واثقاً أنني سأجد راحة نفسية في الطب النفسي.</td>
<td>أتوقع</td>
<td>لا أتوقع</td>
<td>لا أتوقع</td>
</tr>
<tr>
<td><strong>4.</strong> هناك شيء يثير الأعجاب في توجه الشخص الذي توجد لديه الرغبة في تدبر صرايعه ومخاوفه دون اللجوء إلى مساعدة نفسية مهنية.</td>
<td>أتوقع</td>
<td>لا أتوقع</td>
<td>لا أتوقع</td>
</tr>
<tr>
<td><strong>5.</strong> سوف أرغب في الحصول على مساعدة نفسية لو كنت فلقة أو متضايقاً لفترة طويلة من الزمن.</td>
<td>لا أتوقع</td>
<td>لا أتوقع</td>
<td>أتوقع</td>
</tr>
<tr>
<td><strong>6.</strong> من المحتمل أن أرغب في الحصول على استشارة نفسية في المستقبل.</td>
<td>لا أتوقع</td>
<td>لا أتوقع</td>
<td>أتوقع</td>
</tr>
<tr>
<td><strong>7.</strong> من غير المحتمل أن أحل الشخص مشكلته العاطفية لوحده : على الأرجح أن يحلها أو يحلها مع مساعدة نفسية مهنية.</td>
<td>لا أتوقع</td>
<td>لا أتوقع</td>
<td>أتوقع</td>
</tr>
<tr>
<td><strong>8.</strong> عندما أخذ بعين الاعتبار الوقت والمصاريف التي يستهلكها الطب النفسي ، أشك في قيمته بالنسبة لأحد مثلي.</td>
<td>لا أتوقع</td>
<td>لا أتوقع</td>
<td>أتوقع</td>
</tr>
<tr>
<td><strong>9.</strong> يجب على الأنسان أن يحل مشاكله بنفسه : الحصول على استشارة نفسية سيكون أخر شيء ألجأ إليه.</td>
<td>لا أتوقع</td>
<td>لا أتوقع</td>
<td>أتوقع</td>
</tr>
<tr>
<td><strong>10.</strong> المشاكل الشخصية والعاطفية ، مثل كثير من الأمور ، تميل إلى أن تحل نفسها بنفسها.</td>
<td>لا أتوقع</td>
<td>لا أتوقع</td>
<td>أتوقع</td>
</tr>
</tbody>
</table>
Appendix K

BAPS (Ægisdóttir & Gerstein, 2009), English Version
Using the scale below, please check the circle that best represents your views on the following statements

<table>
<thead>
<tr>
<th>Strongly Disagree (1)</th>
<th>(2)</th>
<th>(3)</th>
<th>(4)</th>
<th>(5)</th>
<th>(6)</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. If a good friend asked my advice about a serious problem, I would recommend that he/she see a psychologist.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. I would be willing to confide my intimate concerns to a psychologist.</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Seeing a psychologist is helpful when you are going through a difficult time in your life.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. At some future time, I might want to see a psychologist.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. I would feel uneasy going to a psychologist because of what some people might think.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. If I believed I was having a serious problem, my first inclination would be to see a psychologist.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Because of their training, psychologists can help you find solutions to your problems.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Going to a psychologist means that I am a week person.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Psychologists are good to talk to because they do not blame you for the mistakes you have made.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Having received help from a psychologist stigmatizes a person’s life.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. There are certain problems that should not be discussed with a stranger such as a psychologist.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. I would see a psychologist if I were worried or upset for a long period of time.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Psychologists make people feel that they cannot deal with their problems.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. It is good to talk to someone like a psychologist because everything you say is confidential.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Talking about problems with a psychologist strikes me as a poor way to get rid of emotional conflicts.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Psychologists provide valuable advice because of their knowledge about human behavior.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. It is difficult to talk about personal issues with highly educated people such as psychologists.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. If I thought I needed psychological help, I would get this help no matter who knew I was receiving assistance.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix L

BAPS (Ægisdóttir & Gerstein, 2009), Arabic Version
من فضلك استعمل السلم أدناه وأشر الى الدائرة التي تعبّر عن وجهة نظرك بالشكل الأفضل عن المقولات التالية.
لا أوافق بشدة (1) (2) (3) (4) (5) (6) أوافق بشدة

<table>
<thead>
<tr>
<th>رقم</th>
<th>المقولات التالية</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>لو طلب مني صديق عزيز نصيحة تتعلق بمشكلة جدية , سوف أنصحه بإن ملك نفسه على أخصائي نفسي.</td>
</tr>
<tr>
<td>2</td>
<td>سأكون راغبًا في أن أتولى الأخصائيي النفسي على أموري الخصوصية.</td>
</tr>
<tr>
<td>3</td>
<td>أن تعرض أي نفسي على أخصائيي نفسي سيساعدك كثيرًا عندما تمر في وقت صعب في حياتك.</td>
</tr>
<tr>
<td>4</td>
<td>في مرحلة معينة في المستقبل من المحتمل أن أريد أن أعرض نفسي على أخصائيي نفسي.</td>
</tr>
<tr>
<td>5</td>
<td>سوف أشعر بعدم الارتياح في عرض نفسي على أخصائيي نفسي بسبب ما يمكن أن يفكروا بهم عند.</td>
</tr>
<tr>
<td>6</td>
<td>لو أمنت بأن لدي مشكلة جدية , توجهي الأول سيكون أن أعرض نفسي على أخصائيي نفسي.</td>
</tr>
<tr>
<td>7</td>
<td>بفضل تدريبهم , يستطيع الأخصائيون النفسيون أن يساعدونك على إيجاد حلول لمشاكلك.</td>
</tr>
<tr>
<td>8</td>
<td>عندما أعرض نفسي على أخصائيي نفسي فذلك يعني أنني انسان ضعيف.</td>
</tr>
<tr>
<td>9</td>
<td>الأخصائيون النفسيون هم جيدون للتحدث معهم لأنهم لا يلومونك على الأخطاء التي ارتكبتها.</td>
</tr>
<tr>
<td>10</td>
<td>تلقى مساعدة من الأخصائيي النفسي تضع وصمة عار على حياة الشخص.</td>
</tr>
<tr>
<td>11</td>
<td>هنالك مشاكل معينة التي يجب ألا تبحث مع شخص غريب مثل الأخصائيي النفسي.</td>
</tr>
<tr>
<td>12</td>
<td>سوف أعرض نفسي على أخصائيي نفسي لو كنت قلقًا أو متضايقيًا لفترة طويلة من الزمن.</td>
</tr>
<tr>
<td>13</td>
<td>الأخصائيون النفسيون يجعلون الناس يشعرون بأنهم لا يستطيعون أن يريدوا مشاكلهم لوحدهم.</td>
</tr>
<tr>
<td>14</td>
<td>إنه جيد أن أتحدث مع شخص مثل الأخصائيي النفسي لأن كل شيء نقوله هو سري.</td>
</tr>
<tr>
<td>15</td>
<td>التحدث عن المشاكل مع الأخصائيي النفسي هي طريقة غير ناجحة للتخلص من الصراعات العاطفية.</td>
</tr>
</tbody>
</table>
6. الأخصائيون النفسيون يزودون نصائح قيمة بفضل معرفتهم عن تصرفات الإنسان.

7. إنه صعب أن تتحدث أي عن أمور شخصية مع ناس مثقفين جداً مثل الأخصائيين النفسيين.

8. لو اعتقدت بأنني بحاجة إلى مساعدة نفسية، سوف أحصل على هذه المساعدة ولا يهم من سيعرف بأنني أتلقى هذه المساعدة.
Appendix M

CMI (Terrell & Terrell, 1981), English Version
Enclosed are some statements concerning beliefs, opinions, and attitudes about Jews. Read each statement carefully and give your honest feelings about the beliefs and attitudes expressed. Indicate the extent to which you agree by using the following scale:

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not in the least agree</td>
<td>Slightly agree</td>
<td>Moderately agree</td>
<td>Very much agree</td>
<td>Entirely agree</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The higher the number you choose for the statement, the more you agree with that statement. For example, if you “moderately agree” with a statement, you would choose the numbers 4 and 5 which appear above the label “Moderately agree.” If you chose number 5, this means you agree more with the statement than if you had chosen the number 4. The same principle applies for the other labels. The higher the number you chose, the more you agree with the statement.

Finally, there are no right or wrong answers, only what is right for you. If in doubt, blacken the space which seems most nearly to express your present feelings about the statement. Please answer all items.

<table>
<thead>
<tr>
<th></th>
<th>0----1 Not in the least agree</th>
<th>2----3 Slightly agree</th>
<th>4----5 Moderately agree</th>
<th>6----7 Very much agree</th>
<th>8----9 Entirely agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Jews are usually fair to all people regardless of race.</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
</tr>
<tr>
<td>2</td>
<td>Jewish teachers teach subjects so that it favors Jews.</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
</tr>
<tr>
<td>3</td>
<td>Jewish teachers are more likely to slant the subject matter to make Arabs look inferior.</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
</tr>
<tr>
<td>4</td>
<td>Jewish teachers deliberately ask Arab students questions which are difficult so they will fail.</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
</tr>
<tr>
<td>5</td>
<td>There is no need for an Arab person to work hard to get ahead financially because Jews will take what you earn anyway.</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
</tr>
<tr>
<td>6</td>
<td>Arab citizens can rely on Jewish lawyers to defend them to the best of his or her ability.</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
<td>○ ○ ○ ○ ○</td>
</tr>
<tr>
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<td>-------------------------------------------------------------------------------------------</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Arab parents should teach their children not to trust Jewish teachers.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Jewish politicians will promise Arabs a lot but deliver little.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Jewish policemen will slant a story to make Arabs appear guilty.</td>
<td></td>
<td></td>
<td></td>
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<td>10</td>
<td>Jewish politicians usually can be relied on to keep the promises they make to Arabs.</td>
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<td>11</td>
<td>Arabs should be suspicious of a Jewish person who tries to be friendly.</td>
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<td>12</td>
<td>Whether you should trust a person or not is not based on his race.</td>
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<td>13</td>
<td>Probably the biggest reason Jews want to be friendly with Arabs is so they can take advantage of them.</td>
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<td>14</td>
<td>An Arab person can usually trust his or her Jewish coworkers.</td>
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<td>15</td>
<td>If a Jewish person is honest in dealing with Arabs, it is because of fear of being caught.</td>
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<td>16</td>
<td>An Arab person can not trust a Jewish judge to evaluate him or her fairly.</td>
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<td>17</td>
<td>An Arab person can feel comfortable making a deal with a Jewish person simply by a handshake.</td>
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<td>18</td>
<td>Jews deliberately pass laws designed to block the progress of Arabs.</td>
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<td>19</td>
<td>There are some Jews who are trustworthy enough to have as close friends.</td>
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<td>20</td>
<td>Arabs should not have anything to do with Jews since they can not be trusted.</td>
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<td>21</td>
<td>It is best for Arabs to be on their guard when among Jews.</td>
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<td>22</td>
<td>Of all ethnic groups, Jews are really the Indian-givers.</td>
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<td>23</td>
<td>Jewish friends are least likely to break their promise.</td>
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<td>24</td>
<td>Arabs should be cautious about what they say in the presence of Jews since Jews will try to use it against them.</td>
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<td>25</td>
<td>Jews can rarely be counted on to do what they say.</td>
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<td>26</td>
<td>Jews are usually honest with Arabs.</td>
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<td>27</td>
<td>Jews are as trustworthy as members of any other ethnic group.</td>
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<td>28</td>
<td>Jews will say one thing and do another.</td>
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<td>29</td>
<td>Jewish politicians will take advantage of Arabs every chance they get.</td>
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<td>30</td>
<td>When a Jewish teacher asks an Arab student a question, it is usually to get information which can be used against him or her.</td>
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<td>31</td>
<td>Jewish policemen can be relied on to exert an effort to apprehend those who commit crimes against Arabs.</td>
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<td>32</td>
<td>Arab students can talk to a Jewish teacher in confidence without fear that the teacher will use it against him or her later.</td>
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<td>33</td>
<td>Jews will usually keep their word.</td>
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<td>34</td>
<td>Israeli policemen usually do not try to trick Arabs into admitting they committed a crime which they didn’t.</td>
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<td>35</td>
<td>There is no need for Arabs to be more cautious with Jewish businessmen than with anyone else.</td>
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<td>36</td>
<td>There are some Jewish businessmen who are honest in business transactions with Arabs.</td>
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<td>37</td>
<td>Jewish store owners, salesmen, and other Jewish businessmen tend to cheat Arabs whenever they can.</td>
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<td>38</td>
<td>Since Jews can’t be trusted in business, the old saying “one in the hand is worth two in the bush” is a good policy to follow.</td>
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<td>39</td>
<td>Whites who establish business in Arab communities do so only so that they can take advantage of Arabs.</td>
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<td>40</td>
<td>Arabs have often been deceived by Jewish politicians.</td>
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<td>41</td>
<td>Jewish politicians are equally honest with Arabs and Jews.</td>
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<td>42</td>
<td>Arabs should not confide in Jews because they will use it against you.</td>
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<td>43</td>
<td>An Arab person can loan money to a Jewish person and feel confident it will be repaid.</td>
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<td>44</td>
<td>Jewish businessmen usually will not try to cheat Arabs.</td>
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<td>45</td>
<td>Jewish business executives will steal the ideas of their Arab employees.</td>
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<td>46</td>
<td>A promise from a Jew is about as good as a three dollar bill.</td>
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<td>47</td>
<td>Arabs should be suspicious of advice given by Jewish politicians.</td>
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<td>48</td>
<td>If an Arab student tries, he will get the grade he deserves from a Jewish teacher.</td>
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Appendix N

CMI (Terrell & Terrell, 1981), Arabic Version
مرفقة هنا بعض المقولات بالنسبة للمعتقدات، الآراء، والمواقف تجاه العرب. اقرأ كل مقالة بتمعن وعبر عن مشاعرك بصدق تجاه المعتقدات والمواعف المعطاه. عبر عن مدى موافقتك عن طريق استخدام السلّم الآتي:

لا أوافق بناتا أوافق قليلا أوافق بشكل معتدل أوافق كثيرا أوافق تماما
0 1 2 3 4 5 6 7 8 9
صفراً، أغلب، ليس بتكلفة، أغلب، ليس، بأكمل، أغلب، ليس.

كلما اختارت رقم أعلى لكل مقالة، كلما كنت موافقتك أكبر على المقولة. مثلا إذا كنت توافق بشكل معتدل على مقالة معينة فسوف تختار الأرقام 4 أو 5 التي تظهر فوق "أوافق بشكل معتدل". لو اخترت رقم 5 فهذا يعني أنك توافق أكثر على المقولة مما لو اخترت رقم 4.

نفس المبدأ ينطبق على الاختيارات الأخرى. كلما كان الرقم الذي كنت عليه أعلى، كلما كنت توافق أكثر مع المقولة. أخيراً، ليست هناك إجابات صحيحة أو خاطئة. إذا كنت على شكل، فاختير الرقم الذي يعتبر أكثر من مشاعرك.

رغم ذلك، النتائج لن تكون دقيقة نظرًا إلى المواقف والأخلاقيات الثقافية والاجتماعية المختلفة

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<tr>
<th></th>
<th>أوافق تماما</th>
<th>أوافق كثيرا</th>
<th>أوافق بشكل معتدل</th>
<th>أوافق قليلا</th>
<th>لا أوافق بناتا</th>
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اليهود عادة منصفون مع جميع الناس، بغض النظر عن القومية.

المعلموان اليهود يعلمون المواضيع بشكل يفضّل اليهود.

على الأرجح أن يحرّف اليهود مواضيع الدراسة ليجعلوا العرب يبدون ذوي قيمة متدنية.

يتعمد المعلموان اليهود أن يسألوا الطلاب العرب أسئلة صعبة لكي يفشلوهم.

لا حاجة للشخص العربي أن يجهد نفسه في العمل ليتقدم من الناحية المادية، لأن اليهود سيأخذوا ما سيربحه على كل الأحوال.

 бумاطغات المعتقدات المتزايدة في الحالة العربية من الناحية المادية لأن اليهود سيأخذوا ما يدفع به على كل الأحوال.

Attitudes toward Help Seeking 138
| تعداد لمواطنين العرب الذين يعتمدون على المحامين اليهود للدفاع عنهم | 6 |
| يجب على الأهل العرب أن يعلموا أولادهم أمرًا ألا يثقوا بالمعلمين اليهود | 7 |
| السياسيون اليهود سوف يعدون العرب بالكثير ولكن سيغطون القليل | 8 |
| سوف يحزف رجال الشرطة اليهود القصة من أجل أن يظهر العرب مذنبين | 9 |
| يمكن استيعابهم المطالبين اليهود بأنهم سيوفون بوعودهم للعرب | 10 |
| يجب أن يشك العرب في أي شخص يهودي يحاول أن يكون ودوداً | 11 |
| إذا كنت ستشكل بشخص ما أو لا فإن ذلك لا يتعلق بقوميته | 12 |
| على الأرجح أن السيب الأكبر في أن اليهود يريدون أن يتوزعوا للعرب هو من أجل أن يستغلوهم | 13 |
| يستطيع الشخص العربي عادة أن يثق بزملائه اليهود في العمل | 14 |
| عندما يكون الشخص اليهودي صادقاً في تعامله مع العرب فهو يفعل ذلك من أجل لا يكشف | 15 |
| لا يستطيع الشخص العربي أن يثق بأن القاضي اليهودي سيقيمه بشكل منصف | 16 |
| يستطيع الشخص العربي أن يشعر بالارتياح عند تئابه مع الشخص اليهودي بمجرد أن يصافح يده | 17 |
| يتعدد اليهود في سن قوانين التي من شأنها أن تمتع تقدم العرب | 18 |
| هناك بعض الأشخاص اليهود الذين يستطيع أن يثق بهم لدرجة اتخاذهم أصدقاء حميمين | 19 |
| يجب على العرب ألا تكون لهم أي علاقة باليهود لأنه لا يمكن أن يثق بهم | 20 |
| يجب أن يكون العرب بمنتهى الحذر عندما يتواجدون بين اليهود | 21 |
| من بين كل القوميات، اليهود فقط هم الذين يعطونك شيئا ما ويستردونه فيما بعد | 22 |
| الأصدقاء اليهود هم أقل الناس احتمالاً بأن يكسرمو وعدهم | 23 |
يجب أن يكون العرب حذرين مما يقولونه في حضرة اليهود لأن اليهود سيحاولون استعمال ذلك ضدهم.

ناادرًا ما يستطيع أن يعتد على أن اليهود سيفعلون ما يقولونه.

اليهود عادة صادقون مع العرب.

اليهود هم موضوع ثقة، تماماً مثل باقي أبناء القوميات الأخرى.

سوف يقول اليهود شيئًا ما ولكن سيفعلون شيئًا آخر.

سيستغل السياسيون اليهود العرب كلما سمحت لهم الفرصة.

عندما يسأل المعلم اليهودي الطالب العربي سؤالًا فهو عادة يفعل ذلك من أجل الحصول على معلومات التي يستطيع أن يستعملها ضدده.

يمكن الاعتماد على أن رجال الشرطة اليهود سيستغلون قضايا جهدهم من أجل القبض على هؤلاء الذين ينكرون جرائم ضد العرب.

يمكن الاستيعاب على أن رجال الشرطة اليهود سيستغلون قضايا جهدهم.

يستطيع الطلاب العرب أن يتحدثوا مع الأستاذ اليهودي بثقة وبدون خوف من أنه سيستعمل ذلك ضدهم فيما بعد.

سيقف اليهود عادة عند كلمتهم. (سيوفون بوعودهم).

عادة لا يحاول رجال الشرطة اليهود أن يتحايلوا على العرب ليعترفوا بأنهم ارتكبوا جريمة لم يقوموا بها.

لا حاجة للعرب أن يكونوا حذرين مع رجال الأعمال اليهود أكثر من أي شخص آخر.

هناك بعض رجال الأعمال اليهود الذين هم صادقون في صفقات عملهم مع العرب.

يميل أصحاب المتاجر، البائعون، ورجال الأعمال اليهود الآخرون إلى غش العرب حيثما استطاعوا.

بما أنه لا يمكن الثقة باليهود في العمل، فالتمال القديم "عصفور باليد أحسن من عشرة على الشجرة" هو سياسة جيدة للإتباع معهم.

اليهود الذين يسيطرون على亿美元 في المجتمعات العربية إذا ما يعملون ذلك فقط من أجل استغلال العرب.

العرب يُخدَعون في أغلب الأحيان على يد السياسيين اليهود.

السياسيون اليهود هم صادقون مع العرب تماماً مثلما هم صادقون مع اليهود.

يجب ألا يثق العرب باليهود لأنهم سيستعملون ذلك ضدهم.

يمضيع الشخص العربي أن يفرض للشخص اليهودي مالًا وأن يكون
| **44** | عادة سوف لا يحاول رجال الأعمال اليهود أن يغشوا العرب. |
| **45** | رجال الأعمال الإداريون اليهود سيسرقون أفكار موظفيهم العرب. |
| **46** | وعد اليهودي هو مثل ورقة الثلاثة شواقل. |
| **47** | يجب أن يشك العرب في النصيحة التي يعطيها السياسيون اليهود. |
| **48** | لو حاول الطالب العربي فإنه سيحصل على العلامة التي يستحقها من الأستاذ اليهودي. |
Appendix O

Vignettes, English Version
Please read the following vignettes and answer the question that follows.

1. Isaac Cohen is a licensed psychologist. He completed his first degree in Psychology and sociology at the University of Haifa. Some years later, Isaac received his second degree in clinical psychology from the University of Tel Aviv. Isaac has been practicing psychology for five years. Isaac is a very empathic and respectful psychologist.

2. Murad Abdullah is a licensed psychologist. He completed his first degree in psychology and sociology at the University of Haifa. Some years later, Murad received his second degree in clinical psychology from the University of Tel Aviv. Murad has been practicing psychology for five years. Murad is a very empathic and respectful psychologist.

If you need psychological help, which of one of the psychologists would you choose to see?
   a. Isaac
   b. Murad
Appendix P

Vignettes, Arabic Version
من فضلك اقرأ النبذتين الاتيتين وأجب عن الأسئلة التي تليها.

1. يتسحاق كوهين هو أخصائي نفسي مرخص. أكمل يتسحاق دراسته ونال درجته العلمية الأولى في موضوع علم النفس وعلم الاجتماع في جامعة حيفا. بعد بضعة سنوات، حصل يتسحاق على درجته العلمية الثانية (شهادة الماجستير) في موضوع علم النفس الكليني من جامعة تل-أبيب. يزاول يتسحاق مهنة الأخصائي النفسي منذ خمسة سنوات. يتسحاق أخصائي نفسي عطوف ويحترم الآخرين إلى أبعد حد.

2. مراد عبد الله هو أخصائي نفسي مرخص. أكمل مراد دراسته ونال درجته العلمية الأولى في موضوع علم النفس وعلم الاجتماع في جامعة حيفا. بعد بضعة سنوات، حصل مراد على اللقب الثاني (شهادة الماجستير) في موضوع علم النفس الكليني من جامعة تل-أبيب. يزاول مراد مهنة الأخصائي النفسي منذ خمسة سنوات. مراد أخصائي نفسي عطوف ويحترم الآخرين إلى أبعد حد.

لو احتجت إلى مساعدة نفسية، أي من الأخصائيين سوف تختار؟

يتسحاق __
مراد ___