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**Sensitive parenting
in Turkish ethnic minority families**

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**Sensitive parenting
in Turkish ethnic minority families**

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Chapter 1

General introduction

General introduction

In Europe, the Turkish group represents the largest ethnic minority group. The continuing growth of this group is mostly due to the increase of the second-generation, i.e., those who were born in the host country but have at least one parent born in Turkey (CBS, 2012, 2014a; Crul, 2008). It has been shown that second-generation immigrants generally identify more with their culture of origin than with that of the host society (Phinney, Horenczyk, Liebkind, & Vedder, 2001), and this also appears to be true for the Turkish immigrants in European countries such as the Netherlands (Forum, 2012). Turkish immigrants first came to the Netherlands as invited guest workers in the period 1960-1970. The majority of these immigrants were recruited from rural areas of the lowest socioeconomic regions in Turkey. Although their initial intention was to eventually return to Turkey, most of them decided to stay and brought their families to the Netherlands.

In the Netherlands in 2013, the percentage of children under the age of 5 was twice as large in the second-generation Turkish-Dutch population compared to the Dutch population (CBS, 2014a). Despite the growth of the second-generation Turkish immigrant children and parents in the Netherlands, little research has focused on parenting in early childhood in this group. Since culture plays an important role in shaping parenting (Bornstein et al., 2010; Harkness & Super, 1996; Keller et al., 2009), we cannot assume that our knowledge about parenting that is almost entirely based on samples from Western cultures, can be generalized to migrants with a non-Western cultural background. Most research and parenting support programs aimed at families with young children in Western countries focus on sensitive parenting, but the relevance of this construct to Turkish migrant families has rarely been addressed. In addition, family support is generally provided by professionals from the host society with a Western educational background. Thus, to optimize the effectiveness of family support and youth care services for the large group of Turkish minorities in Europe, it is important to know more about sensitive parenting in this population in terms of its perceived importance and its predictors.

Sensitivity is defined as a mother's ability to perceive child signals, to interpret these signals correctly, and to respond to them promptly and appropriately (Ainsworth, Bell, & Stayton, 1974). Although sensitive parenting will often go together with warmth (e.g. Lohaus, Keller, Ball, Voelker, & Elben, 2004; Oppenheimer, Hankin, Jenness, Young, & Smolen, 2013; Spinrad et al., 2012), the latter is conceptually different from sensitivity because it only refers to the affective quality of the interaction as shown in smiling, positive voice tone, and physical affection, and is known to also occur without sensitive responsiveness (Mesman & Emmen, 2013). The overall aim of this dissertation is to examine parental beliefs about parental sensitive behaviors, and potential predictors of sensitive parenting in Turkish ethnic minority families, such as socioeconomic status, ethnic and religious identity and ethnic and religious socialization.

Family functioning in ethnic minorities

Ethnic minorities generally experience more difficulties in family life compared to majorities (Flink et al., 2012; Mesman, Van IJzendoorn, & Bakermans-Kranenburg, 2012). Several factors seem to play a role in these difficulties, such as socioeconomic status (Mesman et al., 2012) and acculturation stress (Emmen et al., 2013). Although their educational levels are increasing (CBS, 2014b), ethnic minorities are generally overrepresented in lower socioeconomic classes (Barnard & Turner, 2011; CBS, 2012). When compared to the majority group, their highest obtained educational qualification as well as job level (and hence, income) tend to be lower. Socioeconomic status is thus a confounder in studies in which parenting beliefs and behaviors of minority parents are examined. Socioeconomic status of parents is generally considered to play an important role in parenting practices (McLoyd, 1990; Mesman et al., 2012; Mistry, Biesanz, Chien, Howes, & Benner, 2008), and has been found to be related to sensitivity beliefs in minority families (Emmen, Malda, Mesman, Ekmekci, & Van IJzendoorn, 2012; Mesman et al., 2012). The Family Stress Model provides an explanation for the effects of socioeconomic status on parenting (Conger & Donnellan, 2007). In this model socioeconomic strains are seen as stressors, which in turn cause lower levels of positive parenting. The applicability of this model is shown for ethnic minorities (Benner & Kim, 2010; Conger et al., 2002), and specifically in Turkish minority families (Emmen et al., 2013).

Another factor that may play a role in family functioning of minority families is their cultural background. Acculturation refers to the process that migrated families undergo when they come into contact with the host society (Berry, Poortinga, Segall, & Dasen, 2002). During the process of acculturation, events such as discomfort with unfamiliar norms and conflicting acculturation strategies within a family could cause acculturation stress (Berry, 2006; Leidy, Guerra, & Toro, 2010). Acculturation stress has been found to be related negatively with positive parenting in general (Kim, Chen, Li, Huang, & Moon, 2009; Leidy et al., 2010; Smokowski, Rose, & Bacallao, 2008), and with sensitive parenting in particular (Emmen et al., 2013).

Cultures can be broadly divided into collectivistic and individualistic cultures (Triandis, 1994). Turkey is considered to have a more collectivistic background (Hofstede, Hofstede, & Minkov, 2010) and the Netherlands is considered to have a more individualistic background (Hofstede, 2001). In collectivistic cultures, dependence, obedience, and having strong family and social ties are highly valued. In individualistic cultures, autonomy, independence, self-control, exploration, and taking individual responsibility are highly valued. However, several studies have shown that collectivism and individualism are not mutually exclusive and can co-occur (Kagitcibasi, 1990; Oyserman, Coon, & Kimmelmeier, 2002). Authoritarian parenting includes expecting children to behave appropriately and to obey to rules by, for instance, restricting unwanted behaviour by demanding and physical interference and without providing explanations (Baumrind, 1966). It has been shown that parents from a Turkish cultural background generally show more authoritarian values and

parenting behaviors (e.g., Pels, Nijsten, Oosterwegel, & Vollebergh, 2006), which is consistent with their shared focus on obedience rather than independence. However, a recent study showed no differences in authoritarian control of second-generation Turkish and Dutch families in the Netherlands, controlled for maternal education (Yaman, Mesman, Van IJzendoorn, Bakermans-Kranenburg, & Linting, 2010). It could be the case that parenting practices of second-generation Turkish immigrants are changing from authoritarian control to more use of inductive reasoning (Pels et al., 2006). In addition, it has been shown that an authoritarian parenting style in collectivistic cultures is not necessarily associated with less warmth and more rejecting parenting behaviors (e.g. Dekovic, Pels, & Model, 2006; Rudy & Grusec, 2001, 2006). In Turkish immigrant families in Belgium it was shown that perceived higher parental control was not related to lower warmth (Gungor & Bornstein, 2009).

In the traditional Turkish culture, teaching patriotism and respect for authority are important (Kagitcibasi, 1970). There are some differences in parenting of sons and daughters, valuing sons over daughters. Girls have less freedom compared to boys and are expected to help with housework and learn housekeeping skills (Kagitcibasi & Sunar, 1992). However, recently girls and boys are treated more equally (Citlak, Leyendecker, Schoelmerich, & Harwood, 2008; Wissink, Dekovic, & Meijer, 2006; Yaman et al., 2010). In the Turkish culture children are dependent on their parents and when children get older the parents depend on their children, illustrative of the interdependence orientation in Turkish culture (Kagitcibasi, 1987). Punishment-oriented parental discipline seems to be most common, especially in families from rural and lower socioeconomic backgrounds, while verbal reasoning is rarely used as a parenting strategy (Kagitcibasi, 1996; Kagitcibasi & Sunar, 1992). However Turkey is considered to be a collectivistic country, differences within Turkish families are present when comparing different socioeconomic strata (Goregenli, 1997; Sunar & Fisek, 2005) and rural-urban settlements (Nacak, Yagmurlu, Durgel & Van de Vijver, 2011). For instance, in families with a lower socioeconomic status and from urban areas, compliance to parents and close family ties are highly valued, while higher educated Turkish parents in urbanized areas highly value autonomy-oriented parenting and close family ties (Imamoglu, 1998; Kagitcibasi, 2007; Sunar, 2002; Yagmurlu, Citlak, Dost, & Leyendecker, 2009). In addition, high educated parents from urban areas encourage their children to be autonomous and economically independent and to develop their cognitive skills.

It is shown that however expectations and parenting behaviors could differ as an effect of socioeconomic status, warmth is still observed in high levels regardless of socioeconomic status and rural-urban settlement (Nacak et al., 2011; Yagmurlu et al., 2009). In addition, warmth is also observed in Turkish immigrant mothers regardless of their acculturation status (Yagmurlu & Sanson, 2009). It is suggested that warmth could be an aspect of parenting which does not change with the educational background or sociopolitical attitudes (traditionalists vs. modernists) of parents (Kagitcibasi, 2010; Baumrind, 1978). However, parental educational level, and income, are found to be related positively to other

aspects of positive parenting such as maternal sensitivity (e.g. Berlin, Brady-Smith, & Brooks-Gunn, 2002; Chaudhuri, Easterbrooks, & Davis, 2009).

The Family Change Model (Kagitcibasi, 1990) distinguishes three types of family interaction models. The first one is interdependence which can be linked to collectivism. This family type is more common in rural societies, where the intergenerational interdependence is functional and contains dependence, obedience, and having strong family and social ties. The independence family model is more common in Western, urbanized societies, and can be linked to individualism. Intergenerational autonomy, individuation, and independence are of major importance in this model. The last family model is psychological interdependence and includes family types in societies that undergo major socioeconomic changes. It is suggested that this is also applicable for immigrant families, because they undergo social change as a result of acculturation, which refers to the process which migrated families undergo when they come into contact with the host society. In psychological interdependence, urbanization results in increasing importance of autonomy, while relatedness (psychological closeness) remains important (Kagitcibasi & Ataca, 2005). The psychological interdependence family type seems to characterize the Turkish (second-generation) families in Europe (Durgel & Yagmurlu, in press), and specifically in the Netherlands.

Consistent with the Family Change Model (Kagitcibasi, 1990) Turkish immigrants in the Netherlands show integration in several public domains such as school and work, and maintain traditional Turkish values in private domains such as family relations (Arends-Toth, 2003). For instance, Turkish immigrant parents in the Netherlands show obedience-oriented parenting and controlling behaviors in their parenting practices (Nijsten, 2006). A study on socialization goals of Turkish immigrant and German mothers in Germany showed that German mothers valued independence, the ability to control negative impulses, and to be socially skilled (Durgel, Leyendecker, Yagmurlu, & Harwood, 2009). The Turkish mothers valued children's respectful and well-mannered behavior and close family ties more, but they also valued autonomy, and family integrity and closeness. In both groups, mothers with a higher educational level showed more goals related to autonomy and emotional well-being of the child. Lower educated mothers showed more goals related to close family ties and showing respectful behavior. Education thus also plays a role in socialization goals. This was also the case in a study on goals on conformity and autonomy (Nijsten et al., 2006). Turkish parents valued conformity strongly and autonomy at lower levels. However, higher educated Turkish parents valued conformity less and autonomy more (Nijsten et al., 2006; Phalet & Schonpflug, 2001). In another study on maternal expectations and child-rearing practices of Turkish immigrant and Dutch mothers in the Netherlands and Turkish mothers in Turkey, the first group showed an in-between pattern regarding child-centered behaviors compared to the Dutch mothers in the Netherlands and Turkish mothers in Turkey (Durgel, Van de Vijver, & Yagmurlu, 2013). In other words: the parenting pattern of Turkish immigrant mothers seems to undergo a transformation from the Turkish to the Dutch cultural pattern.

Again the predictive value of education was shown for developmental expectations and parenting practices in general. Compared to ethnic background and immigration history, education was a more consistent predictor. These studies supported the psychological interdependence family model (Kagitcibasi & Ataca, 2005).

Sensitive parenting in minority and majority families

In studies on family life and parenting, several domains can be distinguished, including parenting styles (McDermott & Barik, 2014) and socialization goals (Carra, Lavelli, Keller & Kärtner, 2013). In studies on early childhood, maternal sensitivity is one of the most commonly observed parenting behaviors (Mesman & Emmen, 2013). It has been shown that sensitivity is related to positive outcomes in children in several areas of functioning such as secure attachment, self-regulation, and cognitive competence (e.g., Bakermans-Kranenburg, Van IJzendoorn, & Juffer, 2003; Bernier, Carlson, & Whipple, 2010; Eisenberg et al., 2001; Kochanska, 2002). Most of the studies on observed sensitivity have been conducted in Western majority samples, but there is some evidence for the potential universality of the beneficial effects of maternal sensitivity (Mesman et al., 2012). However, studies have also shown lower sensitivity levels of ethnic minority parents compared to majority parents (Barnett, Shanahan, Deng, Haskett, & Cox, 2010; Mesman et al., 2012; Pungello, Iruka, Dotterer, Mills-Koonce, & Reznick, 2009; Van IJzendoorn, 1990). These differences generally diminish (Van IJzendoorn, 1990; Yaman et al., 2010) or disappear when socioeconomic status is taken into account (Mesman et al., 2012). In addition to socioeconomic status, diverging beliefs about parenting (Barnett et al., 2010; Harwood, Schoelmerich, Schulze, & Gonzalez, 1999) could possibly explain lower sensitivity levels in minority families.

Sensitivity beliefs in minority and majority families and professionals

Parents from different cultural backgrounds have been shown to differ in socialization goals, which are the qualities that parents value and want their children to develop when they grow up (Harwood, Schoelmerich, Ventura-Cook, Schulze, & Wilson, 1996). For instance, parents from a Turkish cultural background generally value and show more intrusive behaviors, such as demands without explanation, high-power control strategies and low autonomy encouragement than Dutch parents, controlling for maternal education (Yaman et al., 2010). In addition, families with a non-Western cultural background tend to value child obedience more than parents from Western cultural backgrounds (e.g., Harwood et al., 1999; Kagitcibasi, 2007). Whereas sensitivity refers to observing and reacting to child signals in a child-centered way, authoritarian parenting is more parent-centered and (although it does not exclude warm parenting), it is generally not conducive to sensitive parenting. Thus, the question is whether parents from different cultural backgrounds would also differ in sensitivity beliefs, i.e. the extent to which they regard sensitivity in child-rearing as an important part of good parenting. Previous studies on socialization goals generally focus on

very concrete qualities that parents want their children to develop. Sensitive parenting, however, is a more abstract construct that refers to a large variety of concrete behaviors as long as they represent prompt and appropriate responding to children's signals. This openness to different behavioral manifestations of the same underlying construct might leave more room for intercultural agreement than very specific behaviors that are more likely to vary between groups (Mesman, Oster, & Camras, 2012).

The assessment of sensitivity beliefs across cultural groups is important, since early parenting interventions generally focus on enhancing maternal sensitivity because of the importance of sensitivity in fostering optimal child development (e.g., Haltigan, Roisman, & Fraley, 2013). Family therapists and other youth care professionals work with parents from different cultural backgrounds. Forming a positive alliance between the treatment provider and the person receiving the treatment is crucial for effective interventions. Alliance refers to the collaborative nature of the interaction between a patient and therapist or counselor, the affective bond between them, and the ability to agree on treatment goals and tasks (Kazdin, Marciano, & Whitley, 2005).

For interventions to be effective, knowledge of the culture of the parent is shown to be important (Knipscheer & Kleber, 2004; Sue, 1998). In line with this, it is suggested to match therapist and patient on ethnicity (Zane et al., 2005). However, in multicultural societies this is not always possible (Knipscheer & Kleber, 2004). It has been shown that child care facilities have difficulties reaching immigrant families (NJI, 2014), and immigrant parents make less use of parent support programs. By providing information regarding sensitivity beliefs of mothers and professionals, institutions could use this information in reaching minority families. Studies have shown positive relations between alliance and therapeutic change (Kazdin et al., 2005; Knipscheer & Kleber, 2004).

In addition, instead of a cultural match, the cognitive match, which refers to the match between therapists and patients in how they conceptualize treatment goals and means for resolving problems, seems to be more relevant (Sue, 1998). This means that therapists and patients have the same ideas and goals regarding the provided intervention. No studies have been conducted yet on the cognitive match between therapists and parents with different cultural backgrounds regarding sensitivity beliefs. One recent study on sensitivity beliefs of minority and majority mothers showed strong convergence (Emmen et al., 2012), however, little is known about whether sensitivity beliefs between cultural groups of mothers and professionals providing treatment converge. The finding that sensitivity beliefs across cultural groups of mothers converge and support the cross-cultural applicability of the sensitivity construct (Mesman & Emmen, 2013), suggests convergence on sensitivity beliefs between mothers and professionals as well. The aim of the first empirical study in the current dissertation is to test whether there is convergence on sensitivity beliefs of mothers and professionals with a majority and minority status.

Sensitivity beliefs in relation to sensitive behaviors

An important issue in social psychology is the question whether attitudes about a certain issue predict people's behavior. The Theory of Planned Behavior (Ajzen, 1991) assumes that behaviors are the result of intentions and perceived behavioral control (the perceived ease or difficulty of performing the behavior). Intentions are derived from the attitude toward the behavior (the evaluation of the behavior), the subjective norm (the perceived social pressure to perform or not to perform the behavior) and the perceived behavioral control. A literature review showed that the results of studies assessing the relation between attitudes and behaviors are mixed, with some studies reporting strong positive relationships and others reporting weak relations (Ajzen & Fishbein, 1977; Carra et al., 2013; Cooke & Sheeran, 2004; Crano & Prislin, 2006).

Regarding attitudes and behavior in parenting, and even in pregnancy, studies have shown significant, though weak, positive relations. Thus, parental attitudes about child-rearing are not necessarily translated into corresponding parenting behaviors. In a study with self-reported parenting styles, authoritarian and authoritative parents were shown to display different parenting behaviors in more challenging child-rearing contexts, and authoritarian parents showed more negative behaviors in difficult situations (Coplan, Hastings, Lagacé-Séguin, & Moulton, 2002). In another study, unrealistic developmental expectations of parents were related to negative attitudes about their own child and lower parenting quality in the home environment (Dagget, O'Brien, Zanolli, & Peyton, 2000). Furthermore, pregnant mothers' negative maternal attitudes about parenting and child-rearing predicted lower sensitivity towards their children at the ages of 12 to 15 months in an ethnically diverse sample (Kiang, Moreno, & Robinson, 2004).

Studies examining the relation between parental attitudes and behaviors have not included assessments of maternal (beliefs about) sensitivity in different ethnic groups. However, while convergence on sensitivity beliefs specifically has been found across majority and minority groups (Emmen et al., 2012), minority mothers generally behave less sensitively compared to majority parents (Mesman et al., 2012). In a recent study on socialization goals and parenting behaviors of immigrant and native mothers in Italy it has been shown that socialization goals of the native Italian mothers were significantly associated with parenting behaviors whereas this was not the case in the immigrant group (Carra et al., 2013). The authors argue that it could be that socialization goals and parenting behaviors of immigrant mothers are affected by the experience of migration, given the recent migration (around seven years ago) of these mothers to the host society. In addition, studies have shown diverging parenting behaviors in different cultures (Bornstein et al., 1992; Kärtner et al., 2008). However, it has also been shown that the overall level of prompt responding (maternal contingency) is comparable across cultures, regardless of the differences in behavioral repertoires (Kärtner, Keller, & Yovsi, 2010). Assessing the relation between sensitivity beliefs and sensitive behaviors in minority and majority families could provide information about the translation of beliefs into behaviors in different groups. Since previous studies have

shown cross-cultural convergence regarding sensitivity beliefs, but show differences in sensitive behaviors across cultural groups, the relation between beliefs and behaviors could differ between groups. Furthermore, the convergence between sensitivity beliefs and sensitive behaviors is important to the design of parenting interventions, because this could provide information about both the cognitive and behavioral aspects that are relevant to enhancing parental sensitivity. The aim of the second empirical study in the current dissertation is to examine the relation between sensitivity beliefs and sensitive behaviors in Turkish minority and Dutch majority families.

Ethnic and religious views on child-rearing in relation to sensitivity

Ethnic minorities generally identify more with their ethnic and religious origin compared to identification with characteristics of the majority group (Verkuyten & Yildiz, 2007). Migrated Turkish families have been shown to often maintain strong links to Turkish culture, accompanied by collectivistic family values, limited contact with the host community, a preference for Turkish marriage partners, and maintenance of the Turkish language between generations (Crul & Doornick, 2003). For instance, in a study on acculturation attitudes of Turkish mothers with preschool-aged children in Australia (Yagmurlu & Sanson, 2009), three types of attitudes were distinguished, mothers who showed preference for Turkish and Australian ways of living (integration), mothers who preferred separation from the Australian values to protect the Turkish culture (separation), and mothers who showed positive attitudes toward both cultures but did not value Australian manners to the same extent as they valued Turkish manners (intermediate). It was found that, a quarter of the mothers showed attitudes towards separation, more than a quarter showed attitudes towards integration and nearly half of the parents showed positive attitudes toward both cultures.

Studies have shown that ethnic background and religion are related. Of the Turkish minorities in the Netherlands it is estimated that a major proportion (87%) is Muslim (Forum, 2012). Ethnic identity is a person's sense of belonging to an ethnic group and the part of one's thinking, perceptions, feelings, and behavior that is due to group membership (Rotheram & Phinney, 1986). The intergenerational transmission of ethnic identity occurs through ethnic socialization which refers to parental communication on information, values, and perspectives about ethnicity to children (Hughes et al., 2006; Quintana & Vera, 1999). Ethnic identity has been found to be positively related to maternal warmth (Caldwell, Zimmerman, Bernat, Sellers, & Notaro, 2002), and ethnic socialization has been found to be positively related to positive and involved parenting (Frabutt, Walker, & MacKinnon-Lewis, 2002), and academic involvement at home and at school (McKay, Atkins, Hawkins, Brown, & Lynn, 2003). Ethnic identity and socialization may play a more salient role in child-rearing behaviors of minority parents compared to majority parents, because ethnic identification of minorities can be seen as a strategy to cope with uncertainty and rejection (Hogg, 2000; Schmitt & Branscombe, 2002). (Turkish) minorities and Muslims have been shown to experience discrimination (Forum, 2012) and ethnic identification could be seen as a way to

cope with this discrimination by focusing on the own group (Hogg, 2000; Schmitt & Branscombe, 2002). In a study on acculturation and parenting in Turkish immigrant mothers in Australia those with attitudes supporting integration seemed to be more disconnected from traditional Turkish child-rearing patterns (Yagmurlu & Sanson, 2009). In addition, all mothers indicated using inductive reasoning (providing explanations to show the effect of own behavior on others), which is a discipline pattern more common in individualistic cultures, in their child-rearing practices. However, mothers who supported integration showed more induction compared to mothers who preferred separation from the host society. This shows the importance of assessing the influence of ethnic identity and integration attitudes on parenting practices.

Through ethnic and religious socialization, parental ethnic identity and religiosity are transmitted to children. Religious identity refers to the extent to which a person feels connected to his/her religion and interprets religion as part of his/her identity and religious socialization refers to parental attempts to transmit their religious beliefs, ideas, and related behavioral requirements to their children. Studies assessing religiosity of parents in relation to their parenting behaviors have shown diverging results. Parents with an authoritative parenting style emphasize discussion, explanation and clear communication, whereas parents with an authoritarian parenting style restrict unwanted behavior without explanation and by demanding and physical interference (Baumrind, 1966). Regarding religiosity and parenting style some studies show positive relations with an authoritative parenting style and promoting autonomy (Gunnoe, Hetherington, & Reiss, 1999; Vermeer, 2011). It is suggested that this could be the case because religious parents have been found to combine their demandingness with responsiveness (Gunnoe et al., 1999). Further, involvement in a group in which religious messages regarding parenting are provided could offer resources for parents to improve their child-rearing by promoting for instance, unconditional love and patience (Pearce & Axinn, 1998).

In contrast, in a short review positive relations of religiosity with corporal punishment and an authoritarian parenting style in conservative protestants are shown (Socolar, Cabinum-Foeller, & Sinal, 2008). The demandingness and the use of corporal punishment are used to have authority over children and to discipline children. It is suggested that authoritarian parenting can induce obedience in children, which is important for religious parents (Socolar et al., 2008). Nearly all studies on religiosity and parenting have been conducted in Christian samples, and it remains unclear whether any of these findings can be generalized to other religious groups. In addition, studies on ethnic background and religion in relation to the quality of parent-child interactions generally focus on adolescents. The relations between ethnic and religious identity and ethnic and religious socialization with parenting behaviors have rarely been studied in early childhood. Since ethnic background and religiosity are intertwined and both have been found to be related to parenting it is important to assess in which manner ethnicity-related and religious-related variables are related to sensitive parenting in Turkish minorities. The assessment of ethnicity-related and

religion-related factors in relation to parenting could provide information that may be used in interventions. For instance, if ethnicity and religiosity are related (positively or negatively) to parenting practices the focus in interventions could be on reinforcing or weakening ethnicity-related and religion-related factors which interact with parenting practices. The aim of the third empirical study in this dissertation is to assess the relations between ethnic identity and socialization and religious identity and socialization with sensitive parenting.

Overview of the aims of this dissertation

The overall aim of this dissertation is to examine sensitivity beliefs and sensitive behaviors in Turkish ethnic minority families and factors that are related to sensitive parenting in those families. First, a cross-cultural comparison between mothers and professionals from majority and minority groups in the Netherlands and a majority group in Turkey is made regarding sensitivity beliefs. Second, the relation between sensitivity beliefs and sensitive behaviors of Turkish ethnic minority mothers and Dutch majority mothers is examined. Third, the relations between ethnic identity, ethnic socialization, religious identity and religious socialization with sensitive parenting in Turkish ethnic minorities are studied. By focusing on sensitivity in Turkish families, the goal is to provide information which will be useful for child care facilities to reach immigrant parents. In addition, the findings could be used to determine whether minority specific family interventions are needed. In this dissertation, sensitive behaviors are assessed by observational measures, which are rarely used in studies with minorities. By including a Muslim sample it is also aimed to contribute to the literature on the relation between religion and parenting, in which generally Christian families are included. In the last chapter the main findings of the studies are summarized and integrated in a general discussion. The following hypotheses are tested in this dissertation:

1. Beliefs about the ideal sensitive mother of mothers and professionals with a Turkish minority, Turkish majority and Dutch majority background converge with the notion of the highly sensitive mother (Chapter 2).
2. The perceived importance of sensitivity in child-rearing and actual sensitive behaviors are related in Turkish minority as well as in Dutch majority mothers, however this relation is expected to be weaker in the Turkish minority group (Chapter 3).
3. Turkish minority mothers' ethnic identity and ethnic socialization are positively related to maternal sensitivity (Chapter 4).
4. Turkish minority mothers' religious identity and religious socialization are related to maternal sensitivity, although the direction of this relation is unclear due to inconsistent results in the literature (Chapter 4).

Chapter 2

Professionals' and mothers' beliefs about maternal sensitivity across cultures: Toward effective interventions in multicultural societies

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Abstract

Interventions for parents of young children often focus on enhancing parental sensitivity. A cognitive match on treatment goals has been shown to relate to the quality of the relationship (or alliance) between a therapist and the person receiving intervention, which in turn predicts the effectiveness of interventions. However, in multicultural societies therapists and patients do not always share the same ethnic background, which could influence their match on treatment goals. The aim of this study was to test the hypothesis that there is a cognitive match regarding the importance of sensitivity in early childhood parenting across Dutch and Moroccan, Turkish, Surinamese, and Antillean ethnic minority mothers and youth mental health professionals in the Netherlands and Turkish mothers and youth mental health professionals in Turkey. A total of 105 mothers with at least one child between the ages of 6 months and 6 years and 98 female professionals described their views about the ideal sensitive mother using the Maternal Behavior Q-Sort (Pederson, Moran, & Bento, 1999). Both professionals' and mothers' beliefs about the ideal mother converged strongly with the concept of sensitivity and within and across cultural groups of mothers and professionals. These findings point to a cognitive match on sensitivity beliefs between mothers and professionals with different cultural backgrounds. Our findings suggest that early childhood parenting interventions focused on enhancing sensitivity fit the beliefs of mothers of young children in different cultural groups.

Keywords: alliance, maternal sensitivity, beliefs, culture, socioeconomic status

Introduction

In multicultural societies, the effectiveness of parenting interventions can be compromised by diverging ideas about ‘good parenting’ of the professional providing treatment and the parent seeking support (e.g., Karlsson, 2005; Maramba & Hall, 2002; Sue 1998). Many parenting interventions aimed at improving early childhood parent-child interactions focus on increasing the sensitivity of parents towards their young children (e.g., Heinicke et al., 1999; Marcynyszyn, Maher, & Corwin, 2001; Van Zeijl et al., 2006). Sensitive parenting as indicated by appropriate responsiveness to child signals (Ainsworth, Bell, & Stayton, 1974) predicts secure attachment (Bakermans-Kranenburg, Van IJzendoorn & Juffer, 2003) and other positive child outcomes (e.g., Bernier, Carlson, & Whipple, 2010; Eisenberg et al., 2001; Kochanska, 2002). Although the predictive value of sensitive parenting has been found across cultures (Mesman, Van IJzendoorn, & Bakermans-Kranenburg, 2012), it is unclear whether mothers and professionals with different cultural backgrounds agree on the importance of sensitivity in child-rearing. This issue is of particular importance for designing culturally sensitive intervention and prevention programs for parents of young children in societies with multiple cultural groups.

Posada et al. (1995) showed that beliefs about secure-base behavior of children converge across groups of mothers and experts from different cultures. In a recent study that also included the current sample of mothers, strong convergence was found on sensitivity beliefs between Dutch, Turkish-Dutch and Moroccan-Dutch mothers in the Netherlands and academic experts on parenting (Emmen, Malda, Mesman, Ekmekci, & Van IJzendoorn, 2012). In addition, analyses including the current sample of mothers showed strong convergence regarding sensitivity beliefs between different countries such as Chile, China, the Netherlands, Turkey, and Zambia (Mesman et al., 2014). These findings show that the main tenets of attachment theory regarding child and maternal behavior are seen as important across different groups. This in turn suggest that this may also be the case when comparing sensitivity beliefs of mothers and youth care professionals, but this has not yet been examined.

A crucial requirement for effective interventions is the formation of a positive alliance between the treatment provider and the person receiving treatment. In the literature on treatment effectiveness, “alliance” refers to the collaborative nature of the interaction between the patient and therapist or counselor, the affective bond between them, and the ability to agree on treatment goals and tasks (Kazdin, Marciano, & Whitley, 2005). Studies have shown that the stronger the alliance, the greater the therapeutic change (Kazdin et al., 2005; Knipscheer & Kleber, 2004).

In addition to the importance of alliance to enhance treatment success, it has been suggested that for therapists working with patients from different cultural backgrounds, knowledge of the culture of the patient is important for the effectiveness of the therapy

(Knipscheer & Kleber, 2004; Sue, 1998). Cross-cultural competence on the part of the therapist may enhance the quality of alliance with these families (Sue, 1998), which in turn predicts better treatment outcomes. The ethnic-similarity hypothesis suggests that ethnic-minority patients will prefer a therapist with the same ethnic background in therapy (Knipscheer & Kleber, 2004). Not matching therapist and patient on ethnicity may cause problems in establishing rapport and trust (Zane et al., 2005) and it is currently considered good practice to strive for shared culture and language of the patient and therapist (American Psychological Association, 1993). However, in reality it is not always possible to match patient and therapist on ethnicity (Knipscheer & Kleber, 2004).

Interestingly, in a study among Asian-, African-, Mexican-, and Caucasian-American patients, ethnic matching failed to be a significant predictor of mental health treatment outcomes for most ethnic groups (Sue, Fujino, Hu, Takeuchi, & Zane, 1991). In addition, Turkish and Moroccan ethnic minority patients in the Netherlands have been found to value similarity in attitudes and beliefs more than they valued an ethnic match in therapy (Knipscheer & Kleber, 2004). It has been argued that the *cognitive* match is the most important, referring to the match between therapists and patients in how they conceptualize treatment goals and means for resolving problems (Sue, 1998). This is consistent with the fact that shared goals are a key component of alliance between therapist and patient.

Maternal sensitivity refers to a mother's ability to perceive child signals, to interpret these signals correctly, and to respond to them promptly and appropriately (Ainsworth et al., 1974), and is related to positive child outcomes in several domains (e.g., Bakermans-Kranenburg et al., 2003; Bernier et al., 2010; Eisenberg et al., 2001; Kochanska, 2002). Indeed, early parenting interventions often focus on enhancing sensitivity, and several evidence-based interventions with this focus have been developed (e.g., Heinicke et al., 1999; Van Zeijl et al., 2006; Webster-Stratton & Hammond, 1997). The Video-feedback Intervention to promote Positive Parenting and Sensitive Discipline (VIPP-SD) is an example of such an intervention (Van Zeijl et al., 2006). The aim of this intervention is to increase sensitive behavior by giving mothers positive feedback on videotaped interactions of themselves with their children. A process evaluation of the VIPP-SD program showed that greater alliance between the intervenor and the mother predicted stronger intervention effectiveness (Stolk et al., 2008). However, process evaluations of parenting interventions focusing on sensitivity have so far not included ethnic minority parents.

A recent literature review (Mesman et al., 2012) showed that the relation between maternal sensitivity and positive child outcomes also applies to ethnic minority families, although several studies have shown lower maternal sensitivity for minority families than for majority families (Leseman & Van den Boom, 1999; Van IJzendoorn, 1990; Yaman, Mesman, Van IJzendoorn, Bakermans-Kranenburg, & Linting, 2010). This discrepancy mainly seems to reflect differences in socioeconomic status (SES) rather than cultural differences (Mesman et al., 2012); in studies in which the SES of participants is controlled for and in studies in which participants are matched on SES, the ethnic differences in

sensitivity decreased substantially. A possible explanation for the association between SES and sensitivity (beliefs) can be found in the Family Stress Model (Conger & Donnellan, 2007). This model describes that stressors such as socio-economic strains lead to family stress (e.g., depression and family dysfunction), which in turn leads to non-optimal parenting (e.g., lack of warmth and support). Given that ethnic minorities are generally overrepresented in low-SES populations, minority parents could benefit from parenting interventions with the focus on enhancing sensitivity and reducing family stressors. In addition, minority status could be related to different kinds of stressors, such as acculturation processes (Berry, 1997). Acculturation stress is not only seen in first- but also in second-generation immigrants (Crockett et al., 2007).

Religiosity, referring to the extent to which parenting is guided by religion, could be another predictor of sensitive parenting beliefs and practices. Religiosity of parents helps to shape parental values and practices (Petts, 2007). For instance, in a meta-analytic review it was found that greater parental religiousness relates to more positive parenting (Mahoney, Pargament, Tarakeshwar, & Swank, 2001). Snider, Clements, and Vazsonyi (2004) found that parents who were perceived as more religious by their adolescent children were also perceived as more supportive. Also, positive relations between authoritative parenting and religiosity of parents have been shown (Gunnore, Hetherington, & Reiss, 1999). In contrast, some studies found no or only a weak relation between religiosity and parenting style (Vermeer, 2011). Methodological problems such as using single-item measures for religious domains and small effect sizes of studies on this topic have been reported (Mahoney et al., 2001).

Turkish, Moroccan, Surinamese, and Antillean groups represent the largest ethnic minority groups in the Netherlands (CBS, 2012). The CBS defines a second-generation immigrant as a person born in the Netherlands with at least one parent born in the country of origin and the second generations of these ethnic minority groups are the fastest growing ethnic minority populations in the Netherlands. The Turkish and Moroccan immigrants first came to the Netherlands as invited guest workers in the period 1960-1970. Their intention was to make a living and return to their countries of origin, but many stayed in the Netherlands. The Surinamese migrants share a diverse Caribbean cultural and ethnic background with other former Dutch West Indies colonies. The migration of Surinamese people happened mostly after Surinam became independent in 1975 and continued over the next two decades because of political and economic instability. Of the Antilleans, the first wave came to the Netherlands in the 1960s and 70s in order to study and many stayed and there are still Antilleans migrating to the Netherlands. The Netherlands Antilles has been recently dissolved as a country but is still part of the Kingdom of the Netherlands under a different legal status.

It has been shown that first and second-generation immigrants identify themselves more with their own ethnic culture than with that of the host society (Phinney, Horenczyk, Liebkind, & Vedder, 2001). About 30 to 40 percent of first-generation and 10 to 20 percent

of second-generation Turkish and Moroccan immigrants are never in contact with members of the Dutch majority in their leisure time. Both groups are mostly in contact with persons with a similar ethnic background and Turkish and Moroccan ethnic minorities rarely marry Dutch majority group members (SCP, 2009; 2011).

The mentioned ethnic minority groups are considered to have a more collectivistic cultural background compared to the individualistic cultural background of the Dutch majority ethnic group. In earlier studies it has been shown that there are differences in parenting between individualistic and collectivistic cultures. For instance, parents from collectivistic cultures tend to be more authoritarian, use more restricting behaviors during social play and they expect more obedience from their children (Ispa et al., 2004; Rubin, 1998). These parenting practices are generally related to lower levels of sensitivity (Ispa et al., 2004). In more individualistic cultures self-interest, autonomy, and self-reliance are more valued in the socialization process. Parents from these cultures tend to be more authoritative, promote independence, self-reliance, and exploration of the environment, and put less emphasis on obedience and sociability (Harwood, Miller, & Irizarry, 1995; Tamis-LeMonda et al., 2007). This pattern of socialization goals is largely consistent with sensitive parenting.

The design of the current study was modeled according to the widely cited study by Posada and colleagues (1995) in which mother's descriptions of an ideal child in terms of secure base behavior were compared across seven countries representing different socio-cultural contexts using the Attachment Q-Set (Waters, 1987). Whereas Posada and colleagues investigated beliefs about the child's contribution to secure base behavior, in this study the aim is to examine beliefs about the caregiver's contribution to this relationship, i.e., sensitive parenting. The goal of the current study is to test the hypothesis that the beliefs about the ideal mother of both mothers and professionals with different cultural backgrounds converge with the notion of the highly sensitive mother. Mothers are compared to professionals with a different cultural background. In the Netherlands, Dutch majority and Turkish, Moroccan, Surinamese, and Antillean minority mothers and professionals were included. Additionally, Turkish majority mothers and professionals in Turkey were included to be able to make a comparison with Turkish minorities in the Netherlands. Because studies on the relation between religion and parenting show diverging results, religiosity was included in this study from an exploratory perspective.

Method

Participants

The sample consisted of 150 mothers with at least one child between the ages of 6 months and 6 years, and 98 female mental health professionals (e.g., child psychologists, parenting counselors, family therapists) working with children younger than 12 years and their parents.

Mothers. The sample with mothers consisted of five subsamples from the

Netherlands and one from Turkey: Dutch majority, Moroccan minority, Turkish minority, Surinamese minority, and Antillean minority in the Netherlands and Turkish majority in Turkey (Table 1). In both Dutch and Turkish majority groups, 45 mothers were included and stratified by educational level (low, middle, high). The Dutch minority groups consisted of 15 participants each. The sample in the Netherlands included second-generation immigrant mothers who were born in the Netherlands (with at least one of their parents born in the country of interest), and first-generation immigrant mothers who migrated to the Netherlands before the age of 11. This was done to ensure the homogeneity of the immigrant sample of mothers, and to make sure they all completed at least some years of education in the Netherlands and were able to speak and read Dutch. Because of the recent history of migration of the Antillean group, it was not possible to select only Antillean second-generation and first-generation mothers who migrated to the Netherlands before the age of 11 years, therefore four first-generation Antillean mothers were also included (migrated when they were 12, 19, 21 and 23 years old). Thirty mothers were first-generation immigrants. The first-generation mothers who immigrated to the Netherlands before the age of 11 years ($n = 25$) had a mean immigration age of 5.16 ($SD = 3.39$) years and had been living in the Netherlands for 25.48 ($SD = 6.54$) years on average. The first-generation mothers who immigrated after the age of 11 years ($n = 4$) had a mean immigration age of 18.75 ($SD = 4.79$) years and had been living in the Netherlands for 11.00 ($SD = 3.83$) years on average. For one first-generation mother the age of migration was missing. The number of children of the participating mothers ranged from one to five, with an average of 1.87 ($SD = 0.75$). The mother's average age was 31.97 years ($SD = 5.37$, range = 19-46).

Professionals. The sample of professionals also consisted of five subsamples from the Netherlands and one from Turkey, representing the same ethnic groups as those included in the mother sample. Within the Netherlands, the Dutch majority, Turkish minority, and Moroccan minority subsamples consisted of 11 professionals each. The Surinamese minority and Antillean minority subsamples consisted of 10 professionals each. In Turkey 45 professionals participated. All professionals had at least two years of experience in working with children younger than 12 years and their parents. In addition, only female professionals were selected to facilitate comparisons with mothers. In contrast to the minority mother sample in the Netherlands, the minority professional sample ($n = 42$) consisted of both first-generation ($n = 22$) and second-generation ($n = 20$) women. It was not possible to include only second-generation minority professionals, because of the small number of professionals with an ethnic minority background in the Netherlands. In the group of professionals 59 (60%) had children. The number of children ranged from zero to five, with an average of one ($SD = 1.15$). The average age of the professionals was 38.01 years ($SD = 9.79$, range = 25-65). Their experience as child care professionals was on average 11.31 years ($SD = 7.11$, range = 2-30). Of the 98 professionals 4 (4%) had completed secondary education, 55 (56%) had obtained a bachelor's degree and 39 (40%) had obtained a master's degree.

Procedure

The Dutch high-educated mothers and the ethnic minority mothers were recruited by providing verbal and written information about the study to any potential participant within the authors' and research assistants' networks. Dutch low- and middle-educated mothers were drawn from a sample of a previous observational study on early childhood parenting conducted by our research team (Joosen et al., 2013). Dutch, Turkish minority, and Moroccan minority mothers participated in our earlier study on sensitivity beliefs (Emmen et al., 2012). In the current study the findings are extended by adding Antillean minority, Surinamese minority, and Turkish mothers and by adding professionals from all mentioned cultural groups. The professionals were recruited by providing verbal and written information about the study to any potential participant within the authors' and research assistants' networks. In addition, different psychological health care services were called to ask whether they were interested in the study and had potential participants. All mothers received the same folder which included information about the study. Professionals received the same folder with minor changes to suit the target audience. The folders were sent or personally handed to potential participants before the home visit. In addition, the folders were given to the participants at the beginning of the home visit. All mothers gave written consent and were visited at home by one of six trained students (undergraduate and graduate) in the Netherlands and by one of eight trained students (undergraduate and graduate) in Turkey. The home visits in the Netherlands were conducted in the Dutch language and in Turkey they were conducted in the Turkish language.

All mothers in the Netherlands indicated that their spoken Dutch language ability was fluent ($n = 98$) or sufficient ($n = 7$). In the Netherlands the mothers received a gift coupon of 10 Euros, and in Turkey the mothers received a gift coupon of 30 Turkish Liras (approximately 11 Euros). Professionals did not receive any financial compensation. All professionals were recruited by providing verbal and written information about the goal of the study to any potential participant within the authors' and research assistants' networks and within different psychological health care services. All professionals gave written consent and were visited at home or at their institution by one of the (under)graduate research assistants in the Netherlands and in Turkey. The visits were conducted in the Dutch language in the Netherlands and in the Turkish language in Turkey. With four Turkish minority professionals the visits were conducted in the Turkish language, since these professionals indicated that their language ability was better for the Turkish language than for the Dutch language.

Measures

Views of the ideal mother. The Maternal Behavior Q-Sort (MBQS; Pederson et al., 1999) was used to assess views about the ideal sensitive mother. The MBQS consists of 90 cards with statements about maternal behaviors that mothers and professionals sorted into 9 stacks from '*least descriptive*' (1) to '*most descriptive*' (9) of the ideal mother. Because the

Table 1. Means (Standard Deviations) and Ethnic Group Differences for Mothers (M) and Professionals (P)

	Dutch (D)	Turkish minority (TM)	Moroccan minority (MM)	Surinamese minority (SM)	Antillean minority (AM)	Turkish (T)	F	Post hoc
	M (n = 45) P (n = 11)	M (n = 45) P (n = 11)	M (n = 45) P (n = 11)	M (n = 45) P (n = 11)	M (n = 45) P (n = 11)	M (n = 45) P (n = 11)		
Educational level								
Professionals (n = 98)	4.55 (0.52)	4.00 (0.77)	3.91 (0.30)	4.10 (0.32)	4.20 (0.42)	4.60 (0.49)	6.07**	MM < D, T; SM < T
Mothers (n = 150)	3.16 (1.19)	2.93 (0.88)	3.33 (0.82)	3.60 (0.74)	3.00 (0.76)	2.67 (1.35)	2.12	
Family income								
Mothers (n = 137)	5.51 (1.22)	3.92 (1.38)	4.92 (1.38)	4.67 (1.49)	3.93 (1.53)	3.58 (1.74)	8.30**	TM, AM, T < D; T < MM, SM
Age								
Professionals (n = 98)	42.09 (9.15)	35.45 (8.00)	34.73 (8.11)	39.50 (13.15)	43.00 (11.91)	37.00 (9.09)	1.48	
Mothers (n = 147)	33.11 (5.04)	29.80 (4.36)	32.20 (4.79)	30.53 (4.02)	26.53 (4.45)	33.90 (5.49)	6.23**	TM < D; TM, SM < T; AM < D, MM, SM, T

Table continues on the next page

Table continued

Number of children									
Professionals (<i>n</i> = 98)	1.82 (1.08)	1.45 (1.29)	1.27 (1.74)	0.90 (1.52)	0.90 (0.99)	0.91 (0.82)	1.52		
Mothers (<i>n</i> = 150)	2.11 (0.53)	2.13 (0.74)	2.40 (1.06)	1.40 (0.63)	1.33 (0.49)	1.69 (0.70)	7.37**	D > AM, SM, T; MM > AM, SM; TM > AM	
Religion in child-rearing whole sample									
Professionals (<i>n</i> = 98)	7.73 (5.41)	15.00 (5.22)	17.18 (2.23)	10.50 (7.29)	13.20 (6.49)	9.36 (4.32)	7.09**	D, T < TM, MM	
Mothers (<i>n</i> = 142)	8.78 (6.07)	18.17 (2.12)	17.00 (2.37)	10.54 (5.35)	13.67 (4.12)	12.58 (4.78)	10.74**	D < TM, MM, AM, T; SM, AM, T < TM; SM, T < MM	
Religion in child-rearing (if religious)									
Professionals (<i>n</i> = 81)	12.20 (5.22)	15.00 (5.22)	17.18 (2.23)	13.29 (7.04)	17.14 (1.68)	9.93 (4.21)	7.62**	T < MM, AM	
Mothers (<i>n</i> = 116)	13.68 (5.28)	18.17 (2.12)	17.00 (2.37)	11.73 (4.92)	13.67 (4.12)	12.77 (4.61)	4.67*	D, SM, AM, T < TM	

* $p < .05$. ** $p < .01$.

original items were designed to be evaluated by professionals rather than mothers, the behavioral descriptions were simplified for the present study to make them more understandable for mothers. For example, the item “Provides B with little opportunity to contribute to the interaction” was simplified into “Gives her child little opportunity to play along or to respond”. The simplified version was also used for professionals to make their scores comparable to those of the mothers. In Turkey, the simplified version was only used for mothers. The participants were first asked to sort the cards into three stacks from ‘do not fit the ideal mother at all’ to ‘fit the ideal mother really well’. The participants were explicitly told that there are no correct or incorrect answers and mothers were told that it is not about their own parenting behavior, but about what the ideal mother should or should not do. The professionals were told that it is not about the behavior of their clients or about their own parenting behavior (if they had children), but about what the ideal mother should or should not do. The construct of sensitivity was not explicitly mentioned to the mothers or to the professionals. Any question participants had concerning the meaning of an item was answered according to the item explanations in the protocol. When the participants distributed the cards across the three stacks, they were asked to sort each stack into three smaller stacks. After the participants distributed all cards across nine stacks, they were asked to evenly distribute the cards across the stacks until each stack consisted of 10 cards (Emmen et al., 2012). Sensitivity belief scores were derived by correlating the resulting profiles with the criterion sort provided by the authors of the MBQS (Pederson et al., 1999).

Religion in child-rearing. The importance of religion in child-rearing was measured with four self-developed items for mothers as well as professionals, with or without a religion. The answer categories ranged from (1) ‘*totally disagree*’ to (5) ‘*totally agree*’. Also a (6) ‘*not applicable*’ answer category was included for the participants who did not have a religion. The items were “I use my religion as a guideline for the parenting of my child”, “My religion helps me to raise my child good”, “I learn my child a lot about my religion”, and “I learn my child that my religion plays an important role in our life”. Most of the participants without a religion filled in ‘not applicable’ for the items. A total score was computed by summing item scores. The (6) ‘*not applicable*’ scores were transformed into (1) ‘*totally disagree*’. The internal consistency of the scale was high for mothers (Cronbach’s $\alpha = .98$) as well as professionals (Cronbach’s $\alpha = .97$). In the analyses two versions of religion in child-rearing were used, the variable ‘religion in child-rearing (whole sample)’ refers to the views of all participants on the importance of religion in child-rearing (with non-religious mothers all receiving the lowest score), whereas the variable ‘religion in child-rearing (if religious)’ refers only to the views on the importance of religion in child-rearing of participants who indicated having a religion.

Educational level and family income. Educational level was measured on a scale from 1 to 5: *primary school* (1), *vocational school* (2), *secondary school/middle vocational education* (3), *high vocational education* (4) and *university or higher* (5). Annual gross family income was measured on a 7-point scale ranging from (1) ‘*no income*’ to (7) ‘*50.000*’

euro/10.000 Turkish lira or more', for mothers only.

Results

Preliminary analyses

The results of the ANOVAs to test whether there were significant differences between groups of mothers in background variables are shown in Table 1. For post hoc comparisons, Games and Howell's test for unequal variance and sample size was used for the variables 'number of children', 'religion in child-rearing (whole sample)' and 'religion in child-rearing (if religious)'. For the other variables LSD post hoc tests were used. The groups of mothers were similar in education level, but were different regarding family income. Turkish mothers had the lowest income and Dutch mothers had the highest income. Concerning the age of mothers, Antillean minority mothers were the youngest and Turkish mothers were the oldest. Antillean minority mothers had the lowest number of children, whereas Moroccan minority mothers had the highest number of children. Among religious mothers, Dutch, Surinamese minority, Antillean minority, and Turkish mothers found religion less important in child-rearing than Turkish minority mothers. In addition, Surinamese minority and Turkish mothers found it less important than Moroccan minority mothers. If non-religious mothers were included in analyses as well, Surinamese minority mothers found religion least important and Turkish minority mothers found religion most important in child-rearing.

Differences between professionals in background characteristics were tested with ANOVAs and are shown in Table 1. For post hoc comparisons Games and Howell's test for unequal variance and sample size was used for the variables 'education level', 'religion in child-rearing (whole sample)', and 'religion in child-rearing (if religious)'. For the other variables LSD post hoc tests were used. Professionals differed in mean education level. Turkish professionals had the highest education level and Moroccan minority professionals had the lowest education level. The groups were similar in age and average number of children. Among religious professionals, Turkish professionals found religion less important in child-rearing than Turkish minority, Moroccan minority, Surinamese minority, and Antillean minority professionals. If non-religious professionals were included in analyses as well, Turkish professionals found religion least important and Antillean minority professionals found religion most important in child-rearing.

Sensitivity beliefs

ANOVAs were conducted to test the extent to which mothers with different cultural backgrounds agreed with the criterion sort of the ideal mother. The results are shown in Figure 1. For post hoc comparisons Games and Howell's test for unequal variance and sample size was used for mothers and LSD post hoc tests were used for professionals. For the comparison of all mothers with all professionals LSD post hoc tests were used. The average

sensitivity belief scores of mothers in all ethnic groups were very high (.70-.79), indicating strong convergence between their views regarding the ideal mother and expert views about sensitive parenting. Some group differences were found, $F(5,144) = 4.04, p < .01, \eta_p = .12$. The views of Dutch, Turkish minority, Moroccan minority, Antillean minority and Turkish mothers were significantly less similar to the MBQS criterion sort than those of Surinamese minority mothers (all $p < .05$).

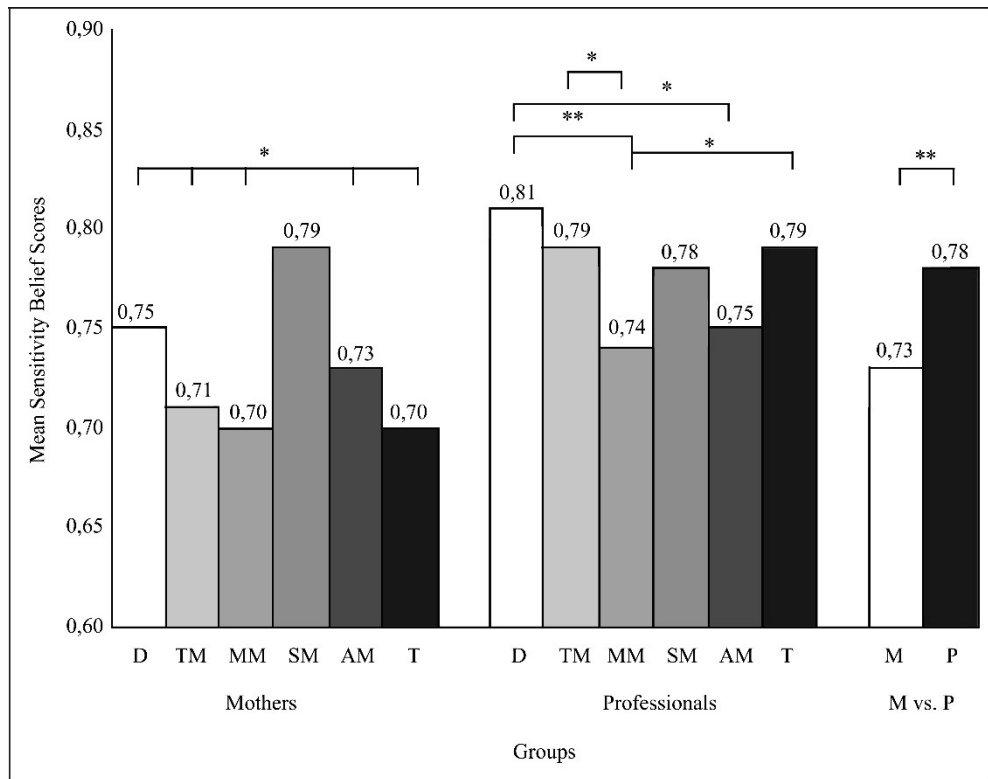


Figure 1. Differences in sensitivity belief scores between Dutch (D), Turkish minority (TM), Moroccan minority (MM), Surinamese minority (SM), Antillean minority (AM), and Turkish (T) mothers (M) and professionals (P) separately, and between all mothers versus all professionals.

Again ANOVAs were conducted to test the extent to which professionals with different cultural backgrounds agreed with the criterion sort of the ideal mother. These results are also shown in Figure 1. The average sensitivity belief scores in all ethnic groups were very high (.74-.81). In the group of professionals some differences were found as well, $F(5,92) = 2.36, p < .05, \eta_p = .11$. The views of Dutch professionals were significantly more similar to the MBQS criterion sort than those of Moroccan minority ($p < .01$) and Antillean minority professionals ($p < .05$). Besides, the views of Turkish and Turkish minority

professionals were significantly more similar to the MBQS criterion sort than those of Moroccan minority professionals (all $p < .05$).

A comparison of the average sensitivity belief score of all mothers with the average of all professionals, also presented in Figure 1, showed that the mean sensitivity belief score of professionals (.78) was significantly higher than the mean sensitivity belief score of mothers (.73), $F(1,246) = 31.31$, $p < .01$, $\eta_p = .11$. In addition, the same pattern was found for all comparisons between professionals and mothers with the same ethnic background.

Background variables and views of the ideal mother

Because differences in sensitivity belief scores of different cultural groups of mothers and professionals were found, bivariate correlations between background variables and sensitivity belief scores were calculated (Table 2). For mothers, educational level, family income, number of children, and religion in child-rearing (whole sample) were significantly correlated with sensitivity belief scores. Higher educational levels, higher income, fewer children, and lower perceived importance of religion in child-rearing (including non-religious participants) were related to higher sensitivity belief scores. Maternal age and religion in child-rearing (in the subgroup of religious participants) were not associated with maternal sensitivity belief scores. In professionals, higher educated participants had higher sensitivity belief scores.

Table 2. Correlations between Sensitivity Belief Score and Background Variables for Mothers^a (below diagonal) and Professionals^b (above diagonal)

	1.	2.	3.	4.	5.	6.	7.
1. Sensitivity belief score	-	.24*	-	.02	.08	-.11	-.11
2. Educational level	.48**	-	-	-.10	-.18	-.19	-.24*
3. Family income	.43**	.55**	-	-	-	-	-
4. Age	.11	.24**	.30**	-	.54**	-.09	-.01
5. Number of children	-.19*	-.15	.08	.27**	-	-.01	.08
6. Religion in child-rearing (whole sample)	-.18*	-.18*	-.27**	-.14	.16	-	-
7. Religion in child-rearing (if religious)	-.13	-.16	-.15	-.21*	.25**	-	-

^a Range of n mothers: 134 - 150.

^b n professionals: 98.

^c Range of n mothers: 108 - 116, n professionals: 81.

* $p < .05$. ** $p < .01$.

A one-way between-groups ANCOVA was conducted to explore the differences between the ethnic groups of mothers while statistically controlling for immigration status (i.e., not migrated, first-generation immigrant, or second-generation immigrant) and the variables that were significantly correlated with the sensitivity belief scores in mothers, namely education, income, number of children, and religion in child-rearing (whole sample).

After controlling for these variables, the group differences in sensitivity belief scores of mothers disappeared, $F(5, 127) = 1.33$, $p = .26$, $\eta_p = .05$. The remaining significant predictors were educational level ($F(1, 127) = 7.07$, $p < .01$, $\eta_p = .05$), family income ($F(1, 127) = 5.65$, $p < .05$, $\eta_p = .04$) and number of children ($F(1, 127) = 4.64$, $p < .05$, $\eta_p = .04$).

A second one-way between-groups ANCOVA was conducted to explore the differences between ethnic groups of professionals while statistically controlling for educational level, which was significantly correlated with sensitivity belief scores in professionals, and immigration status. When controlled for these variables, the group differences in sensitivity belief scores of professionals disappeared, $F(5, 91) = 1.38$, $p = .24$, $\eta_p = .07$. Education ($F(1, 91) = 2.76$, $p = .10$, $\eta_p = .03$), and immigration status ($F(1, 91) = .38$, $p = .54$, $\eta_p < .00$) did not remain significant as predictors.

Views of the ideal sensitive mother within and across groups

To investigate differences and similarities in sensitivity beliefs of mothers and professionals, correlations were computed between groups of mothers and professionals, both within and across ethnic groups. The correlations were converted into Fisher's z, averaged within and across samples and then converted back to correlations (see Posada et al., 1995). The averages and ranges of the correlations between MBQS profiles for mothers from different ethnic groups revealed high average agreement within groups (.67 to .82) and between groups (.68 to .80). The averages and ranges of the correlations between MBQS profiles for professionals from different ethnic groups also revealed high average agreement within groups (.75 to .82) and between groups (.70 to .81).

Table 3. Mean Correlations among Mother's and Professional's 90-items Q-sort Descriptions of the Ideal Mother Both Within and Across Groups

Professionals	Mothers					
	Dutch	Turkish minority	Moroccan minority	Surinamese minority	Antillean minority	Turkish
Dutch	.80 (.62-.93)	.76 (.55-.91)	.76 (.34-.87)	.81 (.65-.91)	.77 (.60-.90)	.72 (.35-.88)
Turkish minority	.79 (.65-.90)	.75 (.57-.86)	.75 (.36-.89)	.80 (.68-.92)	.76 (.54-.88)	.73 (.35-.89)
Moroccan minority	.76 (.55-.80)	.74 (.53-.85)	.74 (.28-.87)	.78 (.63-.89)	.75 (.57-.84)	.69 (.26-.86)
Surinamese minority	.78 (.64-.89)	.75 (.57-.87)	.75 (.27-.88)	.80 (.70-.89)	.76 (.59-.85)	.64 (.36-.83)
Antillean minority	.78 (.57-.90)	.74 (.43-.89)	.74 (.25-.87)	.79 (.61-.88)	.76 (.60-.85)	.64 (.34-.83)
Turkish	.73 (.40-.88)	.69 (.36-.83)	.69 (.24-.86)	.74 (.46-.87)	.70 (.41-.86)	.68 (.19-.88)

Table 3 shows the averages and ranges of the correlations between MBQS profiles for mothers and professionals from different ethnic groups and reveals high average agreement between groups (.62 to .80). In all of these analyses, the lower ends of the ranges of correlations between groups were lower than those found within groups, but the higher ends of the ranges of correlations were very similar within and between groups. Table 3 also shows high average agreement between Dutch professionals and mothers with different cultural backgrounds in the Netherlands (.76 to .81). It should be noted that the ranges in agreement between those groups are also comparable, i.e., the range of agreement between Dutch professionals and Dutch mothers was similar to the agreement range between Dutch professionals and ethnic minority mothers. The range in agreement between Moroccan minority mothers and Dutch professionals (.34-.87) is the largest, which is due to one Moroccan minority participant with a lower sensitivity belief score (.36) in comparison to the other Moroccan minority participants. We also conducted analyses on item level differences between groups of mothers and professionals, however, none of the differences were significant after Bonferonni correction.

Discussion

Views about the ideal sensitive mother were highly similar across cultural groups of mothers and professionals in the Netherlands and Turkey. Although some differences were found, the sensitivity beliefs of all groups converged highly with the views of experts. Across different cultural groups, mothers' and professionals' views on sensitivity were consistent with behaviors that are considered indicative of sensitivity by experts. This is in line with the study by Posada and colleagues (1995) in which mothers' descriptions of the ideal child in different sociocultural groups and professionals' descriptions of the hypothetical securely attached child were consistent with behavioral patterns that are considered as indicative of attachment security by experts. In addition, high agreement within and across groups of mothers and professionals was found. Of particular interest is the agreement between Dutch professionals and ethnic minority mothers, because this mismatch in cultural background is commonly encountered in youth care settings in the Netherlands and other multicultural societies. Our data show that there is a cognitive match between mothers and professionals with different cultural backgrounds regarding the importance of sensitivity related behaviors in child-rearing. Given that studies have shown the importance of the cognitive match instead of the ethnic match in forming therapeutic alliance (Knipscheer & Kleber, 2004), our findings suggest that parenting intervention and prevention programs focused on sensitivity would be applicable in cross-cultural therapeutic settings. However, it remains important to adapt the delivery of intervention and prevention programs for different SES groups.

There are some examples of early childhood parenting interventions that have been successfully applied to different ethnic groups. For instance, a recent study on the

effectiveness of the Video-feedback Intervention to promote Positive Parenting and Sensitive Discipline (VIPP-SD) adjusted for Turkish minorities in the Netherlands, VIPP-Turkish Minorities (VIPP-TM), showed an increase in sensitive parenting of second-generation Turkish mothers in the Netherlands (Yagmur, Mesman, Malda, Bakermans-Kranenburg, & Ekmekci, 2014). Minor adaptations in the VIPP-SD program were made, such as the use of certain play materials and having interveners with the same cultural background and language skills in Dutch and Turkish, whereas the core aspects of the program were not adapted. The Incredible Years Program (Reid, Webster-Stratton, & Beauchaine, 2001) that was originally developed for a majority group and includes a focus on sensitivity, was found to be effective in increasing positive parenting across different ethnic groups. The few studies with parenting interventions in ethnically diverse families showed that not only the underlying principles but also the more specific content of such interventions are generally applicable across different cultural groups (Reid et al., 2002), although some procedural or methodological aspects of these programs may require cultural adjustment, such as using bilingual assistants and making more use of role play (Bjørknes & Manger, 2013; Yagmur et al., 2014). The current study provides a contribution to the literature on cross-cultural similarities in sensitivity beliefs, but because sensitivity is a core construct in child-rearing prevention and intervention programs aimed at families with young children, more studies are needed to replicate our findings to find out whether this construct is indeed valued and operationalized similarly in different cultural groups.

The Turkish, Moroccan, Surinamese and Antillean ethnic minority groups in the Netherlands are considered to have a more collectivistic cultural background, compared to the individualistic cultural background of the Dutch ethnic majority group. A recent report about minorities in the Netherlands (SCP, 2012), showed that being young, being a member of the second-generation, and having a higher education level are related to more contact with the native population. This makes it plausible that the minorities in our study could have adopted some values from the Dutch society, whereby their sensitivity belief scores highly converge with each other and with the Dutch mothers and professionals (Emmen et al., 2012). However, Turkish mothers and professionals from Turkey were also included in the present study and their sensitivity belief scores also converged highly with those of all groups of mothers and professionals, which suggests universality of the sensitivity construct.

In the current study educational level, income, and number of children of mothers were significant predictors of maternal beliefs about sensitivity, indicating that demographic factors, and especially SES, play an important role in beliefs about maternal sensitivity. These factors could play a role in the success of parenting interventions. The finding that SES is negatively related to convergence of maternal and expert beliefs about sensitivity may reflect the Family Stress Model (Conger & Donellan, 2007), in that higher stress levels due to economic pressures are related to a decreased ability to respond sensitively to children, and as a result sensitivity could be seen as less ideal (i.e., less important). Given the high convergence between SES groups on sensitivity beliefs, psycho-education aimed at

enhancing sensitivity has the potential to effectively support mothers across SES groups.

The finding that a higher number of children relates to lower convergence between maternal and expert beliefs about sensitivity may be similarly explained. Having more children can cause more stress and less time to invest in each individual child, which can result in less sensitivity-orientated parenting beliefs. Among professionals educational level did not predict sensitivity beliefs, which is due to the fact that nearly all professionals were highly educated. The influence of SES on actual parental sensitivity has been documented in several studies (Mesman et al., 2012), and apparently also applies to parental beliefs about sensitivity.

Some limitations of the study need to be noted. A convenience sample was used and the sample size was small, which may limit the representativeness of the target population. Comparison of beliefs of mothers and professionals sharing the same ethnic background but living in different countries was only made for the Turkish. To assess whether the views of mothers and professionals living in host societies are just as similar to the views of mothers and professionals living in their country of origin, such a comparison needs to be made for each ethnic group. In addition, participating mothers were not selected for their need for professional assistance or support in child-rearing. Parental views of sensitivity may be more distorted in distressed families than in the current sample. Future research is needed to make a distinction between dyads in need of support and dyads who are not to find out whether our results can be generalized to distressed mother-child dyads in need of support. Moreover, there is a lack of studies assessing both sensitivity behaviors and sensitivity beliefs together, whereas this combination could provide important insights into the translating of beliefs into practice, and thus warrants future research attention. Finally, we only focused on mothers' and female professionals' views of the ideal mother. Future research should include fathers and male professionals as well.

The current study contributes to the growing evidence that sensitivity is a cross-culturally applicable concept in early childhood parenting. In our study no evidence is found for differences in sensitivity beliefs between ethnic groups of mothers and professionals within a country or between countries. We found a cognitive match regarding the importance of sensitivity as reflected in the high convergence between mothers and professionals with different cultural backgrounds. This match is of major importance for scientists and professionals working with minority families. Our findings suggest that early childhood parenting interventions focused on enhancing sensitivity could be successfully applied in programs for minority families.

Chapter 3

The discrepancy between parenting beliefs and behaviors of ethnic majority and ethnic minority mothers

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Abstract

The aim of this study was to test the relation between sensitivity beliefs and sensitive behaviors in Dutch ethnic majority and Turkish ethnic minority mothers. Sixty mothers, 30 in the Dutch and 30 in the Turkish group, with a child between the ages of 2 and 5 years participated. The mean age of the children was 2.83 ($SD = 0.99$) years in the Dutch group and 3.47 ($SD = 0.73$) years in the Turkish group. Sensitivity belief scores were derived by correlating the Maternal Behavior Q-Sort (Pederson, Moran, & Bento, 1999), the expert-derived profile of the highly sensitive mother, with mothers beliefs about the ideal mother. For observed sensitive behaviors mothers and children were observed in a free play situation with the Emotional Availability Scales (Biringen, 2008). In both groups, sensitivity beliefs were not related to sensitive behaviors. Beliefs of both Dutch and Turkish mothers about the ideal mother converged strongly with the experts' views of the highly sensitive mother. Dutch mothers scored higher on sensitivity beliefs and sensitive behaviors than Turkish mothers. Research examining both sensitivity beliefs and behaviors could inform interventions on how to narrow the gap between the two.

Keywords: maternal sensitivity, beliefs, behavior, ethnic minority, socioeconomic status

Introduction

Parenting beliefs and behaviors are generally studied separately (Barnett, Shanahan, Deng, Haskett, & Cox, 2010), but there is some evidence that parental beliefs and behaviors are related in meaningful ways and converge (Kiang, Moreno, & Robinson, 2004). Sensitive parenting is studied widely across different cultures as an important predictor of positive child development (e.g., Bakermans-Kranenburg, Van IJzendoorn, & Juffer, 2003; Bernier, Carlson, & Whipple, 2010; Eisenberg et al., 2001; Mesman, Van IJzendoorn, & Bakermans-Kranenburg, 2012). Agreement has been found on the importance of sensitive parenting in child-rearing across mothers from different cultural and socioeconomic groups, including Turkish second-generation, Moroccan second-generation and Dutch mothers in the Netherlands with low, middle and high education levels (Emmen, Malda, Mesman, Ekmekci, & Van IJzendoorn, 2012). In addition, the same study showed that family income is a predictor of sensitivity beliefs, in that lower family income predicted lower scores on sensitivity beliefs. When it comes to actual sensitive parenting, ethnic minority mothers have been found to show lower levels of sensitivity than majority mothers (Mesman et al., 2012). To our knowledge no studies have yet examined maternal beliefs about sensitivity in different ethnic groups in relation to their actual sensitive behavior towards their children. The goal of the current study is to examine the relation between sensitivity beliefs and sensitive behaviors in Dutch ethnic majority and Turkish ethnic minority mothers. In addition, we test whether sensitivity beliefs of mothers with different cultural backgrounds converge and whether the groups differ in their sensitive behaviors toward their child.

Attitudes refer to the psychological tendency to evaluate a certain entity positively or negatively (Eagly & Chaiken, 2007), and include specific beliefs about a certain topic (Olson & Zanna, 1993). Parenting attitudes have been shown to be related to parenting behaviors, not controlled for educational level, albeit not always strongly (e.g., Coplan, Hastings, Lagacé-Séguin, & Moulton, 2002; Kiang et al., 2004; Kochanska, Kuczynski, & Radke-Yarrow, 1989).

One of the parenting domains that is particularly important in early childhood is sensitive responsiveness, which refers to a parent's ability to perceive child signals, to interpret these signals correctly, and to respond to them promptly and appropriately (Ainsworth, Bell, & Stayton, 1974). Maternal sensitivity and related constructs such as nonintrusive parenting positively influence several aspects of child development such as, secure attachment (e.g., Bakermans-Kranenburg et al., 2003), self-regulation (e.g., Eisenberg et al., 2001), and cognitive competence (e.g., Bernier et al., 2010; Tamis-Lemonda, Bornstein, & Baumwell, 2001). A recent study on sensitivity beliefs of mothers with different cultural backgrounds in the Netherlands showed that mothers from different cultural backgrounds agree on the importance of sensitive parenting in child-rearing (Emmen et al., 2012). Another study showed that middle-class Anglo and Puerto Rican mothers both prefer

emotional intimacy with their children and equally value an emotionally supportive environment for their children (Harwood et al., 1999).

In contrast to the cross-cultural agreement on the importance of sensitive parenting, ethnic minority mothers generally seem to behave less sensitively when compared to majority mothers, and these differences generally diminish when controlled for socioeconomic status (SES; Mesman et al., 2012). The reason for this discrepancy is unclear because to date hardly any study includes both parental beliefs about sensitivity and observations of sensitivity in different ethnic groups, although a few studies compare attitudes about parenting in general with actual parenting behaviors. For instance, expectant mothers' negative maternal attitudes about parenting and child-rearing predicted lower sensitivity towards their children at the age of 12 to 15 months in an ethnically diverse sample (Kiang et al., 2004). For sensitivity specifically, one study describes intervention effects on maternal attitudes toward sensitivity and actual maternal sensitive behavior in a Western ethnic majority sample of mothers with children between 1 and 3 years old with high scores on externalizing problem behavior (Van Zeijl et al., 2006). It is interesting to note that the intervention resulted in more sensitive attitudes as well as more sensitive behaviors, but that no correlation between maternal attitudes and maternal behaviors was found. To our knowledge no studies have yet examined maternal beliefs about sensitivity in different ethnic groups in relation to their actual sensitive behavior towards their children.

Several studies have shown the important role of SES in beliefs and behaviors in the rearing of (pre-school aged) children (Bornstein, Hahn, Suwalsky, & Haynes, 2003; Mistry, Biesanz, Chien, Howes, & Benner, 2008; Tekin, 2008). Socioeconomic factors, including income and education, are also related to sensitivity beliefs and sensitive behaviors of minority families towards their children (Mesman et al., 2012). SES can be seen as a confounder in predicting beliefs and behaviors of culturally different mothers, because studies have shown an overrepresentation of ethnic minorities in lower socioeconomic classes, e.g. income and education level, in a lot of countries, including the Netherlands (Barnard & Turner, 2011; CBS, 2012). The Family Investment Model provides an explanation for the relation between SES with parenting beliefs and behaviors, in that parents with higher SES can invest more in financial, social, and human capital for their children (Conger & Donnellan, 2007), whereas this is more difficult for families with a lower SES because of their need to invest more in immediate family needs (e.g. Linver, Brooks-Gunn, & Kohen, 2002). It has been found that the investments parents make are related to positive child development (Conger, Conger, & Martin, 2010). Lower educated mothers generally value close family ties and children being compliant more so than mothers with a higher educational level. In addition, higher-educated mothers valued autonomy, self-confidence and academic success (Phalet & Schonpflug, 2001). In a recent study on Turkish second-generation mothers in the Netherlands maternal age and education seemed to be more important in parenting practices compared to ethnicity (Yaman, Mesman, Van IJzendoorn, Bakermans-Kranenburg, & Linting, 2010).

The Family Stress Model states that socioeconomic strains such as lower incomes cause stress and stress causes lower levels of sensitive parenting (Conger & Donnellan, 2007), which may be another explanation of the lower levels of sensitive parenting in minority families (Mesman et al., 2012). In addition, stress seems to influence parenting beliefs too (Respler-Herman, Mowder, Yasik, & Shamah, 2012). Parents who reported less parenting stress reported more positive parenting perceptions and parents who reported more stress reported less positive parenting perceptions. Thus, given the overrepresentation of low SES in ethnic minorities, such processes may (partly) explain findings that these groups could show lower sensitivity and less optimal beliefs about sensitive parenting. In addition, SES could moderate the relation between beliefs and behaviors. Beliefs about sensitive parenting may be related differently to actual sensitive parenting depending on socioeconomic level, because SES-related stressors may hamper the consistent translation of beliefs into actual parenting practice.

In the current study we focus on Dutch and Turkish second-generation mothers of young children in the Netherlands. The Turkish group represents the largest ethnic minority group in the Netherlands (CBS, 2012). The Turkish immigrants first came to the Netherlands as invited guest workers in the period 1960-1970. Their intention was to make a living and return to their countries of origin, but many stayed in the Netherlands. The Netherlands is considered to have a more individualistic culture (Hofstede, 2001), whereas Turkey is considered to have a more collectivistic culture (Hofstede, Hofstede, & Minkov, 2010). In collectivistic cultures parenting goals such as obedience are considered more desirable than in individualistic cultures (Harwood, Schoelmerich, Ventura-Cook, Schulze, & Wilson, 1996; Phalet & Schönplflug, 2001; Willemsen & Van de Vijver, 1997). Turkish immigrant parents in the Netherlands have been found to show obedience-oriented parenting and controlling behaviors in their parenting practices (Nijsten, 2006). Higher-educated Turkish parents valued conformity less and autonomy more (Nijsten, Oosterwegel, & Volleberg, 2006; Phalet & Schonplflug, 2001). In Germany, it was found that, after controlling for education, Turkish mothers valued their children's respectful and well-mannered behavior and close family ties together with valuing autonomy whereas German mothers valued independence, social skills and the ability to be able to control negative impulses (Durgel, Leyendecker, Yagmurlu, & Harwood, 2009). In another study on Turkish immigrant and Dutch mothers in the Netherlands and Turkish mothers in Turkey, it was found that Turkish immigrant mothers adhered to values in between those of Dutch mothers in the Netherlands and Turkish mothers in Turkey with regard to child-centered behaviors (Durgel, Van de Vijver, & Yagmurlu, 2013). The predictive value of education was again shown. The second-generation Turkish mothers have been living in the Netherlands for (almost) all of their lives, so they may have adopted some of the Dutch attitudes and behaviors through the process of acculturation (Yagmurlu & Sanson, 2009). For instance, in a study on parenting practices of Turkish immigrant mothers in the Netherlands, the mothers who felt emotionally connected to the Dutch culture showed more use of authoritative control. In the same study mothers

who spoke the Turkish language more frequently showed more sensitive behaviors. These findings suggest that cultural maintenance, in the form of acculturation, and ethnic language use, could both be advantageous in the parenting context (Yaman et al., 2010).

The goal of the current study is to test whether the relation between the perceived importance of sensitivity in child-rearing and actual sensitive behaviors is similar across Dutch and Turkish mothers. In addition, we test whether sensitivity beliefs of mothers with different cultural backgrounds converge and whether the groups differ in their sensitive behaviors toward their child. Three main hypotheses were tested. First, we expected a significant positive association between mothers' sensitivity beliefs and observed sensitivity and non-intrusiveness in both groups. Second, we expected similar scores on sensitivity beliefs and higher scores on sensitivity behaviors in the Dutch group versus the Turkish group. Third, we expected that lower SES would be related to less optimal beliefs about sensitivity and lower levels of observed sensitivity. In addition, we test a potential moderation effect of SES on the relation between beliefs and behaviors.

Method

Sample and Procedure

The sample consisted of 30 Turkish mothers and 30 Dutch mothers in the Netherlands. The Turkish and Dutch groups of mothers differed significantly regarding mean age of the mothers and the target children (Table 1). The mean age of mothers in the Turkish group was 31.30 ($SD = 3.53$) years and 35.60 ($SD = 4.63$) years in the Dutch group. The age range of the children was 2 to 5 years. In the Turkish group the mean age of the target child was 3.47 ($SD = 0.73$) years and in the Dutch group it was 2.83 ($SD = 0.99$) years. The Turkish sample was recruited in the context of a parenting intervention RCT study (Yagmur, Mesman, Malda, Bakermans-Kranenburg, & Ekmekci, 2014), based on their children's high levels of externalizing problems as measured by the Child Behavior Checklist (CBCL/1½-5, Achenbach & Rescorla, 2000). At least three months after completion of the intervention study, we informed all 35 mothers in the control group about the present study and asked them to participate. Of these mothers, 30 agreed and completed the assessments. All mothers were born in the Netherlands (with at least one of their parents born in Turkey). The Dutch sample was recruited in the context of a large longitudinal study on mothers' and fathers' parenting in relation to young siblings' behavioral development (Hallers-Haalboom et al., 2014). Of the 32 Dutch mothers who were approached, 30 agreed to participate. In the whole group mothers had one to three children, with an average of two children ($SD = 0.52$) and their average age was 33.45 years ($SD = 4.57$, range = 23-48). Descriptive statistics of the main variables of the Dutch and Turkish-Dutch group are presented in Table 1. The Dutch mothers for the current study were selected to resemble the Turkish sample as closely as possible with regard to maternal educational level, gender of the focus child, and the level of

Table 1. Means (Standard Deviations) and Ethnic Group Differences for Mothers

	Dutch			Turkish-Dutch			<i>t</i>	Eta squared
	<i>N</i>	Range	<i>M (SD)</i>	<i>N</i>	Range	<i>M (SD)</i>		
Family income	30	2-7	6.10 (1.27)	28	3-7	5.39 (1.24)	-2.06*	0.07
Educational level	30	2-5	3.40 (0.81)	30	1-5	3.23 (0.94)	-0.74	-
Age target child EA Scales	30	2-4	2.83 (0.99)	30	2-5	3.47 (0.73)	2.83**	0.12
Age mother	30	30-48	35.60 (4.53)	30	23-39	31.30 (3.53)	-4.10**	0.22
Number of children	30	2-3	2.07 (0.25)	30	1-3	1.77 (0.63)	-2.43*	0.09
Externalizing problem behavior	30	3-46	20.65 (11.22)	30	4-36	19.77 (9.04)	-0.34	-
Sensitivity beliefs	30	0.61-0.82	0.74 (0.06)	30	0.57-0.83	0.71 (0.07)	-2.27*	0.07
Observed maternal sensitivity	30	18-29	25.10 (2.50)	30	12-29	22.23 (3.77)	-3.48**	0.17
Observed maternal non-intrusiveness	30	13-26	21.10 (3.59)	30	10-24	18.57 (3.81)	-2.65*	0.11

* $p < .05$, ** $p < .01$.

this child's externalizing problem behavior as measured by the CBCL/1½-5 (Achenbach & Rescorla, 2000).

All Turkish and Dutch mothers gave written consent and were visited at home by a trained undergraduate or graduate student. The home visits took approximately one and a half hour and were conducted in Dutch, unless the mother indicated to prefer Turkish. No measures used in the original studies from which the samples were derived could have influenced participants' views of the ideal mother.

Measures

Sensitivity beliefs. To assess maternal beliefs about sensitivity the Maternal Behavior Q-Sort (MBQS; Pederson, Moran, & Bento, 1999) was used. The MBQS consists of 90 cards with statements about maternal behaviors that mothers and professionals sorted into 9 stacks from '*least descriptive*' (1) to '*most descriptive*' (9) of the ideal mother. Because the original items were designed to be evaluated by professionals rather than mothers, the behavioral descriptions were simplified for the present study to make them more understandable for (low educated and immigrant) mothers and to extend the items beyond infancy (B for baby in the original items). For example, the item "Provides B with little opportunity to contribute to the interaction" was simplified into "Gives her child little opportunity to play along or to respond". The participants were first asked to sort the cards into 3 stacks: 'do not fit the ideal mother at all', 'do not fit nor do fit the ideal mother' and 'fit the ideal mother really well'. The participants were explicitly told that there are no correct or wrong answers and that it is not about their own parenting behavior, but about what the ideal mother should or should not do. Any question participants had concerning the meaning of an item was answered according to the item explanations in the protocol. When the participants distributed the cards across the three stacks, they were asked to sort each stack into 3 smaller stacks. After the participants distributed all cards across 9 stacks, they were asked to evenly distribute the cards across the stacks until each stack consisted of 10 cards (as described in Emmen et al., 2012). Sensitivity belief scores were derived by correlating the resulting profiles with the criterion sort provided by the authors of the MBQS (Pederson, et al., 1999). Z-scores were computed to detect outliers (z -scores lower than -3.29 or higher than 3.29) within ethnic groups. One outlying score was found within the Turkish group on sensitivity belief scores and was winsorized for use in the analyses (Tabachnick & Fidell, 2001).

Maternal sensitivity and non-intrusiveness. Maternal sensitivity and non-intrusiveness were measured in a 10-minute unstructured free-play episode with toys brought by the assistant. During this episode, mother and child were free to play with all toys, and mothers were instructed to play with their child the way they would normally do.

Mother-child interactions were coded using the Sensitivity and Non-intrusiveness scales of the 4th Edition of the Emotional Availability Scales (EA Scales; Biringen, 2008). Each scale consists of seven subscales, two with scores ranging from 1-7 and five with scores

ranging from 1-3 (total potential score range for each scale 7-29) (Biringen, 2008). *Sensitivity* refers to appropriate responding to the child's signals combined with positive affect. *Non-intrusiveness* refers to following the child's lead and waiting for optimal breaks to enter interaction without interfering with the child's activities. During the training of a team of (under-)graduate coders provided by the third author, who completed the online EA Scales-training and who is an experienced coder of parent-child interactions, three types of alterations were made to prevent persistent interpretation problems. These alterations consisted of removing subjective criteria, adjustment of the criteria for some scores on subscales to make them more linear, and improvement of the independence of the separate dimensions by removing overlapping criteria. In addition, one subscale was removed from the non-intrusiveness scale because it referred to child behavior rather than parent behavior (leading to a potential score range of 6-26).

The videos of the Dutch mother and child dyads were coded by seven Dutch coders. Inter-coder reliability on 60 cases from the total sample ranged from .73 to .92, with an average of .81 (intraclass correlation, single rater, absolute agreement). The videos of the Turkish mother and child dyads were coded by two coders from the Turkish group and one Dutch coder. The Dutch coder was assigned to mother-child dyads who communicated in Dutch, and also coded videos of dyads speaking Turkish that had been subtitled in Dutch (by bilingual research assistants). Inter-coder reliability on 15 cases ranged from .73 to .96, with an average of .83 (intraclass correlation, single rater, absolute agreement).

Educational level and family income. Educational level was measured on a 5-point scale: *primary school* (1), *vocational school* (2), *secondary school/middle vocational education* (3), *high vocational education* (4) and *university or higher* (5). Annual gross family income was measured on a 7-point scale ranging from (1) 'no income' to (7) '50.000 euro or more'.

Results

T-tests were conducted to test for significant differences between Dutch and Turkish mothers in socioeconomic background. The Dutch ($M = 3.40$, $SD = 0.81$) and Turkish ($M = 3.23$, $SD = 0.94$) mothers were similar in educational level, $t(58) = -.74$, $p > .05$. Compared to the Dutch group ($M = 6.10$, $SD = 1.27$) the Turkish group ($M = 5.39$, $SD = 1.34$) had a lower family income, $t(58) = -2.06$, $p < .05$, $\eta_p = .07$.

As shown in Table 1, there was strong convergence between mothers' views regarding the ideal mother and expert views about sensitive parenting in both the Dutch mothers, .74 ($SD = 0.06$), and the Turkish mothers, .71 ($SD = 0.07$), indicating that both groups strongly value sensitive parenting. A one-way between-groups ANCOVA was conducted to compare views about sensitive parenting of Dutch and Turkish mothers while statistically controlling for the age of the target child. There was a significant difference

between the Dutch and Turkish group on sensitivity belief scores $F(1, 57) = 4.84, p < .05, \eta_p = .08$). The views of Turkish mothers were significantly less similar to the MBQS criterion sort than those of Dutch mothers. The same analyses were conducted for observed sensitivity and non-intrusiveness. Dutch mothers scored significantly higher on observed sensitivity than Turkish mothers controlled for the age of the child, $F(1, 57) = 10.47, p < .05, \eta_p = .16$). Dutch mothers also scored significantly higher on observed non-intrusiveness than Turkish mothers controlled for the age of the child, $F(1, 57) = 6.00, p < .05, \eta_p = .10$).

We computed bivariate correlations between (socioeconomic) background variables and sensitivity beliefs, observed maternal sensitivity and observed maternal non-intrusiveness (Table 2). No significant correlations between (socioeconomic) background variables and sensitivity belief scores, observed maternal sensitivity and observed maternal non-intrusiveness were found. Correlations were also examined for the Dutch and Turkish groups separately. Again, no significant correlations were found. Thus, we did not further test a mediation effect of sensitivity beliefs in the relation between SES and sensitive behaviors.

Table 2. Correlations between Observed Parenting Variables, Parenting Beliefs Variables and Background Variables

	1.	2.	3.	4.	5.	6.
1. Observed sensitivity	-					
2. Observed non-intrusiveness	.67**	-				
3. Sensitivity belief score	.19	.12	-			
4. Income	.13	.17	.13	-		
5. Education	.12	.02	.22	.41**	-	
6. Age of the child	.17	.14	.06	.18	.11	-

Range of n : 58 - 60.

* $p < .05$. ** $p < .01$.

Bivariate correlations were computed to test the relation between sensitivity beliefs and sensitive behaviors. Post-hoc power analyses showed that the power of the study was .78 to find a medium correlation of .30, however, bivariate correlations between maternal sensitivity beliefs and observed maternal sensitivity and non-intrusiveness were not significant for the total sample (Table 2). This was also the case for correlations between beliefs and behaviors within the Dutch group, for observed sensitivity and for observed non-intrusiveness, and within the Turkish group, for observed sensitivity and for observed non-intrusiveness (Table 3).

To test a potential moderator effect of socioeconomic factors on the relation between beliefs and behaviors, we conducted hierarchical multiple regression analysis with maternal education, family income, and sensitivity beliefs as predictors of observed sensitivity and observed non-intrusiveness, including two-way interactions between beliefs and maternal education and family income. In addition we controlled for the age of the child in this analysis. All variables were centered to reduce multicollinearity, to simplify the interpretation

of the main effects, and to compute the interaction terms. In the first step, age of the child was entered, in the second step maternal education and family income were entered, in the third step sensitivity beliefs were included, and in the fourth step the two interaction terms were added. There was no main effect of the age of the child on observed sensitivity, $\beta = .17$, $p = .21$, or observed non-intrusiveness, $\beta = .14$, $p = .29$. Corrected for the age of the child, there was no main effect of family income on observed sensitivity, $\beta = .08$, $p = .60$, and observed non-intrusiveness, $\beta = .17$, $p = .25$. Corrected for family income, there was no effect of maternal education on observed sensitivity, $\beta = .07$, $p = .62$, or on observed non-intrusiveness, $\beta = -.07$, $p = .65$. Sensitivity beliefs did not add to the prediction of observed sensitivity, $\beta = .16$, $p = .24$, or observed non-intrusiveness, $\beta = .11$, $p = .42$. The interaction terms between beliefs and maternal education and between beliefs and family income also did not add to the prediction of observed sensitivity, respectively, $\beta = -.06$, $p = .75$, $\beta = -.10$, $p = .56$, or observed non-intrusiveness, respectively, $\beta = -.09$, $p = .63$, $\beta = -.04$, $p = .80$.

Table 3. *Correlations between Observed Parenting Variables, Parenting Beliefs Variables and Background Variables for Dutch majority (above diagonal) and Turkish minority (below diagonal) mothers*

	1.	2.	3.	4.	5.	6.
1. Observed sensitivity	-	.52**	.05	-.07	-.09	.11
2. Observed non-intrusiveness	.70**	-	-.05	.16	-.07	.01
3. Sensitivity belief score	.10	.10	-	-.28	.28	-.06
4. Income	.09	.02	.34	-	.26	.34
5. Education	.19	.03	.13	.51**	-	.39*
6. Age of the child	.09	.20	.08	-.24	-.36	-

N Dutch majority mothers: 30

Range of *n* Turkish minority mothers: 28 - 30.

* $p < .05$. ** $p < .01$.

Discussion

Sensitivity beliefs and sensitive parenting behaviors were unrelated for the total group and for both the Dutch and Turkish mothers. Dutch mothers had beliefs about the ideal mother that converged more with the expert-derived profile of the highly sensitive mother (i.e. MBQS), and showed higher levels of actual sensitive and nonintrusive behaviors in comparison with Turkish mothers. We did not find significant relations between SES and sensitivity beliefs and between SES and sensitive behaviors and therefore we did not test a mediation effect of sensitivity beliefs in the relation between SES and sensitive behaviors. The relation between sensitivity beliefs and sensitive behaviors was not moderated by SES.

Although earlier studies have shown a rather modest relation between attitudes and behaviors in parenting (Dagget, O'Brien, Zanolli, & Peyton, 2000; Kiang et al., 2004; Kochanska et al., 1989), a study focusing specifically on sensitivity showed no relation between attitudes and behaviors (Van Zeijl et al., 2006). In our study we also failed to find a

relation between sensitivity beliefs and sensitive behaviors for Dutch mothers or for Turkish mothers. It seems that the extent to which a mother values sensitivity in child-rearing does not necessarily translate into the extent to which she behaves sensitively. A possible reason for not finding a relation between sensitivity beliefs and behaviors could be that sensitivity is generally not an aspect of parenting that is consciously applied and is very difficult to self-monitor. Other studies on parenting beliefs and behaviors focused on more concrete behaviors that are part of a more explicit parenting repertoire, such as discipline practices (Celik, Halmatov, & Saricam, 2012; Coplan et al., 2002). When parents express the belief that specific discipline practices are important in parenting, it is reasonable to expect that they also put this belief in to practice, because it refers to a concrete and voluntary behavior. In contrast, sensitivity is far less concrete as it does not describe actual specific behaviors, but rather refers to parents noticing child signals and responding to these appropriately, in more abstract terms (e.g., MBQ item 20: “Responds well when her child is sad”). In addition, several aspects of sensitivity refer to intuitive behaviors, such as smiling back when a child smiles, or imitating infant vocalizations (e.g., Braungart-Rieker, Garwood, Powers, & Wang, 2001), rather than planned behaviors such as applying strict discipline techniques. Some parents may feel like they are generally appropriately responsive to their children, but this may not converge with the evaluation of their behaviors during free play by experts on sensitive parenting. Attachment representations refer to parents’ mental representations of their relationship with their own parents. Individuals with a dismissive attachment representation show the following behaviors: insisting verbally on lack of memory for childhood, derogating attachment, limited thinking about attachment-related experiences and emotions, reporting unrealistic or idealized representations that are not coherent with experience (Pianta, Egeland, & Adam, 1996). The lack of a relation between beliefs and behaviors could, according to the literature, be related to attachment representations of parents, as dismissive parents tend to have inflated views of their own (parenting) abilities (Pianta et al., 1996), which could lead to a discrepancy in beliefs and behaviors about parenting. Assessing attachment representations of parents together with their beliefs and behaviors in parenting could provide a more complete picture. Thus, the abstract nature of the sensitivity construct and the more intuitive nature of sensitive responding versus other aspects of parenting may be responsible for the lack of convergence between parental beliefs and behaviors regarding sensitivity.

Sensitivity beliefs of Dutch and Turkish mothers correlated highly with the criterion sort, which means that mothers’ views about ideal sensitivity converged with behavioral patterns that are considered indicative of sensitivity by the authors of the MBQS. Dutch and Turkish mothers scored high on sensitive behaviors too, indicating that they know how to react sensitively to child signals. Despite these general high scores on sensitivity beliefs and behaviors, Dutch mothers still scored higher on sensitivity beliefs, observed sensitivity, and observed non-intrusiveness than the Turkish mothers.

Contrary to findings in the current study, previous research has shown that SES

plays a role in beliefs and behaviors in child-rearing (e.g., Mistry et al., 2008; Tekin, 2008), and several studies have shown that differences in sensitivity or attachment security between majority and minority mothers diminish when controlling for SES (e.g., Chaudhuri, Easterbrooks, & Davis, 2009; Letourneau, Hungler, & Fisher, 2005; Van IJzendoorn, 1990). We did not find any direct nor moderation effects of family income and education. Although low family income is generally a stress factor, perhaps it only negatively affects family functioning when being below a certain threshold. The lowest family incomes in our sample were still in the middle income range and these families could therefore not be considered as poor. In addition, educational level of minority parents may be less indicative of their cognitive skills (and associated parenting abilities) than in majority families. Even when minorities achieve high scores on a standardized exam (e.g., CITO in the Netherlands), they have a higher chance of attaining low education levels compared to majorities with similarly high test scores (CBS, 2009). Similarly, in our study mothers in both groups were matched on education level, however, the income of Turkish families was still lower compared to the income of Dutch families. In addition, minority status could be related to different kinds of stressors, such as acculturation processes (Berry, 1997).

Several limitations of this study should be noted. First, it was not possible to fully match participants on SES. Since earlier studies showed effects of SES on sensitivity beliefs and behaviors, full matching may have provided a better test of group differences. The samples used in this study were not normative in that Turkish children were selected for an intervention study based on high scores on child externalizing problems. However, only mothers from the control group condition were included here to prevent interference from the intervention and the groups did not differ on externalizing problem behaviors of the children. It is also important to note that we compared two groups with different cultural backgrounds within one country, which limits interpretations about the role of culture as a broader construct on parenting beliefs and behaviors. However, the advantage of comparing two ethnic groups within one country is that they are preparing their children for the same society, which means that differences between the groups in sensitivity beliefs are less likely to be due to differences in the broader societal context. Furthermore, it is important to note that despite high scores of both groups on sensitivity beliefs and behaviors, the majority group still scored higher on sensitivity beliefs and behaviors compared to the ethnic minority group. Although distal SES-related stressors could be partly responsible for these findings (Conger & Donnellan, 2007; Mesman et al., 2012; Respler-Herman et al., 2012), more proximal stress processes may prove more informative in explaining ethnic differences in parenting beliefs and behaviors. These processes can include minority-specific stressors such as acculturation stress, language difficulties, and discrimination (Berry, 1997). The specific role of these different levels of stress on child-rearing should be investigated in future studies. The attachment representations of parents could also be included to control for its influence on parenting beliefs and behaviors and their interrelations (Pianta et al., 1996). Finally, the sample size was very small, which could account for not finding a significant relation

between beliefs and behaviors.

In conclusion, we did not find a relation between sensitivity beliefs and behaviors in the current study, as opposed to other studies showing meaningful relations between beliefs and behaviors for other parenting aspects. This may be due to the less concrete nature of sensitivity which makes it less easy for parents to consciously put their ideals about sensitivity behaviors into practice. Because of the particular importance of maternal sensitivity for child development, several interventions have been developed with the focus on enhancing maternal sensitivity, and have been successfully applied in various ethnic groups (e.g., Bjørknes & Manger, 2013; Reid, Webster-Stratton, Beauchaine, 2001). To help parents, it is important to know what they want to achieve by assessing their ideals, and to conduct observations to uncover actual sensitivity levels of parents, so that the gap between ideals and behaviors can be bridged by interventions.

Chapter 4

Sensitive parenting in Turkish minority mothers: The role of ethnic and religious socialization

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Abstract

The aim of this study was to examine self-reported ethnic identity, ethnic socialization, religious identity, religious socialization, and authoritarian parenting in relation to observed maternal sensitivity in Turkish minority families in the Netherlands. Seventy mothers with a child between the ages of 2 and 4 years with high scores on externalizing problems participated. Mothers and children were observed in a free play situation and a problem-solving task. These interactions were coded with the Emotional Availability Scales (Biringen, 2008). Mothers reported on their ethnic and religious identity, ethnic and religious socialization practices, and on their authoritarian parenting practices. Results showed that not religious socialization in general, but only the specific form of Islamic socialization was negatively related to observed maternal sensitivity. Islamic socialization reflects literal interpretations of religious content, which may relate to a more rigid approach to parenting that is not conducive to sensitivity. General religious socialization reflects symbolic interpretations of religious content, which apparently does not interfere with sensitive parenting. Maternal ethnic identity and ethnic socialization were not related to observed maternal sensitivity, which is consistent with findings that religion is more central to the identity of Turkish minorities in the Netherlands than ethnicity. Religious rather than ethnic socialization may therefore play a more salient role in everyday parenting, which may explain why it is more clearly linked to other aspects of parenting. Authoritarian parenting was not related to observed maternal sensitivity. The results show the importance of assessing specific aspects of ethnicity-related and religion-related variables to understand their relation with parenting quality in different developmental stages.

Keywords: maternal sensitivity, ethnic identity, ethnic socialization, religious identity, religious socialization

Introduction

Ethnic identity and ethnic socialization have been found to play an important role in family life (Hughes et al., 2006), especially in ethnic minority families for whom the need to be aware of and prepare for ethnic prejudice and discrimination is more salient (Neblett et al., 2008; Shelton et al., 2005). Parental ethnic identity and ethnic socialization have both been found to be positively associated with supportive parenting behaviors (Caldwell, Zimmerman, Bernat, Sellers, & Notaro, 2002; Hughes et al., 2006), but findings regarding the relation between religiosity and parenting quality are inconsistent. Some studies report a positive relation between religiosity and an authoritative parenting style (e.g., Gunnoe, Hetherington, & Reiss, 1999), whereas others show a positive relation between religiosity and corporal punishment or an authoritarian parenting style (e.g., Mahoney, Pargament, Tarakeshwar, & Swank, 2001; Socolar, Cabinum-Foeller, & Sinal, 2008). Further, studies on religiosity and parenting have generally focused on Christians, which precludes conclusions about other world religions (Acevedo, Ellison, & Yilmaz, 2013). In addition, research to date has mostly included adolescents, even though ethnic and religious socialization already occurs in early childhood (Bartkowski, Xu, & Levin, 2008; Hughes et al., 2006). The goal of the current study is to examine parental ethnic and religious identity as well as ethnic and religious socialization in relation to observed sensitive parenting in Muslim Turkish ethnic minority mothers with toddlers in the Netherlands.

Ethnicity refers to belonging to a social group with a common national or cultural tradition (*Oxford dictionaries*, 2014). Ethnic identity can be defined as a person's sense of belonging to an ethnic group and the part of one's thinking, perceptions, feelings, and behavior that is due to group membership (Rotheram & Phinney, 1986). Parents from the Turkish culture tend to expect more obedience from their children and show more authoritarian values and parenting compared to parents from individualistic cultures, such as the Netherlands (e.g., Durgel, Leyendecker, Yagmurlu, & Harwood, 2009; Pels, Nijsten, Oosterwegel, & Vollebergh, 2006). However, it should be noted that studies have found that there is great variance within cultures, for instance, Turkey, due to different socioeconomic backgrounds (Goregenli, 1997; Sunar & Fisek, 2005) and rural-urban settlement differences (Nacak, Yagmurlu, Durgel, & Van de Vijver, 2011). Strong ethnic identity may be related to authoritarian parenting practices in case of a collectivistic background. The intergenerational transmission of ethnic identity occurs through ethnic socialization, which refers to parental transmission of information, values, and perspectives regarding ethnicity to their children, and it has been found that immigrant families emphasize children's acquisition of, for instance, their native cultural values, beliefs, and practices (Hughes et al., 2006; Quintana & Vera, 1999). Ethnic socialization has been found to be positively related to maternal warmth (Caldwell et al., 2002), positive and involved parenting (Frabutt, Walker, & MacKinnon-Lewis, 2002), and academic involvement at home and at school (McKay, Atkins, Hawkins,

Brown, & Lynn, 2003; Smalls, 2009). The positive relation between ethnic socialization and maternal warmth may reflect a common underlying parenting goal which relates to enhancing children's self-esteem (Caldwell et al., 2002). For instance, in a study on child-rearing goals 2% of the parents indicated enhancing ethnic identity as an important child-rearing goal whereas, when asked explicitly, 89% indicated ethnic socialization as an important goal (Marshall, 1995).

Parents' religion is generally intertwined with their ethnic background (Tarakeshwar, Stanton, & Pargament, 2003), and also plays a role in parenting. Religious identity can be defined as the extent to which individuals feel connected to their religion and interpret religion as part of their identity. To our knowledge, there are no studies assessing religious identity of parents in relation to their quality of parenting. Religiosity can be defined as the extent to which individuals assign importance to certain aspects of their religion in their daily lives. Some studies assessing religiosity of parents in relation to their parenting behaviors have shown positive effects of religiosity on child-rearing, such as a more authoritative parenting style (Gunnoe et al., 1999; Vermeer, 2011), supportiveness (Snider, Clements, & Vazsonyi, 2004), and a better quality of the mother-child relation (Pearce & Axinn, 1998). On the other hand, religiosity has also been found to predict corporal punishment and more authoritarian parenting styles (Socolar et al., 2008). In addition, the most religious families tend to be the most strict, most rigid, and authoritarian, and therefore less likely to be using authoritative child-rearing practices (Ellison & Sherkat, 1993). These conflicting results may be due to the rather distal operationalization of religiosity in most studies, which does not reveal more proximal religion-related family processes. The role of religion in child-rearing may represent a construct more proximal to the prediction of actual parenting styles and behaviors. Analogous to the concept of ethnic socialization, the term religious socialization then refers to parental attempts to transmit their religious beliefs, ideas, and related behavioral requirements to their children. To our knowledge there are no studies examining religious socialization in relation to parenting quality, except for one early study that examined whether parents' religious beliefs influenced the interaction with their children and whether parents tried to expose their children to their religion at home (Gunnoe et al., 1999). In this study religiosity was related positively with authoritative parenting and negatively with authoritarian parenting.

Studies on ethnic socialization and religion in relation to the quality of parent-child interactions generally focus on adolescents. However, there is ample evidence that parenting patterns in early childhood vary between ethnic groups (e.g., Bornstein et al., 2010; Keller et al., 2009), and given that ethnicity and religion are generally salient aspects of parental identity, ethnic and religious socialization are likely to be relevant well before adolescence (Hughes et al., 2006). Indeed, studies have shown that parents change their ethnic socialization strategies to fit children's developmental capabilities and experiences (Fatimilehin, 1999; Hughes & Chen, 1997). For instance, activities regarding cultural socialization such as celebrating cultural holidays may be relevant when children are quite

young, whereas racial and ethnic issues such as discrimination are discussed more when children reach adolescence (Hughes et al., 2006).

In early childhood, the quality of parent-child interactions is generally examined in terms of parental sensitive responsiveness, which refers to a parent's ability to perceive child signals, to interpret these signals correctly, and to respond to them promptly and appropriately (Ainsworth, Bell, & Stayton, 1974). Maternal sensitivity positively influences many aspects of child development, including attachment security (e.g., Bakermans-Kranenburg, Van IJzendoorn, & Juffer, 2003), self-regulation (e.g., Eisenberg et al., 2001), and cognitive competence (e.g., Bernier, Carlson, & Whipple, 2010; Tamis-Lemonda, Bornstein, & Baumwell, 2001). The salience of sensitivity as a key indicator of parenting quality in early childhood across cultural groups has been demonstrated in a recent review in which the same relations for minority families were found (Mesman, Van IJzendoorn, Bakermans-Kranenburg, 2012).

An authoritarian parenting style, characterized by the use of restrictive and parent-centered behaviors, is generally not conducive to sensitive parenting (Harwood, Schoelmerich, Schulze, & Gonzalez, 1999; Ispa et al., 2004; Kelley, Power, & Wimbush, 1992; Rudy & Grusec, 2001), suggesting that cultural and religious factors that are related to a more authoritarian parenting style may be related to lower parental sensitivity. There is evidence that an authoritarian parenting style is more common among individuals with a collectivistic cultural background (e.g., Durgel et al., 2009; Pels et al., 2006) and those with strong religious beliefs (Ellison & Sherkat, 1993; Socolar et al., 2008). A strong ethnic identity and high levels of ethnic socialization in parents from a collectivistic background may therefore be related to higher levels of authoritarian parenting, which in turn may relate to lower levels of sensitivity. The same model may apply to parental religious identity and religious child-rearing, as these may also predict lower sensitivity as a result of a more authoritarian parenting style.

In the current study, we focus on Muslim Turkish second-generation minority mothers of young children in the Netherlands. The Turkish group represents the largest ethnic minority group in the Netherlands (CBS, 2012). The Turkish immigrants first came to the Netherlands as invited guest workers in the period 1960-1970. Their intention was to make a living and return to their countries of origin, but many stayed in the Netherlands. Second-generation Turkish mothers have lived in the Netherlands for (almost) all of their lives, and they have adopted some of the Dutch behaviors through the process of acculturation (Forum, 2012).

Turkish-Dutch minorities have a strong ethnic identification with their home country (Forum, 2012). For instance, Verkuyten and Yildiz (2007) showed that Turkish-Dutch minorities in the Netherlands had a strong ethnic in-group identification and a more neutral Dutch national identification. The Netherlands is considered to have a more individualistic culture (Hofstede, 2001), whereas Turkey is considered to have a more collectivistic culture (Hofstede, Hofstede, & Minkov, 2010). Parents from a Turkish cultural

background generally show more authoritarian values and parenting behaviors (e.g., Pels et al., 2006). In lower-educated families and families from rural areas obedience and close family ties are highly valued (Imamoglu, 1998; Sunar, 2002), compared to valuing autonomy and close family ties in higher-educated families and families from urban areas (Imamoglu, 1998). In immigration context, a study on socialization goals of Turkish immigrant and German mothers in Germany showed that German mothers valued independence, the ability to control negative impulses, and to be socially skilled, whereas Turkish mothers valued children's respectful and well-mannered behavior and close family ties more, next to autonomy (Durgel et al., 2009). In both groups, mothers with a higher educational level showed more goals related to autonomy and emotional well-being of the child. Lower educated mothers showed more goals related to close family ties and showing respectful behavior. It is estimated that 87% of the Turkish-Dutch people are Muslim (Forum, 2012) and being Muslim is an important factor of what it means to be Turkish in the Netherlands (Verkuyten & Yildiz, 2007). However, a report on Muslims in the Netherlands (SCP, 2004) reveals that the religiosity of Turkish-Dutch and Moroccan-Dutch people is lower for the higher educated persons compared to the lower educated persons. The same report shows that practicing Muslims strongly support family solidarity, traditional gender roles and limited autonomy for children compared to non-practicing Muslims. Furthermore, the traditional family solidarity is under pressure in immigrant families, which makes religion a strengthening part of parental authority (SCP, 2004). When they migrate, Turkish families often maintain strong links to the Turkish culture, with traditional family values, limited contact with the host community, preference for Turkish marriage partners, and maintenance of the Turkish language between generations (Crul & Doornick, 2003).

As mentioned earlier, the studies on religiosity and parenting mostly focused on Christians. In a recent study however, religious values and child-rearing values of Muslim Turkish adults in Turkey were assessed (Acevedo et al., 2013). Religious salience, was found to be positively associated with valuing obedience to authority and good manners while it was negatively associated with valuing independence, controlled for age, gender and education level of the participants.

Studies of culture and religiosity in relation to parenting quality are generally conducted with questionnaires (e.g. Pearce & Axinn, 1998), and there is a lack of studies linking ethnic identity, ethnic socialization, religious identity and religiosity to observed parenting. The goal of the current study is to examine parental ethnic and religious identity as well as ethnic and religious socialization in relation to observed sensitive parenting in Muslim Turkish ethnic minority mothers with toddlers in the Netherlands. In addition, we test the potential mediating role of an authoritarian parenting style in the relation of ethnicity-related and religion-related parent characteristics with sensitivity. Three main hypotheses were tested. First, we expected a significant positive association between mothers' ethnic identity and ethnic socialization with their observed sensitivity. Second, we expected a significant association between mothers' religious identity, religious socialization and

Islamic socialization with observed sensitivity, but we did not have a specific hypothesis about the direction of these associations due to inconsistent results in the literature. Third, we expected that an authoritarian parenting style would play a mediating role in the relation of ethnicity-related and religion-related parent characteristics with sensitivity; with a more authoritarian parenting style predicting less sensitive parenting.

Method

Sample and Procedure

The sample consisted of 70 Turkish minority mothers in the Netherlands and their 2- to 4-year-old children ($M = 2.55$, $SD = 0.53$). The mothers were recruited from municipal records in the context of a parenting intervention RCT study (Yagmur, Mesman, Malda, Bakermans-Kranenburg, & Ekmekci, 2014), based on their children's high levels of externalizing problems as measured by the Child Behavior Checklist (CBCL/1½-5, Achenbach & Rescorla, 2000). The current study used data that were collected before the intervention was implemented (pretest). To ensure the homogeneity of the immigrant sample and to make sure that all mothers had at least some years of education in the Netherlands, only second-generation immigrant mothers born in the Netherlands (with at least one of their parents born in Turkey) were included. All participating mothers gave written consent and were visited at home by a trained undergraduate or graduate Turkish student. Mothers completed a questionnaire after the home visit. The home visits took approximately one and a half hours and were conducted in Dutch, unless mother indicated to prefer Turkish. Instruction cards for the video observation and the questionnaire were available in both Dutch and Turkish. Sixty-one percent of the children in the sample consisted of boys. The mothers' average age was 29.77 years ($SD = 3.35$, range = 22-38). All children lived in two-parent families with both their biological parents. The majority of the children had no siblings (41%), whereas 40% of the children had one sibling, and 19% had two or more siblings. Fifty-three percent of the children were firstborns.

Measures

Maternal sensitivity. During the home visits, maternal sensitivity was measured in a 10-minute unstructured free-play episode with toys brought by the intervener and in a 10-minute problem-solving task. During the 10-minute unstructured free-play episode, mother and child were free to play with all the toys, and mothers were instructed to play with their child the way they would normally do. In the 10-minute problem-solving task mother and child were given two tasks (each 5 minutes) in which they were asked to solve puzzles that were somewhat too difficult considering the age of the child. Different puzzles were used for two and for three year old children. Mothers were instructed to help their child the way they would normally do.

Mother-child interactions were coded using the Sensitivity scales of the 4th Edition of the Emotional Availability Scales (EA Scales; Biringen, 2008). The sensitivity scales consists of seven subscales, two with scores ranging from 1-7 and five with scores ranging from 1-3 (total potential score range for each scale 7-29). *Sensitivity* refers to appropriate responding to the child's signals combined with positive affect. During the training of a team of (under)graduate coders provided by the fourth author, who completed the online EA Scales-training and who is an experienced coder of parent-child interactions, three types of alterations were made to prevent persistent interpretation problems and to improve intercoder agreement. These alterations consisted of removing subjective criteria, adjustment of the criteria for some scores on subscales to make them more linear, and improvement of the independence of the separate dimensions by removing overlapping criteria (full description available from the authors).

The three coders were unaware of other data concerning the participants. The scores for maternal behavior during free play and problem-solving were significantly correlated ($r = .55$), and were therefore standardized and averaged into a composite score for sensitivity (except for one mother, for whom only the standardized score on the problem-solving task was used, due to a technical failure during the free play session). Two coders were Dutch-Turkish and one coder was Dutch. The Dutch coder was assigned to mother-child dyads who communicated in Dutch, and also coded videos of dyads speaking Turkish that had been subtitled in Dutch by bilingual colleagues. Intercoder reliability (15 cases) within the team of three coders ranged from .73 to .96, with an average of .83 (intraclass correlation, single rater, absolute agreement).

Ethnic identity. Maternal ethnic identity was measured with the Multi-Ethnic Identity Measurement ([MEIM], Phinney, 1992). The scale consisted of 12 items of the MEIM (items 1, 2, 3, 5, 6, 11, 12, 13, 14, 16, 18, 20) regarding the importance of culture in the identity of the participant (e.g., "I have a clear sense of my Turkish background and what it means for me"). Only items referring positively to the cultural background were used. Mothers were asked to indicate for each statement how much they agreed or disagreed on a scale from (1) *totally disagree* to (4) *totally agree*. An average item score was computed for the analyses. The internal consistency of the scale was high (Cronbach's α of .89).

Ethnic socialization. Maternal ethnic socialization was measured with a cultural parenting scale developed for this study. The questionnaire consisted of seven items about the extent to which parents use their ethnic background in child-rearing (e.g., "I teach my child Turkish traditions and customs"). Mothers were asked to indicate for each statement how much they agreed or disagreed on a scale from (1) *totally disagree* to (5) *totally agree*. An average item score was computed for the analyses. The internal consistency of the scale was high (Cronbach's α of .94).

Religious identity. Maternal religious identity was measured with a questionnaire (Verkuyten & Yildiz, 2007) consisting of 13 items regarding the importance of religion in the identity of the participant (e.g., "I am proud of my religion", "I strictly live according to

the rules of my religion”). The items were rated on a 5-point Likert scale ranging from (1) *totally disagree* to (5) *totally agree*. An average item score was computed for the analyses. The internal consistency of the scale was high (Cronbach’s α of .95).

Religious socialization. Maternal religious socialization was measured with a questionnaire developed for this study. This questionnaire consisted of ten items about the extent to which parents use their religion in child-rearing (e.g., “I teach my child a lot about my religion”, “My religion helps me to raise my child well”). The items were rated on a 5-point Likert scale ranging from (1) *totally disagree* to (5) *totally agree*. An average item score was computed for the analyses. The internal consistency of the scale was high (Cronbach’s α of .96).

Islamic socialization. In addition to religious socialization Islamic socialization was measured to be able to compare general religious values with goals related to the specific religion. Maternal Islamic socialization was measured with a questionnaire also developed for this study. This questionnaire consisted of seven items specific about to which extent mothers want their children to live according to specific rules of the Islam in the future (e.g., “I hope my child will live according to the rules of the Quran in the future”, “I find it important that my child learns prayers from the Quran in the future”). The items were rated on a 5-point Likert scale ranging from (1) *totally disagree* to (5) *totally agree*. An average item score was computed for the analyses. The internal consistency of the scale was high (Cronbach’s α of .91).

Authoritarian parenting. The Child-Rearing Practices Report ([CRPR], Block, 1986) was used to assess the authoritarian parenting style of mothers. The authoritarian parenting scale consisted of 11 items (e.g., “I teach my child to always control his/her behaviors”) and was rated by mothers on a 5-point Likert scale ranging from (1) *totally disagree* to (5) *totally agree*. The internal consistency (Cronbach’s $\alpha = .64$) was acceptable, and the average of the 11 item scores was used in the analyses.

Educational level. Maternal educational level was measured on a 5-point scale: *primary school* (1), *vocational school* (2), *secondary school/middle vocational education* (3), *high vocational education* (4) and *university or higher* (5).

Results

Descriptive statistics of the main variables are presented in Table 1. All variables were inspected for possible outliers that were defined as values larger than 3.29 *SD* above or below the mean. Three outliers were identified, one on ethnic identity and two on ethnic socialization, and then winsorized (Tabachnick & Fidell, 2001). On average, mothers had moderately high scores on ethnic identity as evidenced by item mean scores of around 3, which refers to “agree” with the statements. Religious identity was scored on a different scale, but also showed a medium-high item average, reflecting scores just below “mostly agree”

regarding the statements about the importance that mothers attach to religion. Mothers generally scored high on ethnic, religious, and Islamic socialization, with item mean scores reflecting “mostly agree” with statements about the importance of transmitting values and knowledge related to their ethnicity and religion to their children. The mean scores on authoritarian parenting reflected the mid-point of the scale “do not agree, do not disagree”, thus, mothers evaluated themselves as being moderately authoritarian in their parenting.

Table 1. *Descriptive Statistics of Main Variables*

	<i>Maximum range</i>	<i>Observed range</i>	<i>M</i>	<i>(SD)</i>
Educational level	1.00 - 5.00	1.00 - 5.00	3.01	(0.88)
Culture				
Ethnic identity	1.00 - 4.00	1.67 - 4.00	3.01	(0.52)
Ethnic socialization	1.00 - 5.00	1.50 - 5.00	4.14	(0.83)
Religiosity				
Religious identity	1.00 - 5.00	1.31 - 5.00	3.73	(0.87)
Religious socialization	1.00 - 5.00	2.00 - 5.00	3.97	(0.84)
Islamic socialization	1.00 - 5.00	1.71 - 5.00	4.02	(0.86)
Authoritarian parenting style	1.00 - 5.00	2.55 - 4.50	3.40	(0.51)
Observed sensitivity ^a	-	-2.43 - 1.75	0.00	(0.88)

N = 70

^a The maximum range for Observed sensitivity is empty, because standardized scores were used for this variable.

Table 2 presents the bivariate correlations between the main variables. Looking at the correlations among the predictor variables (education and the religious and ethnic constructs), we found that maternal educational level was not related to maternal sensitivity or authoritarian parenting style. Mothers reporting higher religious and Islamic socialization were lower educated, and reported stronger religious identification. Mothers with a strong ethnic identity showed more ethnic socialization, religious identification and religious socialization. In addition, religious and Islamic socialization were positively correlated. Confidence intervals were calculated for the correlations between religious identification and religious socialization, religious identification and Islamic socialization, and religious socialization and Islamic socialization, respectively, 95% CI [.69, .96], 95% CI [.59, .91], and 95% CI [.57, .90].

Ethnic identity and ethnic socialization were not related to observed sensitivity. Regarding religiosity-related variables, mothers’ religious identity and religious socialization were not significantly associated with observed sensitivity. Islamic socialization was negatively related to observed sensitivity, in that mothers who reported more Islamic socialization showed lower levels of sensitivity towards their children. This relation remained significant when controlling for the educational level of mothers, with partial $r = -.30$, $p < .05$. Higher scores on ethnic socialization and religious socialization were related to higher levels of authoritarian parenting. However, authoritarian parenting was not significantly related to observed maternal sensitivity, and authoritarian parenting

thus did not mediate the association between Islamic parenting and sensitivity. When ethnic and religious identification, ethnic and religious socialization, and Islamic socialization were entered together in a regression analyses, these variables explained 13.1% of the variance in observed sensitivity and 13.3% of the variance in self-reported authoritarian parenting.

Table 2. *Correlations between Main Variables (N = 70)*

	1.	2.	3.	4.	5.	6.	7.	8.
1. Educational level	-							
2. Ethnic identity	-.13	-						
3. Ethnic socialization	-.22	.53**	-					
4. Religious identity	-.22	.26*	.12	-				
5. Religious socialization	-.28*	.28*	.16	.82**	-			
6. Islamic socialization	-.25*	.19	.04	.75**	.73**	-		
7. Authoritarian style	-.20	.22	.28*	.23	.26*	.23	-	
8. Observed sensitivity	.09	-.02	.13	-.18	-.14	-.31**	-.19	-

* $p < .05$. ** $p < .01$.

Discussion

Turkish minority mothers who reported higher levels of Islamic socialization showed lower levels of sensitivity towards their toddlers. This association remained significant when controlling for maternal education and was not mediated by authoritarian parenting style. Furthermore, maternal ethnic identity and ethnic socialization, were not related to observed maternal sensitivity. Religious identity and religious socialization of mothers were also not related to observed maternal sensitivity.

Although we found a relation between Islamic socialization and sensitivity, religious identity and religious socialization were not related to maternal sensitivity. These results could be due to the different aspects of religiosity included in this study. A distinction between two orthogonal dimensions of religious attitudes can be made, exclusion versus inclusion of transcendence and literal versus symbolic (Wulff, 1991). The first dimension, exclusion versus inclusion of transcendence, refers to whether a person is religious or not. The second dimension, literal versus symbolic, indicates whether religious contents are approached in a literal and rigid or in a symbolic and more interpretative way. Using those dimensions, four religious attitudes are defined: literal inclusion, literal exclusion, symbolic exclusion, and symbolic inclusion. Because all our participants were Muslims, only the literal inclusion and symbolic inclusion are relevant. Literal inclusion is a religious position in which a person believes in a transcendent reality and interprets religious contents in a literal way. Symbolic inclusion is a religious position in which a person searches for a deeper, symbolic meaning instead of adopting religious contents as they are.

From this point of view, Islamic socialization was operationalized as representing literal inclusion in the current study, because the scale reflects the extent to which parents want their children to obey to the specific behavioral rules of the Islam (e.g., “I hope my child will live according to the rules of the Quran in the future”, “I find it important that my child learns prayers from the Quran in the future”). Conversely, the religious identity and religious socialization scales represent symbolic inclusion, because they reflect the extent to which mothers feel connected to their religion and see their religion as part of their identity, and the general role of their religion in their child-rearing practices (e.g., “I am proud of my religion”, “My religion helps me to raise my child well”). Consistent with the symbolic inclusion dimension, these descriptors leave room for an interpretative stance toward religiosity, whereas strict adherence to behavioral rules related to religion can be seen as more rigid, consistent with the literal inclusion perspective. Rigidity is defined as a lack of adaptability and the absence of carefully considering the situation to identify the most appropriate response (Butcher et al., 2004), whereas the hallmark of sensitive parenting is a parent’s ability to adapt their responses to the needs of the child. It is then not surprising that parents who adopt a literal inclusion approach to religious socialization, as captured by the Islamic socialization scale, show lower levels of sensitivity when interacting with their children. This is consistent with previous findings that religiosity reflecting the exclusion-inclusion of transcendence dimension is not related to parenting styles, whereas high scores on the literal-symbolic dimension (reflecting symbolic religiosity) are related to a more authoritative autonomy-supporting parenting style and lower psychological control (Duriez & Soenens, 2004), which both fit the idea of sensitive parenting.

In contrast to findings from earlier studies (Caldwell et al., 2002; Hughes et al., 2006), ethnic identity and ethnic socialization were not related to sensitive parenting in early childhood in the current study. However, the on average high scores on the ethnic socialization scale that we found in our sample show the importance of ethnic socialization for mothers with young children. Studies on ethnic identity in relation to parenting are generally conducted in adolescent groups with questionnaires on parenting behavior, whereas in the current study an observational measure of parenting was used in a sample with toddlers, which may explain why we did not replicate previous findings. It may also be that religious aspects of socialization are simply more salient in early childhood than ethnic aspects of socialization in Turkish minority families. There is indeed some evidence that religion is more central than ethnicity to the identity of Turkish minorities in the Netherlands (SCP, 2012), which could mean that for parents religious socialization is more salient compared to ethnic socialization. Therefore religious socialization could play a substantial role in parenting and thus translate to a stronger association with other aspects of parenting.

A higher educational level was related to lower religious and Islamic socialization in the current study. We do not know of any previous studies that have reported on the relation between educational level and religious parenting, but our results are consistent with findings that educational level is negatively related to general religiosity (e.g., SCP, 2004). In our

study ethnic identity and ethnic socialization were not significantly related to educational level, which is consistent with findings from other studies (Caughy, O'Campo, Randolph, & Nickerson, 2002; Phinney & Chavira, 1995), but in contrast with findings showing that ethnic identity and ethnic socialization are more salient in parents with a higher educational level (Hughes et al., 2006; Vermeer, 2011).

Muslim societies have been found to score high on collectivism and authoritarianism in some studies (Al-Mahroos, 2007; Dwairy, 2004; Rudy & Grusec, 2006). In the current study ethnic socialization and religious socialization were positively related to authoritarian parenting style. Authoritarian child-rearing values in Turkish families have been found to match with a traditional family system (SCP, 2004), and higher levels of authoritarian parenting have been found to often characterize parents from collectivistic cultures (Harwood et al., 1999; Rudy & Grusec, 2001). A study comparing authoritarian parenting in individualistic (Western European) and collectivistic (Egyptian, Iranian, Indian and Pakistani) cultures showed that maternal authoritarianism was related to maternal negative emotion and cognition towards their children in the individualist group but not in the collectivist group (Rudy & Grusec, 2006). However, contrary to our third hypothesis, authoritarian parenting was not significantly related to observed sensitivity, and thus not a mediator in the relation between ethnic or religious socialization and sensitivity. However, as expected the correlation between authoritarian parenting and sensitivity was negative ($r = -.19$), and would reach significance with increased statistical power in a somewhat larger sample.

Ethnic identity and religious identity were positively related in the current study. This was also the case in earlier studies (SCP, 2004; Verkuyten & Yildiz, 2007). For both ethnic and religious variables, maternal identification was positively related to their socialization efforts in the same areas. However, ethnic and religious socialization were not interrelated. Identity can be seen as a relatively abstract construct, which could possibly explain the significant relations with and among the various identity measures. The absence of a relation between ethnic socialization and religious socialization could be due to the more concrete nature of these constructs, representing more distinct behaviors in daily life.

Some limitations of this study should be noted. First, the small sample size and the fact that the mothers in our sample were more highly educated than the general population of Turkish minority adults in the Netherlands (SCP, 2011) may limit the sample's representativeness of the population, and has limited its statistical power. In addition, in the current study only mothers were included whereas the relation between fathers' views on culture and religion could also be related to fathers' parenting behaviors. For instance, it has been shown that religious fathers are more involved in parenting (King, 2003), indicating that the inclusion of fathers in future studies on this topic is worthwhile. The mothers in this study had children with high externalizing problems and were mothers who accepted to participate in an intervention study. Including only mothers with children scoring high on externalizing problems could have resulted in higher scores on authoritarian parenting and lower scores on

sensitive parenting. It should be noted that even in this sample of children with externalizing problems the Turkish mothers scored high on sensitive parenting. Finally, our study did not systematically assess literal and symbolic inclusion for both general religious socialization and Islamic socialization. It would be important to disentangle the differential relations of these dimensions with parenting quality. In future studies, data collection in the country of origin of minorities should be added to disentangle influences of minority status, ethnicity-related and culture-related parent characteristics on parenting.

To our knowledge there are no studies assessing ethnicity-related and religion-related parent characteristics in relation to the observed quality of parenting in early childhood. Our findings show that both ethnic and (Islamic) religious socialization are important to second-generation Turkish minority mothers with a preschool-aged child living in the Netherlands. Further, higher levels of Islamic socialization in the form of teaching religious rules are related to lower levels of observed maternal sensitivity. Our results emphasize the importance of distinguishing between literal versus symbolic manifestations of religious socialization to understand their relation with parenting quality. More generally, this study shows that religious socialization deserves more research attention in various ethnic and religious groups and across different developmental periods.

Chapter 5

General discussion

General discussion

The current dissertation examined sensitivity beliefs and sensitive behaviors in Turkish ethnic minority families. Sensitivity beliefs were found to converge across ethnic groups of mothers and youth care professionals (Chapter 2), no relations between sensitivity beliefs and sensitive behaviors in minority and majority families were found (Chapter 3), and more emphasis on Islamic socialization but not on ethnic socialization was associated with lower sensitivity of minority mothers (Chapter 4). In the current chapter, these findings and their theoretical and practical implications are discussed, and limitations of the studies are addressed, followed by suggestions for future research.

Sensitivity beliefs

Sensitivity beliefs were found to be highly similar across and within ethnic groups of mothers and professionals in the Netherlands and Turkey in Chapter 2. These results show a cognitive match between mothers and professionals with different cultural backgrounds regarding views on the importance of sensitivity-related behaviors in child-rearing, which provides support for the potential universality of the sensitivity construct (see also Mesman & Emmen, 2013).

Although maternal sensitivity beliefs converged highly across all groups, educational level, income, and number of children were found to be predictors of these beliefs. In the groups of professionals, educational level was not a predictor of sensitivity beliefs, because nearly all professionals were highly educated. These findings show that demographic factors of mothers play an important role in beliefs about maternal sensitivity, in that low socioeconomic status and more children may cause stress which in turn negatively influences parenting perceptions, in the same way it influences parenting practices (Conger & Donellan, 2007; Respler-Herman, Mowder, Yasik, & Shamah, 2012).

The negative relation between socioeconomic status and maternal sensitivity beliefs supports the Family Stress Model (Conger & Donellan, 2007), which states that higher stress levels due to economic pressures are related to a decreased ability to respond sensitively to children, and as a result sensitivity could be seen as less ideal. This could also be the case for the negative relation between the number of children and maternal sensitivity beliefs. Having more children can cause more stress and less time to invest in each individual child, which can result in less sensitivity-orientated parenting beliefs. The influence of socioeconomic status on parental sensitivity behaviors has been documented in several studies (see Mesman, Van IJzendoorn, & Bakermans-Kranenburg, 2012 for a review), and the current study showed that this also applies to parental beliefs about sensitivity. Therefore, it may be worthwhile to improve ethnic minorities' socioeconomic status through public policy and/or to take socioeconomic status into account in providing interventions (Cabrera et al., 2013). This could be realized by, for instance, social safety net programs, such as child-care

subsidies. It has been shown that by improving the economic well-being of families, child development could also be positively affected, including children's academic, behavioral and physical well-being (Gassman-Pines & Hill, 2013). For instance, the Earned Income Tax Credit (EITC) in the United States aims to increase the income of low- and moderate-income working people by providing a refundable tax credit. It has been found that the EITC reduces stress and mental health problems of working mothers (Evans & Garthwaite, 2010) and improves child development (Hoynes, Miller, & Simon, 2012).

In addition, providing interventions to reduce stressors could positively affect parenting. A recent study showed that giving parents the opportunity to discuss stressors with the interveners positively influenced the effectiveness of the intervention (Parra Cardona et al., 2012). In line with this, for the improvement of parenting in minority families, minority-specific stressors such as acculturation should also be taken into account (Cabrera et al., 2013; Emmen et al., 2013). A recent study on acculturation and sensitivity showed that lower socioeconomic status is related to more acculturation stress and this in turn is negatively related to observed positive parenting in Turkish minority families (Emmen et al., 2013). To be able to understand acculturation stress in a larger context, acculturation levels of immigrants should be assessed, including for instance, attitudes towards integrating in the host society, (Yagmurlu, Citlak, Dost, & Leyendecker, 2009), loss of extended family, and discrimination (Leidy, Guerra, & Toro, 2010). In another family intervention study in which mothers and fathers with different ethnic and socioeconomic backgrounds were included, financial stress, disengagement coping, and involuntary disengagement responses were reduced and problem solving was improved (Wadsworth et al., 2011). Thus, parenting interventions in combination with interventions/policies for the improvement of economic well-being and reduction of stressors could have positive effects on child development and parenting.

Given that studies have shown the importance of the cognitive match in forming therapeutic alliance (Knipscheer & Kleber, 2004), our findings on the convergence regarding sensitivity beliefs suggest that parenting intervention and prevention programs focused on sensitivity would be applicable in cross-cultural therapeutic settings within a particular country. For instance, with the inclusion of professionals with a majority and minority status in providing family interventions to minority families, it could be examined whether similar intervention effects occur in both situations. However, it has been shown that ethnic matching is difficult in multicultural societies (Knipscheer & Kleber, 2004). Furthermore, the finding that socioeconomic status predicts sensitivity beliefs makes it important to adapt the delivery of intervention and prevention programs for groups with a different socioeconomic status. For instance, it could be beneficial to focus on reducing economic stressors for families with a lower socioeconomic status (Wadsworth et al., 2011), whereas reducing other stressors, such as stress related to marital quality, could be more relevant for families with a higher socioeconomic status.

Sensitivity beliefs in relation to sensitive behaviors

In Chapter 3, sensitivity beliefs and sensitive parenting behaviors were found to be unrelated in the total group of mothers, and in the Dutch majority and Turkish minority groups of mothers separately. In some earlier studies, a rather modest relation between parenting attitudes and parenting behaviors has been shown (Carra, Lavelli, Keller, & Kärtner, 2013; Dagget, O'Brien, Zanolli, & Peyton, 2000; Kiang, Moreno, & Robinson, 2004; Kochanska, Kuczynski, & Radke-Yarrow, 1989). In a study that specifically focused on sensitivity, no relation was found between attitudes and behaviors (Van Zeijl et al., 2006). The absent or weak relation between sensitivity beliefs and behaviors implies that the extent to which a mother values sensitivity does not necessarily translate into the extent to which she behaves sensitively. Sensitivity does not describe concrete behaviors and is therefore generally not an aspect of parenting that is consciously applied and is very difficult to self-monitor. Thus, even if beliefs about the importance of sensitivity are similar across cultures manifestations of sensitivity could differ. Furthermore, sensitivity also contains intuitive behaviors, such as smiling back when a child smiles, or imitating infant vocalizations (e.g., Braungart-Rieker, Garwood, Powers, & Wang, 2001; Mesman, 2010), rather than planned behaviors such as having strict rules.

In a meta-analysis on the general relation between attitudes and behaviors it is suggested that an attitude-behavior relation can occur when attitudes are easy to retrieve from memory (accessibility) and are stable over time (Glasman & Albarracin, 2006). Expressing attitudes repeatedly and having direct experience with related events make the accessibility of the attitude higher and in this way influences the attitude-behavior relation. Being motivated to think about an issue promotes attitudes associated with behavior-relevant information. In addition, believing that one's attitudes are correct, strengthens the attitude-behavior relation via greater attitude stability. For interventions, this could mean that making sensitivity beliefs more accessible and stable over time might be a fruitful approach to strengthen positive belief-behavior relations for sensitivity. For instance, beliefs could become more accessible by bringing sensitivity beliefs more to the attention of parents. The Video-feedback Intervention to promote Positive Parenting and Sensitive Discipline (VIPP-SD; Van Zeijl et al., 2006) is an intervention with which this could be realized. In this intervention parent-child interactions are videotaped and watched together with the parent. It is aimed to increase sensitive behaviors by giving parents positive feedback on the interactions. For instance, the intervener points out sensitivity-chains, in which the parent reacts to a signal of her child and the child shows it is content. In this way it is aimed that parents see the influence of sensitive parenting on the child and therefore make more use of it. The VIPP-SD has been found to be effective in increasing sensitive parenting of mothers (Van Zeijl et al., 2006). In addition, maternal attitudes toward sensitivity and sensitive discipline improved with the VIPP-SD. However, still no relation was found between the attitudes and behaviors as a result of the intervention, at least not in the short run. Regarding the stability of beliefs over time, booster sessions could be used. With these sessions parents

could become more aware of the importance of sensitivity which then might translate into behaviors in the longer run.

There are some examples of early childhood parenting interventions that have been successfully applied to different ethnic groups. For instance, there is an adjusted version of the VIPP-SD for use with Turkish minorities, VIPP-Turkish Minorities (VIPP-TM; Yagmur, Mesman, Malda, Bakermans-Kranenburg, & Ekmekci, 2014). Minor adaptations in the VIPP-SD program were made, such as the use of certain play materials and having interveners with the same cultural background and language skills in Dutch and Turkish, whereas the core aspects of the program were not adapted. The VIPP-TM has been shown to be effective in increasing sensitive parenting of second-generation Turkish minority mothers in the Netherlands (Yagmur et al., 2014). The Incredible Years Program (Reid, Webster-Stratton, & Beauchaine, 2001) that was originally developed for a majority group and includes a focus on sensitivity, was found to be effective in increasing positive parenting across different ethnic groups. The few studies with parenting interventions in ethnically diverse families showed that not only the underlying principles but also the more specific content of such interventions are generally applicable across different cultural groups (Reid et al., 2001). However, cultural adaptations may still be needed (Kumpfer, Magalhaes, & Xie, 2012) for some procedural or methodological aspects of these programs, such as using bilingual assistants and providing intervention materials also in the native language of mothers (Bjørknes & Manger, 2013; Yagmur et al., 2014).

In contrast to findings from earlier studies in which the role of socioeconomic status on beliefs and behaviors in child-rearing has been shown (e.g., Chaudhuri, Easterbrooks, & Davis, 2009; Letourneau, Hungler, & Fisher, 2005; Mistry, Biesanz, Chien, Howes, & Benner, 2008; Tekin, 2008; Van IJzendoorn, 1990), socioeconomic status was not related to sensitivity beliefs and sensitive behaviors in Chapter 3. Sensitivity beliefs did not mediate the relation between socioeconomic status and sensitive behaviors and socioeconomic status did not moderate the relation between sensitivity beliefs and sensitive behaviors. Perhaps the absence of a significant role of socioeconomic status in our study is due to the fact that the lowest family incomes were still in the middle income range. Low family income may only negatively affect family functioning below a certain threshold that was not within the income range of the study in Chapter 3.

Ethnicity-related and religion-related attitudes in relation to maternal sensitivity

The influence of ethnicity-related and religion-related attitudes on parenting is generally more salient in minority families compared to majority families (Neblett et al., 2008; Shelton et al., 2005). Ethnic socialization has been found to benefit coping strategies of minorities for dealing with issues like racial discrimination (Neblett et al., 2008). Religion appears to be of particular importance for minorities with an immigrant background (Hill, Soriano, Chen, & LaFromboise, 1994), because it is seen as a source of collective self-worth, shared values and social support within families and communities (Gungor, Fleischmann, & Phalet, 2011).

These sources are specifically relevant for minorities, since minorities could experience acculturation stress due to discomfort with societal values and norms that are incompatible with their ethnic and religious beliefs. In addition, the need to be aware of and prepare for ethnic prejudice and discrimination may be more relevant in minority families and therefore may play a role in the development of ethnic and religious identity. A recent study on the development and use of Islamic identity in parenting of Muslim mothers in Britain showed that these mothers have to deal with increasing hostility towards the Islam in British society's public arenas in their efforts to instill religious values in their children (Ryan & Vacchelli, 2013). Muslims in the Netherlands also experience hostility. For instance, a recent report regarding discrimination showed that half of the Muslim population in the Netherlands experienced discrimination in public places (SCP, 2014).

Acculturation processes occur in both first and second-generation minorities. It has been shown that the Turkish second-generation group identifies less with the Turkish culture and more with the Dutch culture compared to first-generation immigrants (SCP, 2012). However, the identification of Turkish second-generation immigrants with the Turkish culture is still high. Religious identification is also lower in the second-generation compared to the first-generation, however, this difference is very small (SCP, 2012). The lower ethnic and religious identification of second-generation minorities supports the view that socio-cultural integration is related to less religious attachment in a secular host society (Maliapaard, Lubbers, & Gijsberts, 2010). Including ethnicity-related and religion-related factors in studies on parenting is thus potentially important.

In Chapter 4 it was found that more positive attitudes toward Islamic socialization were related to lower observed maternal sensitivity in Turkish-Dutch mothers. This could be due to the specific assessment of different aspects of religiosity. The literal versus symbolic dimension of transcendence (Wulff, 1991) indicates whether religious contents are approached in a rigid or in a more interpretative way. In literal inclusion a person believes in a transcendent reality and interprets religious contents in a concrete way, while in the symbolic inclusion a person searches for a deeper, emblematical meaning instead of adopting religious contents as they are. Parents who adopt a literal inclusion approach to religious socialization (reflected in Islamic socialization) could show lower levels of sensitivity when interacting with their children due to inflexibility because of strict adherence to behavioral rules related to religion. This is consistent with earlier studies in which it was found that low scores on the literal-symbolic dimension (reflecting literal religiosity) are related to a less authoritative autonomy-supporting parenting style and more psychological control (Duriez & Soenens, 2004). Raising children to become Muslim adults and live according to the Quran is crucial in the Islam. This includes teaching children how to pray and could be seen as a reflection of literal inclusion of religion. Adherence to such rules in a rigid way may not be conducive to sensitive parenting, whereas a flexible approach to such rules could go together with sensitive parenting.

Specific guidelines about behavioral aspects of parenting young children according

to the Islam can be found in the Quran (holy book of the Islam) and by looking at the life of the prophet Mohammed and his hadiths (i.e. advices of the prophet). These leave room for the symbolic inclusion of religion because of the openness for interpretations. In the Quran (31:13-19, *Oxford World's Classics edition*) for instance an example is given about the prophet Luqman with the advices he gives to his son, which parents have to teach their children. These advices contain basic principles of the Islam, such as not worshipping others next to God (Allah) and not equalize others to God, respecting parents, knowing that God is aware of everything, the importance of praying, discouraging bad deeds and encouraging good deeds, not to be arrogant and to be balanced in behaviors. In addition, in the Islam, parents are advised to give explanations for the rules they set (Canan, 2010) and it is recommended not to use strictures in (religious) teachings, encouraging children instead of punishing, to consider the age of the child, and not to expect children to do more than they can (Bahrami, 2014; Golezani, 2013; Lees & Horwath, 2009). Using physical punishment and verbal abuse are discouraged (Akin, 2012).

These examples show that there is room for sensitive parenting within Islam, a conclusion that can also be drawn from a story about the prophet referring to a time that he was the imam (i.e., the person leading the prayer when praying together) in the mosque and the prostrating (i.e., form of bowing during prayer) took longer than usual. Afterwards people asked why it took so long and whether something happened. The prophet answered that his grandson (around the age of two) was riding on his back and he did not want to disturb him until he had enough. This story presents a nice example of sensitive behavior as shown in the prophet's understanding of the child's wishes, and his willingness to adapt his behaviors according to those wishes.

There is one hadith stating that parents should teach their children the regular prayers from seven years of age and children from the age of ten should be disciplined if they do not perform the prayers (Ebu Davud, salat, 26, Tirmizi, Mevakit, 182 in Akyuz, 2002). There is controversy about the translation of the last part of this hadith related to discipline, with some translations referring to spanking (Akyuz, 2002) and others to providing a positive role model (Karabasoglu, 2012). Depending on the interpretation of the religious sources, some aspects of (religious) child-rearing could make it challenging for parents to behave sensitively when children grow older and show rebellious behaviors. Based on relevant passages from the Quran, the life of the prophet Mohammed, and his hadiths, the Islam is compatible with sensitive parenting, especially when taking a more symbolic approach to the religion.

In contrast to findings from earlier studies (Caldwell, Zimmerman, Bernat, Sellers, & Notaro, 2002; Hughes et al., 2006), ethnic identity and ethnic socialization were not related to sensitive parenting in early childhood in Chapter 4. Religious aspects of socialization may be more salient in early childhood compared to ethnic aspects of socialization (Hughes et al., 2006; Brody & Flor, 1998). For instance, ethnic identity and socialization have been found to be more pronounced among parents of older children compared to parents of younger

children (Hughes, 2003). It could be the case that religious socialization is already important in early childhood because it includes concrete guidelines and rules, such as attending religious services, praying, and following the rules stated in the holy book of a religion. Parents are expected to teach their children these rules so that they will become religious adults (Golezani, 2013). It is for instance stated that parents cannot expect their children to grow up as good Muslims if the parents do not fully submit to Islam in their daily life (Ado, n.d.). The concrete guidelines in religions are thus very visible in daily life, whereas ethnic identity and ethnic socialization are probably more implicit and refer more to instilling ethnic pride and telling stories belonging to the own ethnic group rather than suggesting specific activities.

Limitations and future directions

Although the described studies provide important information regarding sensitivity beliefs and behaviors of minority and majority mothers in relation to several socio-demographic variables, some limitations of these studies should be noted. First, the small sample sizes and the convenience sampling in Chapter 2 could limit the generalizability of the results to minority Turkish families. The small sample sizes also may lower the power of the studies. In somewhat larger samples, probably more significant results would be found. For instance, in the sample of 30 Turkish minority mothers in this dissertation (Chapter 3), the correlation between income and maternal sensitivity beliefs was .34, but not significant, whereas a correlation of this magnitude would be significant in a sample of 35 participants (Hinkle, Wiersma & Jurs, 2003).

In addition, the mothers in our sample were more highly educated than the general population of Turkish minority adults in the Netherlands (SCP, 2011). The participants in Chapter 2 were not selected for their need for professional assistance or support in child-rearing. It could be the case that parental views of sensitivity may be more distorted in distressed families than in the current sample. In Chapter 3 it was not possible to fully match participants on socioeconomic status. Since earlier studies showed effects of socioeconomic status on sensitivity beliefs and behaviors, full matching may have provided a better test of group differences.

It is also important to note that we compared two groups with different cultural backgrounds within one country, which limits interpretations about the role of culture as a broader construct on parenting beliefs and behaviors. To explain lower scores on sensitive behaviors minority-specific stressors such as acculturation stress, language difficulties, and discrimination (Berry, 1997) should be considered in research. In Chapter 4 we did not systematically assess literal and symbolic inclusion for both general religious socialization and Islamic socialization. Based on our findings, however, we note that it would be important to disentangle the differential relations of these dimensions with parenting quality. Finally, in the described studies we only focused on mothers and female professionals. Including fathers and male professionals could provide a more complete picture regarding predictors

of sensitivity beliefs and behaviors in minority families.

Even though the studies in this dissertation have some limitations and more research is needed, these studies contribute to the literature on parenting in minority families compared to majority families and show the importance of assessing the role of several minority specific aspects in parenting. In future studies on parenting of young children in minority families, it is important to include families from all socioeconomic environments to be able to disentangle effects of ethnicity and socioeconomic status. In addition, longitudinal studies should be conducted to find out the long-term influences of certain parenting behaviors in child-rearing and protective and risk factors. Furthermore, conducting intervention studies may provide information on how to promote and improve positive parenting in minority families, as shown in a recent study on the effectiveness of the VIPP-SD in Turkish minorities in the Netherlands (Yagmur et al., 2014).

Regarding ethnic and religious socialization of parents in child-rearing it would be interesting to study the ethnic identity and religious identity their children develop when they reach adolescence. In addition, in this dissertation cultural groups were divided according to their ethnic background, thus cultural orientations were defined beforehand. However, asking parents about their cultural orientation, using the divisions in the Family Change Model (Kagitcibasi, 1990), would provide more information regarding the effects of their self-reported cultural orientation on parenting. In Chapter 4, only Muslim mothers were included and it was found that religious socialization was not related to maternal sensitivity whereas Islamic socialization was related to lower maternal sensitivity. Including various religious groups in future research could show in which way religion influences parenting, because religion generally communicates ideas on what proper child-rearing entails.

Conclusions

In this dissertation no evidence was found for differences in sensitivity beliefs between ethnic groups of mothers and professionals within country or between countries. This cognitive match is of major importance for scientists and professionals working with minority families. In line with an earlier study (Yagmur et al., 2014), our findings suggest that early childhood parenting interventions focused on enhancing sensitivity might be successfully applied in programs for minority families. No relation between sensitivity beliefs and behaviors was found in this dissertation. To help parents, it is important to know what they want to achieve by assessing their ideals regarding (sensitive) parenting, and to conduct observations to uncover actual sensitivity levels of parents. In this way the gap between ideals and behaviors can be bridged by interventions.

Whereas ethnic socialization was not related to maternal sensitivity, religious Islamic socialization was related to lower levels of maternal sensitivity which underlines the importance of distinguishing literal versus symbolic manifestations of religious socialization to be able to understand its relation with maternal sensitivity. Overall, the current dissertation contributes to the growing evidence that sensitivity is a cross-culturally relevant concept in

early childhood parenting, although sensitivity beliefs do not seem to predict sensitive behaviors. In child and family studies parental religious orientations and belief systems should be taken more seriously in order to be able to understand parenting and its effects on child development in minority families.

Nederlandse samenvatting
(Dutch summary)

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De Turkse populatie vertegenwoordigt de grootste etnische minderheidsgroep in Europa en blijft zich uitbreiden door de groei van de tweede generatie. Ondanks deze toename is er maar weinig onderzoek gedaan naar opvoeding door de tweede generatie Turken. Dit proefschrift richt zich daarom op sensitiviteit in de opvoeding binnen Turkse gezinnen in Nederland.

In de literatuur over opvoeding in Westerse culturele groepen is sensitiviteit één van de meest onderzochte aspecten van de vroege ouder-kind interactie (Mesman & Emmen, 2013). Sensitiviteit wordt gedefinieerd als de vaardigheden van een ouder om signalen van het kind op te merken, deze signalen correct te interpreteren en er vervolgens prompt en correct op te reageren (Ainsworth, Bell, & Stayton, 1974). Sensitiviteit hangt samen met een gunstige ontwikkeling van het kind op gebieden zoals gehechtheid, zelfregulatie, sociaal functioneren en cognitieve vaardigheden (Bakermans-Kranenburg, Van IJzendoorn, & Juffer, 2003; Bernier, Carlson, & Whipple, 2010; Eisenberg et al., 2001; Kochanska, 2002). De focus in veel opvoedingsinterventies wordt dan ook gelegd op sensitiviteit. Onderzoeken naar sensitiviteit zijn veelal uitgevoerd in groepen met een Westerse afkomst, waardoor onduidelijk is in hoeverre de bevindingen te generaliseren zijn naar niet-Westerse etnische minderheden. In het beperkte aantal onderzoeken dat zich wél heeft gericht op niet-Westerse groepen bleken etnische minderheden minder sensitief opvoeding te vertonen in vergelijking met meerderheidsgezinnen (Barnett, Shanahan, Deng, Haskett, & Cox, 2010; Mesman, Van IJzendoorn, & Bakermans-Kranenburg, 2012; Pungello, Iruka, Dotterer, Mills-Koonce, & Reznick, 2009; Van IJzendoorn, 1990) en meer stress en uitdagingen te ervaren in het gezinsleven (Flink et al., 2012; Mesman et al., 2012). Verschillende factoren zoals sociaaleconomische status (Mesman et al., 2012) en acculturatiestress ((Emmen, Malda, Mesman, Ekmekci, & Van IJzendoorn, 2013) spelen daarbij een rol. Het Family Stress Model biedt een verklaring voor de relatie tussen sociaaleconomische status en opvoeding (Conger & Donnellan, 2007). In dit model worden sociaaleconomische moeilijkheden gezien als stressoren die leiden tot een minder positieve opvoeding. Dit model blijkt ook toepasbaar te zijn op etnische minderheden in het algemeen (Benner & Kim, 2010; Conger et al., 2002) en specifiek op Turkse minderheden in Nederland (Emmen et al., 2013). Het ervaren van acculturatiestress blijkt samen te hangen met een minder positieve opvoeding in het algemeen (Kim, Chen, Li, Huang, & Moon, 2009; Leidy et al., 2010; Smokowski, Rose, & Bacallao, 2008) en meer specifiek ook met een minder sensitieve opvoeding (Emmen et al., 2013). Verschillende experimentele studies hebben aangetoond dat opvoedingsinterventies effectief zijn in het verhogen van de sensitiviteit van ouders (Bakermans-Kranenburg, Van IJzendoorn, & Juffer, 2003; Van Zeijl et al., 2006; Reid, Webster-Stratton, & Beauchaine, 2002). Om de effectiviteit van preventie- en interventieprogramma's te vergroten voor de Turkse minderheden in Europa is het belangrijk om meer te weten te komen over sensitief opvoeden in deze populatie en over de factoren die daarmee samenhangen. In dit proefschrift

zijn daarom opvattingen over sensitief opvoeden en voorspellers van sensitieve opvoeding onderzocht in Turkse gezinnen in Nederland.

Opvattingen over sensitief opvoeden

Professionals en therapeuten in de Jeugdzorg werken met ouders uit zowel de meerderheids- als minderheidsgroepen. De samenwerking tussen de professional en cliënt, hun affectieve band en het vermogen van de professional en cliënt om overeenstemming te bereiken in doelen en taken worden samen ook wel ‘alliantie’ genoemd (Kazdin, Marciano, & Whitley, 2005). Voor de effectiviteit van interventies is het van belang dat een positieve alliantie ontstaat tussen de professional en de cliënt. Door professional en cliënt op culturele achtergrond te matchen kan alliantie versterkt worden (Zane et al., 2005). Echter, in multiculturele samenlevingen is dit niet altijd mogelijk (Knipscheer & Kleber, 2004), omdat de meeste hulpverleners uit de meerderheidsgroep komen. Er zijn ook aanwijzingen dat de overeenkomsten tussen professional en cliënt in het opstellen van doelen voor de behandeling en de manieren van oplossen van problemen, de zogenaamde ‘cognitieve match’, belangrijker zijn dan de etnische match in het versterken van de alliantie (Sue, 1998). Turkse en Marokkaans etnische minderheden stellen in de hulpverlening in Nederland overeenkomsten in attitudes en opvattingen meer op prijs dan eenzelfde etnische achtergrond (Knipscheer & Kleber, 2004). Dit roept de vraag op of er een cognitieve match bestaat tussen professionals en ouders voor wat betreft sensitiviteit in de opvoeding. Met andere woorden: zijn professionals en ouders uit verschillende culturele groepen het eens over het belang van sensitiviteit in de opvoeding? Deze vraag staat centraal in het eerste onderzoek in dit proefschrift (Hoofdstuk 2).

De onderzoeksgroep bestond uit 15 Turkse en 45 Nederlandse moeders in Nederland, 11 Turkse en 11 Nederlandse professionals in Nederland en 45 Turkse moeders en 45 Turkse professionals in Turkije. De deelnemende moeders hadden minimaal één kind met een leeftijd tussen 6 maanden en 6 jaar. Deelnemende professionals hadden minimaal twee jaar ervaring in het werken met kinderen jonger dan 12 jaar en hun ouders. De deelnemers sorteerden de Maternal Behavior Q-Sort (MBQS), die bestaat uit 90 kaarten met korte beschrijvingen van pedagogisch gedrag van moeders, in de volgorde die zij vinden passen bij wat zij beschouwen als de ideale moeder. Op deze kaarten staan gedragingen die in verschillende mate (in)sensitief zijn. Enkele voorbeelden zijn: *‘Laat merken dat zij het leuk vindt om dingen met haar kind te doen’* (hoge sensitiviteit) en *‘Reageert niet als haar kind geluidjes maakt, lacht, of de armen uitstrekt’* (lage sensitiviteit). De correlatie tussen de sortering van de deelnemers en de sortering door wetenschappelijke experts om de sensitieve moeder te beschrijven is de zogenaamde sensitiviteitsscore.

Uit de resultaten kwam naar voren dat tussen en binnen de etnische groepen van moeders en professionals grote overeenstemming bestond in opvattingen over de ideale moeder, en dat de beschrijvingen van de ideale moeder sterk overeenkwamen met het concept sensitiviteit zoals omschreven door de wetenschappelijke experts. Dit laatste was sterker het

geval voor Jeugdzorg-professionals dan voor moeders. Hoger opleidingsniveau, hoger inkomen en minder kinderen waren voorspellers van hogere sensitiviteitsscores van moeders. Met andere woorden: de beschrijvingen van de ideale moeder door moeders met deze kenmerken kwamen sterk overeen met de beschrijvingen van de zeer sensitieve moeder. In de groep van professionals was een hogere opleiding gerelateerd aan een grotere overeenstemming met de ideale beschrijving van de sensitieve moeder door experts.

Dit onderzoek laat zien dat opvattingen over sensitieve opvoeding in de vroege kindertijd gedeeld worden in verschillende culturen en dat sprake is van een cognitieve match tussen Jeugdzorg-professionals en moeders uit verschillende culturen wat betreft sensitiviteit als kenmerkend voor de ideale opvoeding. Deze match geeft aan dat opvoedingsinterventies uitgevoerd door Jeugdzorg-professionals en gericht op het versterken van sensitiviteit ook succesvol zouden kunnen zijn bij etnische minderheden.

Opvattingen over sensitiviteit en werkelijk sensitief opvoeden

Een belangrijke vraag in onderzoek naar opvoeding is in hoeverre opvattingen over gedrag daadwerkelijk gedrag voorspellen. Onderzoeken naar de relatie tussen opvattingen en gedrag laten uiteenlopende resultaten zien (Ajzen & Fishbein, 1977). In sommige studies wordt gevonden dat ze sterk overeenkomen en in andere onderzoeken worden zwakke relaties gevonden. Wat betreft de relatie tussen opvattingen over opvoeden en werkelijk opvoeden zijn er zwakke positieve relaties gevonden. Opvattingen over opvoeden worden dus niet noodzakelijk vertaald in overeenkomstige gedragingen in de opvoeding. Hoewel sterke overeenkomsten tussen opvattingen over sensitiviteit zijn gevonden tussen verschillende culturele groepen in Nederland (Emmen et al., 2012) vertonen etnische minderheden vaak minder sensitief opvoeding vergeleken met opvoeders afkomstig uit de meerderheidsgroep (Mesman et al., 2012). Dit roept de vraag op of in verschillende culturele groepen opvattingen over sensitiviteit en daadwerkelijk sensitieve opvoeding aan elkaar gerelateerd zijn. In het tweede onderzoek in dit proefschrift (Hoofdstuk 3) is de relatie tussen opvattingen over sensitiviteit en werkelijk sensitief gedrag onderzocht bij Turkse en Nederlandse moeders in Nederland.

Deelnemers aan dit onderzoek waren 60 moeders met minstens één kind tussen de 2 en 5 jaar oud bij wie de MBQS is afgenomen voor het meten van opvattingen over sensitiviteit (zie Hoofdstuk 2). Werkelijk sensitief gedrag van moeders werd geobserveerd in een vrij spel situatie van moeder en kind. Deze observaties werden gecodeerd met de Emotional Availability Scales (EA Scales; Biringen, 2008).

In zowel de Turkse als de Nederlandse groep in Nederland vonden we geen relatie tussen opvattingen over sensitiviteit en geobserveerd sensitief gedrag. Het beeld over de ideale moeder kwam in beide groepen sterk overeen met het concept van de zeer sensitieve moeder. Dit laat zien dat sensitieve opvoeding in beide groepen als belangrijk wordt gezien. De opvattingen van de Nederlandse moeders kwamen wel wat meer overeen met het concept van de ideale moeder vergeleken met de opvattingen van de Turkse moeders. Gedragingen

van Nederlandse moeders werden als sensitiever beoordeeld dan die van Turkse moeders, hoewel in beide groepen een hoge mate van sensitiviteit werd geobserveerd. Sociaaleconomische variabelen (inkomen en opleiding) waren niet gerelateerd aan opvattingen en gedrag en bleken de relatie tussen die laatste twee niet te modereren.

De resultaten ondersteunen de cross-culturele toepasbaarheid van het construct sensitiviteit, door de overeenkomsten wat betreft opvattingen over sensitiviteit tussen de groepen en de hoge scores op werkelijk sensitief gedrag in beide groepen. Een mogelijke verklaring voor het ontbreken van een relatie tussen opvattingen over sensitiviteit en werkelijk sensitief gedrag is dat sensitiviteit een abstract construct met een subtiele onderliggende realiteit is. Het is dan lastig bewust controle uit te oefenen over de specifieke invulling ervan en daarvan achteraf ook adequaat rekenschap te geven. Daarnaast verwijzen verschillende aspecten van sensitiviteit naar intuïtieve gedragingen, zoals teruglachen wanneer een kind lacht, of het nadoen van babygeluiden (zie Braungart-Rieker, Garwood, Powers, & Wang, 2001). Deze gedragingen worden vaak niet bewust toegepast. De bevinding dat opvattingen over sensitiviteit niet samenhangen met werkelijk sensitief gedrag roept vragen op over voorspellers van discrepanties tussen attitudes en gedrag van ouders. Het is daarom van belang in onderzoek beiden te meten om aanwijzingen te krijgen voor de manier waarop deze discrepanties verkleind kunnen worden, zodat sensitieve idealen worden omgezet in sensitieve daden.

De rol van etnische en religieuze socialisatie in sensitief opvoeden

Tweede generatie immigranten identificeren zich vaak meer met de cultuur van hun ouders dan de cultuur van de etnische meerderheidsgroep (Phinney, Horenczyk, Liebkind, & Vedder, 2001). Dit geldt ook voor de Turkse groep in Nederland (Forum, 2012). Etnische achtergrond en religieuze achtergrond blijken aan elkaar gerelateerd te zijn; van de Turken in Nederland wordt geschat dat het grootste deel (87%) Moslim is (Forum, 2012). Etnische identiteit en religieuze identiteit worden in de opvoeding overgedragen door respectievelijk etnische en religieuze socialisatie. Moeders met een sterkere etnische identificatie blijken meer warmte te tonen in de opvoeding (Caldwell, Zimmerman, Bernat, Sellers, & Notaro, 2002). Moeders die meer etnische socialisatie rapporteren, blijken meer positief en betrokken als opvoeders (Frabutt, Walker, & MacKinnon-Lewis, 2002). Wat betreft de relatie tussen religie en opvoeding toont onderzoek aan dat religieuze identiteit en socialisatie gerelateerd zijn aan meer positief opvoeden (Gunnore, Hetherington, & Reiss, 1999; Vermeer, 2011). Echter, andere studies vinden dat religieuze socialisatie juist gerelateerd is aan minder positief opvoeden (Socolar, Cabinum-Foeller, & Sinal, 2008). Met onderzoek gericht op etniciteit en religie in relatie tot sensitief opvoeden verkrijgen we informatie over het belang van etnische en religieuze achtergrond voor opvoeden en weten we of daarmee rekening gehouden dient te worden in opvoedingsinterventies. In het derde onderzoek (Hoofdstuk 4) in dit proefschrift stond de volgende vraag centraal: Zijn etnische en religieuze identiteit en etnische en religieuze socialisatie van Turkse minderheden in Nederland gerelateerd aan

sensitiviteit van moeders?

Zeventig Turkse moeders in Nederland met een kind tussen de 2 en 4 jaar hebben deelgenomen aan dit onderzoek. Sensitiviteit van moeders werd geobserveerd in een vrij spel- en een taaksituatie. Deze observaties werden gecodeerd met de Emotional Availability Scales (EA Scales; Biringen, 2008). Etnische en religieuze identiteit en etnische en religieuze socialisatie werden gemeten aan de hand van vragenlijsten. Daarnaast werd ook Islamitische socialisatie meegenomen in de vragenlijsten. Terwijl met religieuze socialisatie het algemene belang dat aan religie wordt gehecht in de opvoeding werd gemeten, ging het bij Islamitische socialisatie om specifieke aspecten van de Islam die ouders belangrijk vinden in de opvoeding.

Uit de resultaten kwam naar voren dat moeders die meer Islamitische socialisatie rapporteerden, minder sensitiviteit vertoonden. De manier waarop Islamitische socialisatie is gemeten in dit onderzoek verwijst naar letterlijke interpretaties van geloof. Deze letterlijke interpretaties lijken een meer rigide aanpak van opvoeding te weerspiegelen die niet altijd verenigbaar lijkt te zijn met sensitiviteit. Algemene religieuze socialisatie daarentegen verwijst in dit onderzoek naar symbolische interpretaties van geloof en die staan sensitief opvoeden blijkbaar niet in de weg. Etnische identiteit en etnische socialisatie waren niet gerelateerd aan geobserveerde sensitiviteit. Religie staat wellicht meer centraal in de identiteit van Turkse minderheden in Nederland dan etniciteit. Hierdoor zou in dagelijkse opvoedsituaties religieuze socialisatie een belangrijkere rol kunnen spelen dan etnische socialisatie. Hoewel een negatieve relatie is gevonden tussen Islamitische socialisatie en sensitiviteit, betekent dit niet dat de Islam onverenigbaar is met sensitiviteit, aangezien in de Koran, hadiths (adviezen) van de profeet Mohammed en het leven van de profeet Mohammed sensitief opvoeden juist wordt aangemoedigd.

De resultaten van dit onderzoek laten het belang zien van onderzoek naar verschillende aspecten van etniciteit en religie om de relatie met kwaliteit van opvoeden te kunnen begrijpen. Religieuze socialisatie is een onderbelicht facet van de opvoeding dat in toekomstig onderzoek veel meer aandacht verdient. Het is daarbij vooral belangrijk om in onderzoek naar religie een onderscheid te maken tussen letterlijke versus symbolische interpretaties van geloof.

Conclusie

Samenvattend geeft dit proefschrift de toepasbaarheid van het construct sensitiviteit in verschillende culturen aan. Dat sensitieve opvoeding als ideaal wordt gezien en wordt geobserveerd in verschillende etnische groepen toont aan dat interventies gericht op het verhogen van sensitiviteit van ouders succesvol toegepast zouden kunnen worden in gezinnen uit verschillende etnische groepen, in ieder geval in gezinnen met een Turkse achtergrond. Daartoe is een eerste stap gezet met de Video-feedback Intervention to promote Positive Parenting-Turkish Minorities (VIPP-TM; Yagmur, Mesman, Malda, Bakermans-Kranenburg, & Ekmekci, 2014), een aangepaste versie van de Video-feedback Intervention

to promote Positive Parenting and Sensitive Discipline (VIPP-SD; Van Zeijl et al., 2006). In recent onderzoek naar de effectiviteit van de VIPP-TM is aangetoond dat deze interventie effectief is in het verhogen van de sensitiviteit van Turkse moeders (Yagmur et al., 2014). Aangezien dit onderzoek werd uitgevoerd bij moeders met kinderen met externaliserend probleemgedrag, is het van belang om de effectiviteit van deze interventie ook te onderzoeken in andere risicogroepen. Hierbij kan onder meer gedacht worden aan een Turkse minderheidsgroep met een lage sociaaleconomische status, of een hoge mate van acculturatiestress.

De cognitieve match tussen moeders en Jeugdzorg-professionals uit verschillende etnische groepen op het gebied van opvattingen over sensitiviteit is van belang voor wetenschappers en professionals die werken met minderheidsfamilies. Om ouders te kunnen helpen, is het belangrijk om te weten wat ze willen bereiken (opvattingen over (sensitief) opvoeden) en om met observaties werkelijk (sensitieve) opvoeding in kaart te brengen. In dit proefschrift hingen opvattingen over sensitiviteit en werkelijk sensitief opvoeden van Turkse en Nederlandse moeders niet met elkaar samen. Vervolgonderzoek is nodig om in kaart te brengen wat de oorzaken zijn van de kloof tussen wat ouders ideaal vinden en wat ze feitelijk in de opvoeding doen. Daarnaast is het belangrijk in vervolgonderzoek factoren specifiek voor minderheden, zoals etniciteit en religie, op verschillende manieren te meten zodat de precieze relatie met (sensitief) opvoeden achterhaald kan worden.

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Curriculum Vitae

Hatice Ekmekci - Baydar werd geboren op 15 januari 1988 in Eindhoven. Zij behaalde in 2005 haar HAVO-diploma aan het Pleincollege Eckart te Eindhoven en begon daarna aan de opleiding Personeel & Arbeid aan de Fontys Hogescholen te Eindhoven. Na het behalen van haar propedeuse begon ze in 2006 aan de opleiding Psychologie aan de Universiteit van Tilburg. In 2010 is zij afgestudeerd als Kinder- en Jeugdpsycholoog. Tijdens haar mastertraject liep Hatice stage bij de Geestelijke Gezondheidszorg Eindhoven (GGzE) en behaalde daarbij haar basisantekening diagnostiek. Van 2010 tot en met 2014 werkte Hatice als promovenda op de afdeling Algemene en Gezinspedagogiek van de Universiteit Leiden. Zij heeft in deze periode onderzoek gedaan naar opvattingen over ouderschap en ouderschap in gezinnen met een Turkse en Nederlandse achtergrond in Nederland. De resultaten van haar onderzoek zijn beschreven in dit proefschrift. Naast haar werkzaamheden als promovenda heeft Hatice ook meegewerkt aan onderzoek naar de effectiviteit van de Video-feedback Intervention to promote Positive Parenting and Sensitive Discipline (VIPP-SD) in Turkse gezinnen in Nederland en heeft ze onderwijs gegeven in de bacheloropleiding Pedagogische Wetenschappen. Hatice is getraind in het uitvoeren van de VIPP-SD en het coderen van moeder-kind interacties.

Lijst van publicaties (List of publications)

Ekmekci, H., Yavuz-Muren, M., Emmen R. A. G., Mesman, J., Van IJzendoorn, M. H., Yagmurlu, B.,... & Malda, M. (in press). Professionals' and mothers' beliefs about maternal sensitivity across cultures: Toward effective interventions in the multicultural society. *Journal of Child and Family Studies*. doi: 10.1007/s10826-014-9937-0

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