

## Cross-Cultural Differences in Attitudes Towards Persons with Disabilities: A Study of Jewish and Arab Young Adults in Israel

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### Abstract

This study investigates attitudes towards people with disabilities (PWD) among Jewish and Arab students in Israel, exploring the nuanced interplay of cultural influences. Negative attitudes, and discrimination, as manifested in ableism, are contextualized within the multifaceted Israeli society. As the Arab population comprises a marginalized minority within this multicultural context, attitudes towards PWD reflect a complex interplay of traditionalist underpinnings and exposure to Western values. The current study aims to bridge gaps in understanding cross-cultural attitudes, applying quantitative and qualitative methods. Utilizing the Multidimensional Attitudes Scale, significant differences emerge between Jewish and Arab participants, with Arabs exhibiting more positive affective and behavioral attitudes. Qualitative analysis further reveals themes of the value of respect and the fear of divine retribution within Arab perspectives. The study challenges assumptions about traditional societies holding more negative attitudes towards PWD, highlighting cultural nuances that shape attitudes differently than expected. The focus group discussions provide insights into the role of religion and respect in Arab attitudes, suggesting a need for content validation of attitude measurement scales within the Arab population. Overall, this study contributes to the discourse on cross-cultural attitudes towards PWD, offering implications for legislative interventions and educational policies.

**Keywords:** Cultural differences, Arabs, Jews, Attitudes, Persons with Disabilities (PWD), Religion, Ableism.

### Introduction

#### Attitudes in a Cultural Context

Attitudes are defined as people's overall assessments of objects and other people, including themselves [1]. The classic model for evaluating attitudes maintains that they can be examined using a multidimensional perspective comprising three aspects: cognitive, affective, and behavioral. The cognitive aspect refers to the information and knowledge a person has about an object, such as beliefs, perceptions, and opinions. The affective aspect concerns the emotional reference that develops toward an object. Finally, the behavioral aspect includes the reactions generated as a result of the beliefs and emotions toward the object [2]. Each of these aspects can be positive or negative, overt and controlled by the person, or covert and automatic. Sometimes, gaps between the overt and covert layers of attitudes can be identified, as can gaps within the three aspects of attitude, that can create ambivalence in the perception of the attitude [3].

A person's sociocultural environment is important in shaping attitudes towards people with disabilities (PWD), and in forming the individual's perceptions and attitudes. Culture can be defined as a set of values, ideas, patterns of behavior, and material objects that are shared by all members of a particular society and transmitted through a social learning process to the next generation [4]. Attitudes towards marginalized social groups are formed from accepted cultural norms that pass from generation to generation. These attitudes may weaken or strengthen, depending on the knowledge of the opinion holder about that group, and according to their acquaintance with its members [5].

In particular, attitudes towards PWD are, among other things, a product of cultural norms that shape negative attitudes towards this population. As manifested in the social model to disability [6], these include the perception of the whole body as "beautiful", the stress on productivity and achievement, the perception of disability as a contagious disease, and the perception of the person with a disability as an exception, and often even as "bad" and dangerous [7]. Negative attitudes towards PWD are reflected in discrimination based on ableism. The ableist view perceives PWD as inferior to people without disabilities in coping with life's challenges [8-10].

Different ethnic and cultural groups also differ in attitudes towards PWD. Scior et al. (2013) [11] found cross-cultural differences in stigmatizing perceptions towards PWD, including negative attitudes and higher stigma among minorities living in the UK (Hispanics and Africans) compared to the attitudes of the White majority group. Benomir et al. (2016) [12] reported similar findings in a comparative study where it was found that participants from Libya expressed more negative attitudes towards PWD than did participants from the UK.

These cross-cultural attitudinal differences may be explained with reference to the difference in the perception of religion and its centrality. In the past, there has been mixed evidence regarding the attitudes of religious individuals towards PWD. According to some studies, religious affiliation is associated with more favorable attitudes toward persons with disabilities. For example, it was found that female students attending religious colleges in Israel expressed greater support for integrating PWD into mainstream educational settings than did students at secular colleges [13]. A more recent study found

higher levels of self-efficacy in relation to working with PWD among female students attending a religious college [14]. However, positive attitudes toward PWDs are not necessarily correlated with religious affiliation. According to an Israeli study by Weisel and Zaidan (2003) [15], religious high-school students supported the isolation of PWD while also describing their characteristics as extremely positive. Paternalistic and positively prejudiced stereotypes might explain these apparently conflicting tendencies.

### **Attitudes toward People with Disabilities in the Israeli Multicultural Context**

Israeli society is defined as a multicultural society, which incorporates a variety of ethnonational and religious identities [16]. According to the Central Bureau of Statistics (2020) [17], 74% of Israel's population are Jews, about 21% Arabs, and 5% others. The Arab population consists of a Muslim majority (85.1%), the remainder being Druze (7.6%) and Christians (7.3%). Arab society is integrated into many areas of life in the State of Israel from a political, economic and social perspective.

Nevertheless, despite holding nominal citizenship, Arabs in Israel find themselves relegated to the status of a marginalized minority group, subject to discrimination on multiple fronts. This discrimination is pervasive, occurring at both the structural, state level, and through informal means. The repercussions of such discrimination manifest in various aspects of Arab life in Israel, including employment and housing. Predominantly situated in the working and poor strata, Arabs in Israel face low educational achievements among their children, inadequate municipal services, housing shortages, and a lack of personal safety due to the prevalence of crime and violence in their communities [18].

### **PWD in Arab Society**

The societal fabric of Arab communities in Israel exhibits a complex interplay between traditionalist underpinnings and exposure to Western and secular values. Rooted in a traditional and patriarchal structure, Arab society adheres to a stringent social hierarchy and a prevailing ethos of conformity. Central to this societal configuration is the paramount role assigned to the nuclear and extended family, that serves not only as the primary source of socioeconomic stability, but also assumes a pivotal position in providing emotional support, thereby engendering a tightly woven network of interrelated relationships [19,20]. Concurrently, Arab society in Israel undergoes a dynamic evolution as it grapples with the influences of Western and secular values. This exposure introduces a layer of complexity, wherein individuals navigate the delicate balance between cultural preservation and the assimilation of progressive ideologies. The dual identity within Arab communities becomes discernible as they negotiate the coexistence of deeply ingrained traditions with the allure of a globalized and interconnected world.

This intricate dialectic between tradition and exposure to external values contributes substantively to the multifaceted nature of Arab identity in Israel. The individuals within these communities often find themselves situated at the confluence of cultural preservation and adaptation to evolving societal norms. The persistent influence of traditional and patriarchal elements remains foundational, affording a sense of continuity and communal belonging. Simultaneously, the encounter with Western and secular values introduces a nuanced dimension of diversity and adaptive responses within the intricate tapestry of

Arab society in Israel, thus rendering its sociocultural landscape notably intricate.

Out of about two million inhabitants, Arab society in Israel includes more than 400,000 PWD who, in addition to being members of a marginalized if not oppressed minority, are subjected to prejudices, stigmas and exclusion by their own group [21]. The intersectionality of being an Arab in Israel and a person with a disability unveils a layered narrative that intertwines cultural, social, and physical dimensions. Individuals at this intersection grapple with the unique challenges posed by their Arab identity within the Israeli context, while simultaneously navigating the complexities of disability [19]. These perceptions are characterized by a paternalistic approach, which views PWD as a burden on society that is unable to live independently, work, create a family, and integrate in society in other respects. Additional characteristics that have been found to be related to the exclusion of people with disabilities in Arab society are low socioeconomic status and living in remote rural areas that often lack proper infrastructure and accessible medical and welfare services [19,21]. In his article, "The Twice Beaten" (2011) [19], Abbas claims that people with disabilities in the Arab society in Israel are subject to discriminatory treatment and are excluded twice: once due to belonging to a minority group, and a second time due to belonging to a society with cultural norms identified with negative stigmas towards people with disabilities, causing PWD and sometimes even their family members to suffer from social isolation, disdain and alienation. Conversely, the family of Arab PWD in Israel is a significant resource and anchor in their life and often treats the disabled family member with respect [22].

During the last decades, Arab society in Israel has undergone parallel processes, reflecting both secularization and religious radicalization. On one hand, there has been a discernible trend toward secularization, marked by a shift in societal values and practices away from traditional religious norms [23]. This trend has created a generation gap, leading to structural changes in Arab society [24]. They are felt, for example, in the ever-increasing integration into higher education [24]. On the other hand, there has been a simultaneous surge in religious radicalization, with some segments of the Arab population embracing more conservative and fundamentalist interpretations of Islam. This religious fervor is manifested in heightened religious activism, stricter adherence to traditional values, and an increased influence of religious authorities in certain spheres of society. These dual trajectories reflect the complex dynamics within Arab communities in Israel, highlighting the coexistence and tension between secular and religious forces shaping the societal landscape [23].

These changes also affect a change in the attitudes of Arab society towards PWD, manifested in the emergence of a discourse based on the values of integration and inclusion [20]. In addition, the influence of the social model is evident among researchers from Arab society who focus on the social inclusion of PWD, and especially attitudes of parents and employers towards the integration of people with intellectual-developmental disabilities in the labor market [26], and teachers' attitudes towards integrating students with disabilities in mainstream education [27].

### **PWD in Jewish Society**

Even more than Arab society with its multiple religions and concurrent secularization-religionization trends, the Jewish

population in Israel is considered to be extremely diverse. Different groups in this population differ from each other in multiple characteristics such as their sectarian origin, their religious affiliation, their political views, their native-vs.-immigrant status, and more [28]. As the main social difference among Jews has to do with religiosity, and since it is more or less correlated with political views as well as socioeconomic status, the main division is between secular, traditional, national-religious and ultra-Orthodox Jews [29,30]. According to the Central Bureau of Statistics (2022) [17], 45% of Israel's Jews self-identified as secular, about 25% as traditional, about 16% as religious, and 14% as ultra-Orthodox. These definitions are considered to be "key concepts" of Israeli society but are used inconsistently and have multiple meanings among Israeli Jews. Therefore, today it is customary to treat these concepts as a broad scale that represents a spectrum of identities, allowing each person to be placed according to the appropriate place for them [30].

A survey conducted in Jewish cities by the Ministry of Justice (2020) examined cognitive, affective, and behavioral attitudes towards people with disabilities. The results pointed to positive cognitive attitudes that were manifested in low negative stereotypes. Most survey participants believed that people with disabilities were a heterogeneous group, an opinion reflecting a positive attitude. Affectively, more positive feelings were reported, mainly empathy. On the behavioral level, willingness to form personal relationships with PWD was reported.

Along with these encouraging data, there are still many barriers facing people with disabilities in Israel, preventing them from fully participating in the various areas of life. A recent survey conducted among PWD [31], highlighted the barriers experienced from the point of view of PWD, such as stigmas that still exist among professionals, family members and the general public, which affects the ability to integrate in the labor market, thus creating another major barrier. In addition, the survey reveals bureaucratic barriers in rights take-up [32].

### The Current Study

Although Arab society has experienced significant transformations in recent decades, no recent studies have examined the effect of those changes on attitudes toward PWD.

So far, only a few studies focused on comparison between the attitudes of Arabs and Jews towards people with disabilities. Most of these studies were conducted in the 1980s and pointed towards more positive attitudes of the Jewish population regarding PWD. However, they do not reflect recent social changes in the Israeli society [33]. Attitudes play a critical role in the allocation of resources, the provision of services, and the implementation of educational policies. Understanding these cross-cultural differences is important and can allow legislators to devise methods to change negative attitudes, promote integration, and eliminate discrimination [4]. Accordingly, the purpose of our study is to examine differences between Jewish and Arab students in Israel, and to gain a better understanding of their three dimensions: affective, cognitive and behavioral in this complex cross-cultural context. The research assumption was that the Jewish participants will present more positive attitudes towards PWD than the Arab participants.

This research was carried out by combining two quantitative and qualitative method. Using a quantitative method alongside a qualitative method makes it possible to expand the knowledge

of the phenomenon in question and deepen its understanding. The advantages of each approach are reflected, and they complement each other [34]. Using the quantitative research method makes it possible to confirm the existence of cultural differences in attitudes, and using the qualitative research method makes it possible to examine the nuances of these differences. We first administered quantitative questionnaires and then conducted two focus groups. Using this type of procedure, in which quantitative data are collected and analyzed, followed by the collection and analysis of qualitative information in light of the quantitative findings, made it possible to deepen the explanation of the cultural differences found.

### Method

#### Participants

The researchers approached first-year undergraduate students who studied in a program in education and social studies. The inclusion criteria were men and women of various ages and cultural backgrounds – Jews and Arabs. The exclusion criterion was former studies related to PWD. Out of a pool of approximately 950 students, 673 students participated in the study, 468 (69.5%) were Jewish and 205 (30.5%) were Arab. Among Arab students, the vast majority were Muslim (97%), and 3% were Christian. The students' average age was approximately 30 years, with a range spanning from 18 to 66 years old ( $M = 30.51$ ,  $SD = 10.01$ ). The considerable age range can be attributed to the inclusion of evening programs designed specifically for adult learners. Most of the participants were women (64.6%). Around one-fifth (22.1%) reported having a disability, most frequently ADHD ( $n = 114$ ).

The relationship between the demographic variables and culture was analyzed using Chi-square tests for gender and disability, and one-way MANOVA for age. For gender, the test showed no significant differences between Jews and Arabs,  $\chi^2(1, N = 673) = .377$ ,  $p = .539$ . However, significant differences were found between students with and without disabilities,  $\chi^2(1, N = 673) = 53.877$ ,  $p < .001$ . More Jewish participants reported a documented disability ( $n = 140$ , 29.91%) than did Arab participants ( $n = 9$ , .04%). Significant differences were also found between Jewish and Arab participants' age. Jewish participants exhibited a significantly higher age profile, primarily attributed to the mandatory military service in the Israel Defense Forces (IDF) that they undertake immediately following high school graduation. ( $M = 32.82$ ,  $SD = 9.84$ , vs.  $M = 25.23$ ,  $SD = 8.53$ ),  $F(1,672) = 91.752$ ,  $p < .001$ ,  $\eta^2 = .120$ .

To interpret the quantitative findings, we conducted a qualitative study of two focus groups with Arab students. Each group included about 30 students. The research population of the focus groups were part of the general population that answered the questioners. Therefore, the characteristics of the focus group participants were like those of the Arab participants of the quantitative part in terms of gender, age, and disability. Therefore, most of them were women aged 18-30 and most of them described themselves as people without disabilities. We decided to focus solely on Arab students when conducting the focus groups in order for them to help us interpret the results that did not align with the research assumption.

#### Measure

The Multidimensional Attitudes Scale toward Persons with Disabilities (MAS; (Findler et al., 2007) [35] was used to measure attitudes toward PWD. The questionnaire is composed of 34 items divided into three dimensions: affect, cognition, and



behavior. In response to each item, participant need to report on a five-point Likert scale the probability that a certain feeling, thought or conduct may arise following an encounter with PWD (1 – Strongly disagree; 5 – Strongly agree). The mean of each one of the three main measures was used. Content validation was performed by Findler et al. (2007) and showed high correlations between the different aspects of the questionnaire: affect and behavior ( $r = .41, p < .001$ ), cognition and behavior ( $r = .35, p < .001$ ), and affect and cognition ( $r = .23, p < .01$ ).

The current study used the Hebrew version used by Findler et al. (2007) [35], and an Arabic translation performed by a third party and reviewed by two of the researchers – an Arab native speaker and a Hebrew native speaker who discussed the cultural nuances reflected in the translation. In the current research, Cronbach's alpha measures were high in the Hebrew version: affect ( $\alpha = .902$ ), cognition ( $\alpha = .895$ ), and behavior ( $\alpha = .864$ ), as well as in the Arabic version: affect ( $\alpha = .851$ ), cognition ( $\alpha = .886$ ), and behavior ( $\alpha = .807$ ).

## Procedure

The study was conducted in the faculty of education of [blinded for review]. Ethical approval was granted by the institutional ethics committee (Approval no. 202137). The researchers collected data during the first and second semester of an academic year. The questionnaire was sent to the students as an attachment and was completed online. The nature of the study was explained to each of the participants, they were given the opportunity to choose whether to participate in it or not, and they were assured of their privacy. All study participants gave their consent to participate. The focus groups sessions were held via Zoom, for convenience reasons, recorded, and then transcribed.

## Data Analysis

### Quantitative Section

We analyzed the differences between the Jewish and Arab participants' attitudes toward PWD using a one-way MANOVA. For further analysis, we used the two-way MANCOVA test to reveal possible associations between attitudes toward PWD and other demographic factors: age, gender and disability status. To examine the interaction between men and women, we used one-way ANCOVA tests.

### Qualitative Section

The information obtained from the focus group was utilized to analyze the data by establishing categories aligned with the research question, specifically addressing the reactions of Arab students to the questionnaire story involving a person with a physical disability. The analysis involved employing open, axial, and selective coding methods following Charmaz's approach (2008) to interpret the data and formulate relevant categories that encapsulate the perspectives of the Arab students.

## Results

### Quantitative Section

The differences between the Jewish and Arab participants' attitudes toward PWD were analyzed using a one-way MANOVA. The tests showed significant differences between Jewish and Arab participants' attitudes toward PWD,  $F(3,669) = 95.56, p < .001, \eta^2 = .300$ . Arab participants showed more positive attitudes toward PWD than did Jewish participants in the affective aspect and behavioral aspect. No differences were found in the cognitive aspect (see Table 1).

**Table 1:** Means, Standard Deviations, and One-Way ANOVAS of Attitudes toward PWD by Jewish and Arab participants.

Attitudes	Cultures	<i>n</i>	<i>M</i> ( <i>SD</i> )	<i>F</i> (1.672)	$\eta^2$
Affective	Jewish	468	2.75 (1.01)	216.44	.294***
	Arab	205	3.89 (.69)		
Cognitive	Jewish	468	3.85 (.71)	1.71	.003
	Arab	205	3.77 (.70)		
Behavioral	Jewish	468	2.42 (1.46)	278.93	.294***
	Arab	205	4.22 (.77)		

Further analyses were made in order to reveal possible associations between attitudes toward PWD and other demographic factors: age, gender and disability. The differences between the Jewish and Arab, male and female, in participants' attitudes toward PWD, controlling for age, were analyzed using a two-way MANCOVA test (see Table 2). The test showed significant differences in attitudes toward PWD between Jews and Arabs,  $F(3,666) = 70.48, p < .001, \eta^2 = .241$ , and between men and women,  $F(3,666) = 3.28, p = .021, \eta^2 = .015$ . Post-hoc ANCOVA tests showed that Arabs had more positive affective ( $F(1,668) = 156.67, p < .001, \eta^2 = .190$ ) and behavioral ( $F(1,668) = 207.18, p < .001, \eta^2 = .237$ ) attitudes toward PWDs than did Jews, and that men had more positive affective ( $F(1,668) = 4.00, p = .046, \eta^2 = .006$ ) and behavioral ( $F(1,668) = 6.02, p = .014, \eta^2 = .009$ ) attitudes toward PWD than did females.

The interaction effect between culture and gender was also significant,  $F(3,666) = 14.24, p < .001, \eta^2 = .060$ . Post-hoc two-way ANCOVA tests showed a significant interaction between culture and gender in the affective aspect ( $F(1,668) = 31.32, p < .001, \eta^2 = .045$ ), and in the behavioral aspect ( $F(1,668) = 39.95, p < .001, \eta^2 = .056$ ). To examine the interaction, a one-way ANCOVA was conducted to test the differences between men and women's affective and behavioral attitudes toward PWDs, controlling for age, separately for Jews and Arabs. Among Jews, men have more positive affective and behavioral attitudes toward PWD than do females, and among Arabs, women have more positive affective and behavioral attitudes toward PWD than do men. No differences or interactions were found in the cognitive aspect.

In conclusion, Arab participants showed more positive attitudes toward PWD in both the affective and behavioral aspects, compared to Jewish participants. No differences were found in the cognitive aspect. The results of post-hoc tests showed that Arabs tended to have a more positive attitude toward PWD than

did Jews, and men tended to have a more positive attitude toward PWD than did women. Among the Jewish participants, men tended to have more positive attitudes toward PWD than did women, while among the Arab participants, the opposite was true.

**Table 2:** Differences between Jews and Arabs, Men and Women, in Attitudes toward PWD, Controlling for Age.

Attitudes	Culture	Gender	<i>n</i>	<i>M</i>	<i>SD</i>
Affective	Jewish	Male	162	3.14	1.04
		Female	306	2.54	0.92
	Arab	Male	76	3.70	0.73
		Female	129	4.00	0.65
Cognitive	Jewish	Male	162	3.85	0.70
		Female	306	3.85	0.71
	Arab	Male	76	3.62	0.70
		Female	129	3.86	0.69
Behavioral	Jewish	Male	162	3.05	1.57
		Female	306	2.08	1.27
	Arab	Male	76	3.94	0.91
		Female	129	4.38	0.62

## Qualitative Section

The analysis of the qualitative data in this study indicated two central themes: the value of respect and the fear of divine retribution.

### The Value of Respect

Several participants from both focus groups referred to the questions asked in the questionnaire as relating to respectable behavior. The interpretation they gave to the behavioral part of the questionnaire reflected in their opinion the degree of respect they felt towards the person described in the questionnaire. For example, Mahmoud said, “When I answered the questions, I felt that I wanted to behave respectfully towards this person. It is important to me to treat everyone with respect” (Man in his 40s).

Some participants referred to the gender of the person described in the questionnaire. Amal claimed that the fact that it was a man created a certain distance between them: “Maybe if it was a woman, I would actually approach her and give her a hand. Because it's a man I won't really go near him. It is important to me to behave respectfully” (Woman in her 20s).

In addition, many participants claimed that the Koran teaches that one must behave with respect towards every person, regardless of who they are: “According to the Koran, you should respect every person and help every person. I always try to act accordingly” (Lila, woman in her 30s).

### Fear of Divine Retribution

Many participants referred to their religious commitment and how this commitment affected their behavior. Some described

fear of divine punishment that might follow inappropriate behavior or even thoughts towards people with disabilities: God asked us to act mercifully. If I treat people with disabilities badly, I might be punished and precisely because of my negative feelings I might have a disabled child” (Miriam. Woman in her 30s). I don't want God to punish me. That's why it's important to behave decently (Tamar. Woman in her 20s).

In addition to fearing punishment, some participants felt that Islam directed them towards certain behaviors. For example, Omar referred to the positive perceptions of Islam: “Islam is a positive, human-loving religion and we must act accordingly”. (man in his 40s). (pseudonym) described how Islam gave him guidance: “Religion helps me know how to behave with people.”

## Discussion

The results indicate a disparity in attitudes towards individuals with disabilities between Jewish and Arab young adults in Israel. Despite the common assumption that traditional societies tend to hold more negative attitudes towards persons with disabilities (PWD) [11,12], our findings were different and did not align with our initial assumption. The Jewish population represents the majority in Israel, while the Arab population represents a minority group [16,20]. The results of the Jewish group are consistent with existing literature indicating negative attitudes towards PWD in Western societies [7]. However, the Arab group reported having more positive attitudes toward PWD, in contrast to previous findings [33]. In order to fully understand and explain the attitudes towards people with disabilities found

in the Arab group, it was necessary to gain a deeper understanding by conducting qualitative analysis.

The results indicated differences in attitudes toward PWD in two aspects: affective and behavioral. In both, Arab participants reported more positive attitudes than did their Jewish counterparts. No differences were found in the cognitive aspect. This aspect of was found moderately positive in both cultural groups. Apparently, it is less sensitive to cultural differences.

The potential explanation for this discrepancy may be rooted in the inclination of Arab students towards social desirability bias. Social desirability bias is a commonly observed phenomenon in research, where participants tend to provide responses, they perceive as socially acceptable or favorable, rather than expressing their genuine opinions or experiences [36]. This bias can be particularly pronounced among minority groups due to various social, cultural, and psychological factors embedded in power dynamics [37]. Research examining social desirability responses in Jewish and Arab children in Israel revealed that, when comparing the overall sample, Arabs consistently exhibited significantly higher social desirability scores than their Jewish counterparts across all age groups [38,39].

Further explanation of these results can be provided by the focus group. In it, the Arab participants expressed fear of divine retribution which may be understood not only as a result of improper behavior, but also as a result of improper inner feelings. It seems that conformism characterizes the Arab society, and the significant role of religion [19,20] is reflected in our findings, serving as a guiding principle in the individuals' attitudes toward PWDs in the affective aspect.

When it comes to the behavioral aspect, the Arab participants of the focus group explained that the value of respect was very dominant in the Arab culture and expressed through a code of behaviors that show respect toward different people, among them PWD. These findings are consistent with Abbas's (2011) [19] statement on the respect that Arab culture has for PWD, especially family members. It seems that there are cultural differences between Arabs and Jews not only in the degree of attitudes (more or less positive) in the behavioral aspect, but also in the interpretation of the attitudes themselves, seen by the Arab group as a show of respect.

Our results indicate a potential limitation or inadequacy of the Multidimensional Attitudes Scale toward Persons with Disabilities (MAS; Findler et al., 2007) [35] when applied to the Arab population in Israel. Our qualitative findings suggest that Arab participants interpreted the affective and behavioral statements as statements that focus mostly on their religious beliefs. The distinction between religious beliefs and attitudes toward PWD is not reflected in the questionnaire. Another possibility is that, as in the case of Jews, and as in the case of any questionnaire, there is a gap between the statements and the actual behavior [40]. Further content validation of this scale is needed for the Arab group in Israel.

### Limitations and Future Directions

This study focused on cultural differences in attitudes toward PWD, using a mixture of quantitative research followed by a qualitative part. It is important to consider possible limitations that could affect the study's validity and the ability to generalize from its findings. First, our sample was taken from a single institute of higher education, which may not entirely represent

the population of young adults in Israel. Second, in our qualitative part, we did not use a mixed focus group of Jews and Arabs that could have shed light on the cultural differences in attitudes toward PWD within these two groups. Finally, the examination of attitudes to PWD exclusively without addressing other factors, such as attitudes toward inclusion, or inclusion in practice, decreased the ability to gain a full picture of the cultural differences in attitudes toward PWD.

Because of these limitations, we recommend conducting similar research with a more diverse population, including non-academics. Furthermore, we recommend conducting future research that will expand the qualitative data to additional focus groups that are also culturally heterogeneous. Finally, we recommend examining more factors that are related to attitudes toward PWDs, such as familiarity with PWD and attitudes toward social inclusion of PWDs.

### Result

Arab participants exhibited more positive attitudes towards people with disabilities than Jewish participants in both affective and behavioral aspects, while no significant differences were found in the cognitive aspect. Qualitative data analysis revealed two relevant themes: the universal value of respect and a shared concern about divine retribution.

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**Credit authorship contribution statement:** Dr. Noa Tal Alon led the conceptualization, design, and execution of the study. She took a primary role in crafting the manuscript, including writing and editing, and was responsible for collecting and analyzing the qualitative data.

Dr. Yael Sharaga Roitman played a substantial role in the writing of the article. In addition to her significant contribution to the manuscript, she took the lead in collecting and analyzing the quantitative data.

Mrs. Amital Cohen made substantial contributions to the literature review section of the article. Her extensive work in reviewing and synthesizing relevant literature greatly enriched the scholarly context of the study.

Dr. Wedad Masalha contributed by translating the questionnaires into Arabic and providing valuable insights for the literature review. Her efforts in language translation added depth to the cross-cultural aspects of the research.

Dr. Nitzan Almog played a pivotal role in forming the research team and provided oversight throughout various stages of the research. Her guidance contributed significantly to the overall success of the study.

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