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**Gender and Well-being in Iran and Egypt: An examination of the
patriarchal bargain**

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ABSTRACT

Gender relations are shaped by the sociopolitical circumstances in which people live, and so it would follow that determinants of well-being vary depending on the national context in which Muslims reside. This paper uses the patriarchal bargain framework to study the association between gender and well-being in two Islamic countries using unique representative samples: Egypt (N=3,000); Iran (N=2,532). Building from the patriarchal bargain premise that women negotiate positions of power and influence within structures of oppression, and that woman's status increases with age, we ask the following research questions: What subjective indicators of well-being are most influenced by gender? Do attitudes about gender norms vary according to gender and age? Are gender differences in well-being influenced by age and gender norms? Findings illustrate that well-being is significantly associated with gender depending on national context: being a woman is associated with higher levels of happiness and life satisfaction in Iran, but lower self-ratings of health in Egypt. Women of all ages in Egypt are less likely than men to agree with traditional dictates about the role of women; older women (50+) in Iran are more likely to agree with the same traditional dictates compared to younger women. Regression results suggest that gender and age interact with attitudes about women (gender norms) to influence well-being. Findings are discussed with attention to national and historical context.

This study builds from the conviction that understanding gender and well-being in Muslim societies must recognize that Islam as a cultural force differs within national contexts (Ahmed, 1992; Moaddel, 2006; Yount & Agree, 2004; 2005). A general demographic portrait of women in the Middle East is easily accomplished drawing from the voluminous international data sources now available, i.e., United Nations, World Bank, etc. Comparisons may be made within countries over time and between countries, to illustrate changes in key objective indicators of human development and well-being. A comprehensive analysis of how such demographic indicators predict subjective well-being will provide critical additional knowledge about Islamic societies. Social science is uniquely positioned to begin drawing links between the now well-established demographic portraits of women in Islamic countries and well-being outcomes studied in other parts of the world, including self-rated health, happiness, and life satisfaction.

Islamic cultural traditions or the inequality of power distributions between the West and the Muslim world are not enough to explain trends found within Islamic nations of the present day (Moaddel, 2005). Instead, social processes that unfold within each nation provide critical clues into the well-being of the population. Additionally, cross-national research is of pivotal importance for the development and testing of social theory. National surveys of representative samples in Egypt and Iran offer an opportunity to begin to examine cross-nationally the determinants of subjective well-being in the Middle East. Using the patriarchal bargain theoretical framework (Kandiyoti, 1988), this study

investigates the influence of two key demographic predictors (gender and age), along with value orientations involving gender norms, to explain variation in subjective well-being.

Gender and Subjective Well-being

Well-being is a highly subjective indicator, difficult to operationalize (see Tomer, 2002), yet it constitutes a core element of life-quality among individuals and groups around the world. Subjective ratings of life-quality in comparative studies using WVS data include measures of happiness and life satisfaction (Inglehart, 1997; 2000; 2003). These are single item indicators, meant to capture the affective (happiness) and cognitive (life satisfaction) dimensions of subjective well-being. Comparative analysis of prevalence levels have been presented using the WVS to demonstrate that advanced industrialized nations tend to report higher levels of subjective well-being, yet there are points of diminishing returns, that is, after a certain level of economic development, incremental increases in happiness and life satisfaction tend to level off (Inglehart, 2000). Other analyses drawing from the WVS suggest that women report higher levels of happiness than men in younger years, but during older years the relationship reverses so that it is men who report higher levels of happiness (Inglehart, 2003). Within Islamic countries, the link between gender and well-being often reference issues of equality and power (Moghadam, 2003; UNIFEM, 2004). The affective and cognitive aspects of well-being receive little attention, mostly because survey measures of these constructs have only recently become available in those

countries. Yet cultural values, particularly concerning the rights and position of women within the national context, represent a contested area of change.

Self-rated health represents a subjective measure of physical well-being. Research on gender and physical well-being in the Middle East has been limited. One exception is the work of Yount and colleagues. Focusing on older men and women, they found that women report more medical conditions than men (Yount & Agree, 2005) as well as less functional ability (Yount & Agree, 2004). Also, a comparative study of Egypt, Iran, Jordan and the United States of American reported that while those in the USA reported the highest levels of self-rated health, Iran reported on average better self-ratings of health than did those in Egypt (Ajrouch & Moaddel, 2007). In the same study, gender differences in self-rated health were present in Egypt (being a woman was associated with lower self-ratings of health), but not Iran. Generally, self-definitions of health often link to various aspects of physical health, including level of functional ability, morbidity, and mortality (Benyamini, Idler, Leventahl, & Leventhal, 2000; Idler, Hudson & Leventhal, 1999). Self-rated health constitutes a measure gathered in various studies across nations, and so it should be recognized that evaluation of one's health may differ depending on the national or cultural context (Janevic, Ajrouch, Tarnowski, Akiyama and Antonucci, 2000).

National Contexts

Muslim women living in the Middle East have diverse experiences influenced by historical developments, governmental policies, and links to the globalizing economy (see Offenhauer, 2005, for a review). Simplistic

characterizations are increasingly viewed as insufficient for understanding issues of gender relations and equality in Islamic countries (Abu-Lughod, 2002; Ahmed, 1992; Bahramitash, 2003; Keddie, 2002; Mogdahem, 2003; Olmstead, 2005; Vidyasagar & Rea, 2004). Additionally, Islamic countries are likely to differ in general attitudes and values (see Moaddel, 2006). Comparative analysis within the Middle East includes a consideration of what effect institutional, legal, and normative environments exert on gender differences. This may be accomplished to some degree by considering hypothesized associations within multiple national contexts. In order to acknowledge the diversity of experiences within country, a brief background and description of each country proposed for study follows, along with a demographic/statistical presentation of women's characteristics within each nation, and highlights of the most recent social-scientific inquiries into women's position and status.

Egypt. Egypt is the most populous country in the Middle East (Millennium Development Goals, Egypt, 2004) and constitutes a secular state with a largely Sunni Muslim population. Rapid population growth in Egypt during the past decades has considerably constrained the state's ability to promote economic development and job creation. The country is marked by a very young population, who demand jobs and better living conditions, cultural fulfillment, and political inclusion. Educated individuals in Egypt are considerably critical of their governments, yet simultaneously are sympathetic to Islamic activism (Moaddel & Azadarmaki, 2002; Moaddel, 2002).

According to GenderStats (<http://devdata.worldbank.org>), in 2004 Egypt was home to 72.6 million people, 49.8% of whom were women. Women have longer life expectancies than men, living on average to age 72, while men live on average live to age 68. Women make up a total of 22% of the labor force in Egypt, and are most likely to work in the service sector, followed by agriculture and industry. In terms of educational attainment, 93% of girls have completed primary school. Women's issues constitute an active area of concern and inquiry. Women in Egypt gained many rights in the 1950s and 1960s, including unprecedented access to education and employment (El-Safty, 2004). Today, however, Egypt is currently experiencing a reactionary tide, which started in the mid 1970s, that reduces women's issues related to family and personal-status laws in order to pacify Islamist movements (Guenana & Wassaf, 1999). Liberal trends in this regard have been reversed based on (mis)interpretations of Islam. El-Safty argues that oppressive practices are strongly rooted in tradition, not religion.

Iran. Iran is primarily a Shi'i state and has a theocratic government. Rapid population growth also has occurred in Iran over the past decades, considerably constraining the state's ability to promote economic development and job creation. Iranians are dominated by a religious government, yet are less religious and more nationalistic than Egyptians (Moaddel, 2006). This difference is more pronounced among educated Iranians, as both the educated public and women appear to be at the forefront of the demand for reform (Moaddel & Azadarmaki, 2002; Moaddel, 2002).

According to GenderStats (<http://devdata.worldbank.org>), in 2004 Iran was home to 67.9 million people, 49.3% of whom were women. Women have longer life expectancies than men, living on average to age 72, while men live on average to age 69. Women make up a total of 33% of the labor force in Iran, though no data were available to describe industries in which women predominate. In terms of educational attainment, 97% of girls have completed primary school. A recent study (Bahramitash, 2003) illustrates that women's workforce participation has increased dramatically over the last decade, and indeed is at levels higher than was true in the 1960s and 1970s when there was no theocracy and Iran was governed by the Shah under a pro-Western doctrine. Bahramitash argues that such trends challenge the view that religion alone explains women's economic status in Muslim countries. The evidence from Iran indicates forces of international political economy may hold more influence on women's workforce participation than religious doctrine.

The experiences of women living in Egypt and Iran are similar in some respects, i.e., both have family laws based on religious doctrine (Mogdaghem, 2003) yet are also quite diverse. Keddie (2002) argues that while Egypt has had the longest, strongest, and most varied women's movement in all of the Middle East, it has lagged behind other countries in the region with regard to successfully influencing the alteration of legal codes directed at women. In Iran, on the other hand, legal changes in women's status have been more forthcoming, even with strong clerical rulers. Nevertheless, Egypt has been more

successful than others at instituting social reforms in the areas of health, education, family, and a woman's paid work.

Patriarchal Bargain

The concept patriarchal bargain (Kandiyoti, 1988, p. 275) provides a framework for considering the "intimate inner working of culturally and historically distinct arrangements between the genders." Middle Eastern women's traditional source of power has emanated from their role in family relations (Aswad, 1997; Kandiyoti, 1988; Nelson, 1974). Women's decision-making power within the family and household is considered highly influential (Yount & Agree, 2004, 2005). It may be that specific norms and values are the source of women's well-being, or provide a resource to influence how other status markers, such as age, influence well-being. For example, in her articulation of "patriarchal connectivity," Suad Joseph (1993) discusses Middle Eastern women's subjugation to men's authority as part of ensuring stable family kinship systems. As a result, women sacrifice their own goals in support of male family members' aspirations and desires. Considered a cultural norm, women's well-being may be enhanced if they accept such norms, or threatened when women challenge these norms. Contrary to archetypal articulations, which assume that women are oppressed without any benefit from traditional gender-relation arrangements, Kandiyoti (1988) suggests that women negotiate within patriarchal structures to secure a vast array of socio-economic and psychosocial resources.

The framework is particularly useful for understanding groups or situations where religious precepts dictate social life. For instance, Ebaugh (1993)

documents how nuns in the American Catholic Church have entered, for decades, into patriarchal bargains that secure them access to resources and status within the religious organization. Related to life in the Middle East, it may be that older women benefit most from such traditional arrangements due to the advantages of connectivity and the patriarchal bargain within an Islamic socio-cultural context (Jospeh, 1993; Kandiyoti, 1988; Olmsted, 2005).

In an explicit examination of the patriarchal bargain in Egypt, Yount (2005) finds that women are advantaged over men in old age. Specifically, controlling for need (widowhood, economically dependent, worse health), women were more likely than men to live with either sons or daughters due to kin keeping activities over the life course. Moreover, higher education levels are associated with a greater likelihood of living with a daughter over a son. Yount argues that access to such aid from children, particularly to daughters in addition to the traditional arrangement of sons caring for older parents, protects older women from other hardships. In sum, women negotiate within oppressive structures to guarantee access to resources during times of need. Yet changes in family relations, emanating from rising standards of living, urbanization, and the education and employment of women outside the home each constitute potential challenges to traditional restrictions and benefits accorded to women via the patriarchal bargain. Theoretical developments have suggested that a fuller understanding of women and power relations may be garnered through systematic analysis of women's situations, particularly via comparative analysis within the Middle East

to assess gender differences, gendered needs, and gendered strategies related to well-being (Kandiyoti, 1988; Olmsted, 2005; Yount, 2005).

Research Questions

The overall goal is to examine the interplay between gender, age, and traditional values in shaping subjective well-being outcomes. By examining these associations within two national contexts, this research will contribute new information to the growing literature on gender and women's status in the Middle East. It will allow for the unique opportunity to test the degree to which the theorized pattern of relationships among the specified variables holds cross-nationally.

Drawing from the work of Yount and colleagues (2004; 2005) who have studied gender and functional well-being in the Middle East, as well as that of Inglehart (1997; 2000; 2003) and Kandiyoti (1988) (i.e. older women have better well-being than younger women), the following effects are hypothesized:

H1: Women will report poorer well-being than men.

H2: Younger men will report more traditional views than younger women, but there will be no gender differences in older years.

H3: Younger women will report lower well-being than younger men, but among those older in age the association is reversed where men will report lower well-being than women.

H4: Older women who adhere to traditional views will report better well-being than younger women who adhere to traditional views.

This paper explores whether these hypotheses hold true for both Egypt and Iran, or whether patterns in well-being differ within each country.

Samples

The data for this study are drawn from national values surveys carried out in Egypt and Iran, during 2000-2003 (Mansoor Moaddel, PI), now publicly accessible data sets. The surveys in each country include identical questions that allow for cross-national comparisons. The data are based on representative samples of the adult population of each respective country. Samples drawn from Egypt ranged in age from 16 to 73, N=3,000; from Iran the age range of the sample was 15 to 97, N=2,532. The original version of the questionnaire was formatted in English and translated into Persian and Arabic; the survey was then back-translated from Persian and Arabic into English by translators who had not seen the original English version and compared with the original survey item by item in order to ensure reliability. Finally, it should be noted that the World Values Survey administered in Islamic nations were designed with the intent of subjecting those societies to tests against unified models of universal hypotheses and deductive explanations. Due to the concern with the meaning of measures across national contexts, (Gauthier, 2002; Yount & Agree, 2005), all analyses will be conducted separately by country.

Measures

Well-Being

Self-rated health is measured by asking the respondent, "All in all, how would you describe your state of health these days? Would you say it is Very

Good, Good, Fair, Poor.” Coding was reversed so that larger values indicate better health.

Happiness is measured by asking the respondent “Taking all things together, would you say you are: Very happy, Quite happy, Not very happy, Not at all happy.” Coding was reversed so that larger values indicate more happiness.

Life Satisfaction is measured by asking the respondent “All things considered, how satisfied are you with your life as a whole these days? "1" means you are completely dissatisfied on this scale, and "10" means you are completely satisfied.”

Traditional Attitudes about Women

Traditional values measured involve gender norms about women’s roles in the family and household. Three norms are examined individually. The first involves attitudes about a *working mother*; respondents were asked whether they strongly agree, agree, disagree, or strongly disagree to the following two statements: “A working mother can establish just as warm and secure a relationship with her children as a mother who does not work.” The second concerns attitudes about being a *housewife*, “Being a housewife is just as fulfilling as working for pay.” Disagreement with the first statement and agreement with the second statement indicates traditional values. Response categories were recoded for the second statement so that higher values indicate more traditional views. Additionally, respondents were asked about women’s need to have *children* with the following question: “Do you think that a woman

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has to have children in order to be fulfilled or is this not necessary?" Respondent categories included 0= Not necessary; 1=Needs children

Predictors

Gender was dummy coded where 0=male; 1=female. *Age* was collected by asking the respondent "Can you tell me your year of birth, please? 19____." Followed by the statement, "This means you are ___ __ years old."

Covariates

Education was measured by asking the responded to answer the following question: "What is highest educational level that you have attained? No formal education; Incomplete primary school; Complete primary school; Incomplete secondary school: technical/vocational type; Complete secondary school: technical/vocational type; Incomplete secondary: university-preparatory type;

Complete secondary: university-preparatory type; Some university-level education, without degree; University-level education, with degree. The functional equivalent was used in each country, and if the respondent was a student, the interviewer coded the highest level s/he expected to complete. This measure was then dummy coded so that 1=high school education or more and 0= less than a high school education.

Marital status was measured by asking the respondent: "Are you currently married, living together as married, divorced, separated, widowed, single." The variable was dummy coded so that 1= married, and all else=0.

Employed was measured by asking "Are you employed now or not? If yes: fulltime (30 hours a week or more); part time (less than 30 hours a week);

self-employed; If no paid employment: retired/pensioned; housewife not otherwise employed; student; unemployed; other. It is a dichotomized variable where 1=employed (full time, part-time, self-employed) and 0=not employed.

Analyses

In order to investigate what subjective indicators of well-being (self-rated health, happiness, and life satisfaction) are sensitive to gender, analysis of variance was conducted within each country. Next, analysis of variance was performed to examine whether gender and age influence attitudes about the following gender norms: working mother, housewife fulfillment, fulfillment from having children.

To examine whether gender differences in well-being are influenced by age and gender norms, a series of three-step hierarchical regression analyses for each gender were carried out. The well-being measure was regressed on 1) the independent variables of age, gender, marital status, and education. Education and marital status serve as control variables because past research demonstrates a relationship between these characteristics and health (Wu & Ross, 2000); 2) gender norms; and 3) the interaction of age with each gender norms variable.

Results

The distributions of the samples are shown in Tables 1, 2, and 3. Overall, the mean age for respondents in Egypt is 38, and in Iran 34. Both countries report approximately half of the sample are women. In Egypt, approximately half of the sample (49.5%) have a high school education or higher, and two-thirds

(67.6) are married. In Iran, 70 percent of the sample report a high school education or higher, and a little over half (57%) are married.

[insert Tables 1,2, and 3 about here]

An analysis by gender within each country yield critical insights. In Egypt, women make up a larger proportion of the young adults sampled, and a lower proportion of the oldest age group sampled. Compared to men, a lower proportion of women are married, and a lower proportion report a high school education or more. Approximately 16% of women report working either full-time, part-time, or are self-employed.

In Iran, women also make up a larger proportion of the young adults sampled, and a lower proportion of the oldest age group sampled. There are no significant differences between men and women with regard to the proportion who are married, or the proportion who report a high school education or more. Slightly more than one-fifth (21.5%) of women report working full-time, part-time, or are self-employed.

What subjective indicators of well-being are most influenced by gender?

Unianova results reveal that gender differences arise with regard to self-rated health in Egypt, but not in Iran. Women rate their health lower than do men in Egypt. In Iran, gender differences in well-being are found with regard to happiness and life satisfaction. Women report higher levels of happiness, and higher levels of life satisfaction than do men.

[insert Table 4 about here]

Do attitudes about gender norms vary according to gender and age?

In Egypt, clear gender differences exist. Egyptian men report higher levels of agreement with the belief that a working mother cannot develop a warm relationship with her child, as well as to agree that being a housewife is fulfilling. An age by gender interaction with regard to it being necessary for a woman to have children reveals that minimal gender differences exist in the younger and middle aged groups. Among those 55+, however, men agree more strongly with this sentiment than do women. In fact, older men are more likely than younger and middle aged men to feel this way. On the other hand, older women are less likely than younger and middle aged women to agree with this sentiment.

[insert Tables 5 and 6 about here]

In Iran, results suggest no clear gender differences in attitudes about gender norms. An interaction between age and gender is evident with regard to attitudes about a housewife role as fulfilling. In the youngest age group (15-34) men report higher levels of agreement than do women. In the oldest age groups, however, women report higher levels of agreement with this sentiment than do men. In fact, men aged 55+ report lower levels of agreement than their younger counterparts. There are significant age differences with regard to believing it is necessary for a woman to have children. Older Iranians report that it is necessary in higher proportions than do younger Iranians.

Are gender differences in well-being influenced by age and gender norms?

In the examination of self-rated health in Egypt, a clear interaction between age and gender norms influences health among women. Contrary to the

patriarchal bargain hypothesis, older women (55+) who subscribe to traditional gender norms have worse self-rated health than older women who do not. This pattern emerges with regard to the indicators of believing it is necessary for a woman to have a child as well as the belief that a working mother cannot establish as warm of a relationship with her child.

[insert Table 7 about here]

[insert Figures 1 and 2 about here]

In the examination of well-being in Iran, the effect is less precise. First, there was not enough variance explained in models predicting happiness. As a result, the regression models were not interpreted. In the examination of life satisfaction, the change in explained variance was not significant when interaction were added into the models. Nevertheless, a significant interaction did occur for men and women. Among men, older men (55+) with traditional beliefs about the role of a housewife reported more life satisfaction than older men who had less traditional beliefs about the role of a housewife. Among older women (55+), having more traditional beliefs about a working mother was associated with lower life satisfaction than older women who reported less traditional beliefs about working mothers, again counter to the patriarchal bargain hypothesis.

[insert Tables 8 and 9 about here]

[insert Figures 3 and 4 about here]

Discussion

The theoretical benefits of examining more than one Islamic country are manifold. Cross-national comparisons provide insight about the importance or lack of importance of the nation state by revealing which processes cross national boundaries, and which are unique to a particular nation (Kohn, 1987). Empirical analyses that test theoretical relationships cross-nationally provide a valuable opportunity to understand in more depth gender, women's status, and well-being. For instance, Yount and Agree (2004) conducted cross-national analyses, comparing women's health in Egypt and Tunisia, and found that predictors of well-being for women within these two Middle Eastern nations differ. The systematic, rigorous study of Islamic countries will provide maximum leverage for testing general propositions about social processes.

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Table 1. Overall Sample Descriptives

	Egypt N=3000		Iran N=2532	
Demographics	M	SD	M	SD
Age	38	15.1	34	15.4
% Female	48.7	.49	46.3	.50
% \leq High School	49.5	.50	70	.47
% Married	67.6	.47	57.1	.50

Table 2. Sample Descriptives by Gender—Egypt

	Men N= 1540	Women N=1460	Contingency Coefficient
Demographics	(%)	(%)	
16-34	41.6	51.4	***
35-54	39.5	37.3	
55+	19.0	11.3	
			Cramer's V
Married	70.1	64.9	**
\leq High School	52.4	46.3	***
Employed	74.0	15.9%	***

** $p \leq .01$; *** $p \leq .001$

Table 3. Sample Descriptives by Gender—Iran

	Men N= 1240	Women N= 1025	Contingency Coefficient
Demographics	(%)	(%)	
15-34	58.3	62.9	***
35-54	25.3	25.8	
55+	16.3	11.3	
			Cramer's V
Married	57.0	57.2	n.s.
\leq High School	50.1	47.8	n.s.
Employed	66.3	21.5	***

*** $p \leq .001$

Table 4. ANOVA results of gender on well-being controlling for age and education

	Men		Women	
	Mean	SD	Mean	SD
Egypt				
Self-Rated Health (1-4)	2.87	.84	2.70	.86
F=50.45***				
Iran				
Happiness (1-4)	2.69	.88	2.95	.86
F=28.17***				
Life Satisfaction (1-10)	6.18	2.44	6.60	2.36
F=3.84*				

Table 5. ANOVA results-- Gender Norms controlling for education --EGYPT

	Working Mother		Housewife Fulfilling		Children Necessary	
	Men	Women	Men	Women	Men	Women
Age Group						
15-34	2.7	2.4	3.1	2.9	.85	.88
35-54	2.8	2.4	3.1	3.0	.89	.89
55+	2.8	2.4	3.1	3.0	.95	.87
All ages	2.8	2.4	3.1	3.0	.89	.88
Gender	F=84.67***		F=8.67**			
Age						
Age x Gender					F=4.71**	

Table 6. ANOVA results-- Gender Norms controlling for education --IRAN

	Working Mother		Housewife Fulfilling		Children Necessary	
	Men	Women	Men	Women	Men	Women
Age Group						
15-34	2.2	2.3	3.2	3.0	.45	.43
35-54	2.1	2.0	3.2	3.2	.51	.56
55+	2.1	1.8	3.1	3.4	.60	.68
All ages	2.2	2.1	3.2	3.1	.49	.49
Gender						
Age					F=6.73***2	
Age x Gender			F=7.50***			

Table 7. Hierarchical Regression on Self-Rated Health—Women in Egypt

	Model 1		Model 2		Model 3	
	B	SE	B	SE	B	SE
Predictors						
Age	-.02	.00***	-.02	.00***	-.01	.01
< High school	.18	.05***	.16	.05***	.16	.05***
Married	.12	.05**	.13	.05**	.12	.05**
Norms						
Working mom			-.05	.02*	.06	.06
Housewife			-.00	.03	-.03	.07
Children			.02	.07	.35	.17*
Interactions						
Age x W					-.00	.00*
Age x H					.00	.00
Age x C					-.01	.01*
Adj. R ²	.12		.12		.13	
F	67.86***		35.11***		24.55***	
R ² change			.00		.01*	

*p<.05; **p<.01; ***p<.001

Figure 1. EGYPT-WOMEN

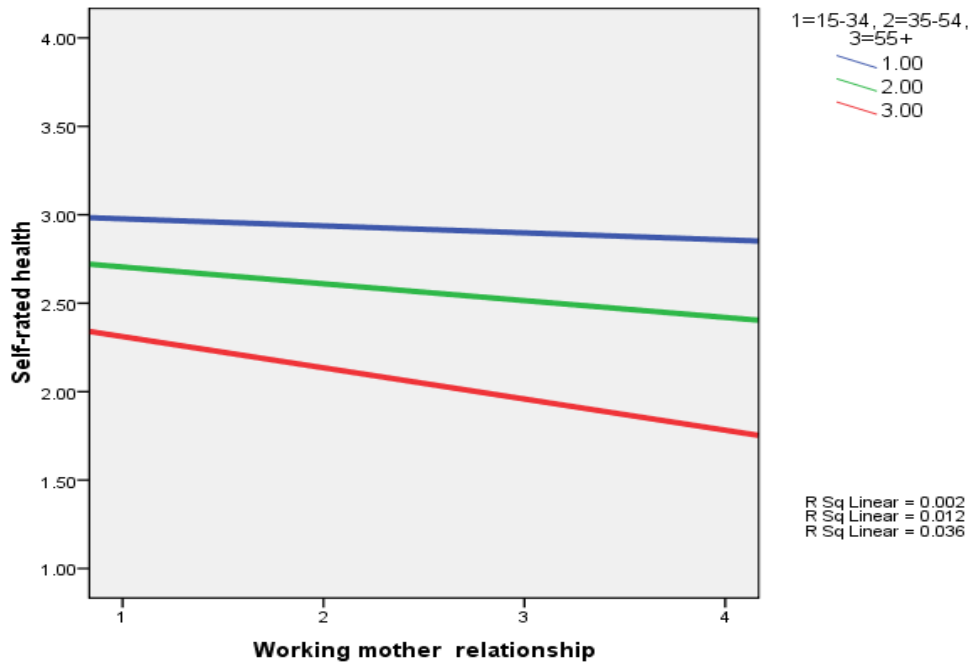


Figure 2. EGYPT-WOMEN

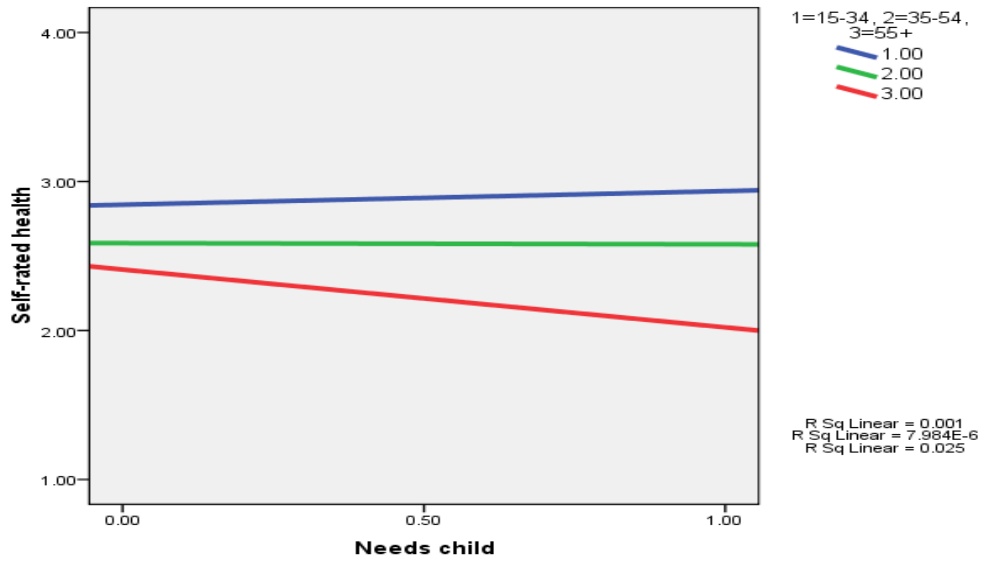


Table 8. Hierarchical Regression on Life Satisfaction—Men in Iran

	Model 1		Model 2		Model 3	
	B	SE	B	SE	B	SE
Predictors						
Age	.01	.01*	.02	.01*	-.02	.02
< High school	.54	.18**	.46	.18**	.46	.18**
Married	-.14	.19	-.13	.19	-.14	.19
Norms						
Working mom			.10	.06	.13	.14
Housewife			.13	.09	-.28	.22
Children			-.51	.15***	-.57	.37
Interactions						
Age x W					-.00	.00
Age x H					.01	.01*
Age x C					.00	.01
Adj. R ²	.01		.02		.02	
F	3.69*		4.69***		3.62***	
R ² change			.02***		.00	

*p<.05; **p<.01; ***p<.001

Table 9. Hierarchical Regression on Life Satisfaction—Women in Iran

	Model 1		Model 2		Model 3	
	B	SE	B	SE	B	SE
Predictors						
Age	-.02	.01*	-.02	.01*	-.01	.03
< High school	.39	.19*	.48	.17*	.38	.20
Married	.47	.17**	.37	.20**	.51	.17**
Norms						
Working mom			.04	.06	.30	.13*
Housewife			.05	.09	-.08	.22
Children			-.17	.15	.09	.38
Interactions						
Age x W					-.01	.00*
Age x H					.00	.01
Age x C					-.08	.01
Adj. R ²	.02		.02		.02	
F	6.57***		3.62***		3.08***	
R ² change			.00		.01	

*p<.05; **p<.01; ***p<.001

Figure 3. IRAN-MEN

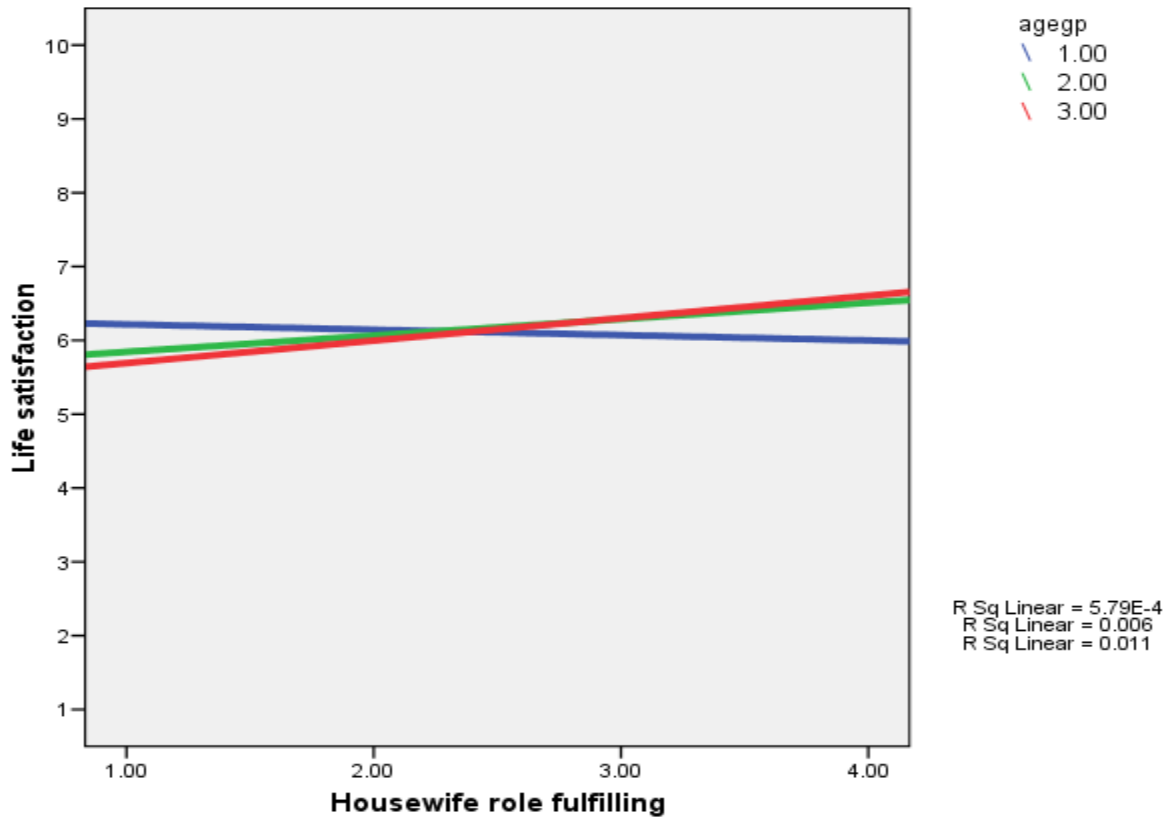


Figure 4. IRAN-WOMEN

