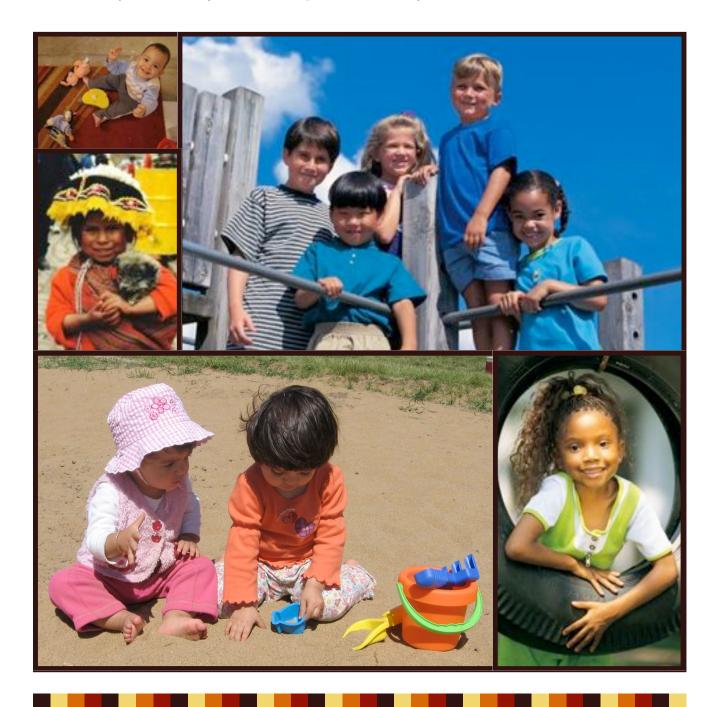
## **Cross-Cultural Lessons:**

## Early Childhood Developmental Screening and Approaches to Research and Practice

Community-University Partnership for the Study of Children, Youth, and Families



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#### **21 ACKNOWLEDGEMENTS & CREDITS**

## Preface

This handbook is designed to help the early childhood development community, teachers, service providers, researchers, clinicians, and local and provincial governments that serve immigrant and refugee families to understand the invisible realities that influence parental responses to questions on developmental screening tools.

The first section of the handbook highlights the major issues related to the use of North American screening tools with immigrant and refugee children, problematic items and activities, and provides recommendations for consideration.

The second section of the handbook provides useful lessons on crosscultural approaches to research and practice used in this study to broaden our understanding of cross-cultural relationship-building processes.



#### Introduction



In the early 80's, while administering a standardized test to Aboriginal students, teachers from the Northwest Territories identified problems with a mathematic problem-solving item that used a hamster wheel in a circumference question. Since most students had never seen a hamster wheel, let alone a hamster, the question produced an overwhelming number of incorrect responses. Was the response to this test item a reflection of the student's mathematical ability, or was it due to the question's lack of relevancy to the student's life? Moreover, how did the teachers interpret these results?

This example highlights some of the challenges in using and interpreting results from North American assessment and screening tools with children and families who come from diverse cultural backgrounds or have life experiences that are outside the mainstream.

In this handbook, we present information from the research literature, and from a project that involved immigrant and refugee parents and cultural experts who examined items from a screening tool for cultural appropriateness. As a community-based research project, the Community-University Partnership for the Study of Children, Youth, and Families (CUP) with the Multicultural Health Brokers Co-operative Ltd. (MCHB Co-op) and Alberta Health Services: Capital Health came together to examine the cultural utility and validity of the Ages and Stages Questionnaires® (ASQ). The ASQ is one of the most widely used developmental screening tools in North America and has shown excellent validity and reliability with the general population<sup>1</sup>; however, whether this is true for individuals from diverse cultural groups has not been studied. The ASQ is unique from other screening tools in that parents, as opposed to clinicians, complete the questionnaire. Therefore insights from immigrant and refugee parents are vital in understanding the potential difference in how parents may respond to ASQ questions depending on their cultural lens.



<sup>1</sup> Squires, J., Bricker, D., & Potter, L. (1999). Ages & Stages Questionnaires® (ASQ): A Parent-Completed, Child-Monitoring System. Baltimore, MD: Paul H. Brookes Publishing Co. The first section of the handbook highlights cross-cultural lessons related to early childhood developmental screening for organizations and service providers to consider. The lessons emerged from cultural experts and parents from three cultural backgrounds (Chinese, Sudanese, and South Asian); who reviewed in detail the content of each of the questions included in the ASQ. Common threads found in responses across these three groups are suggestive of the relevancy of findings to other immigrant and refugee families whose cultural group was not specifically studied in the current project. In evaluating the ASQ, the experts and parents identified problematic items and made visible the diverse cultural, environmental, and contextual reasons that influence how a parent may respond to certain items. This section will highlight things to consider when using screening tools with immigrant and refugee children, problematic items and activities, and provide recommendations for consideration.

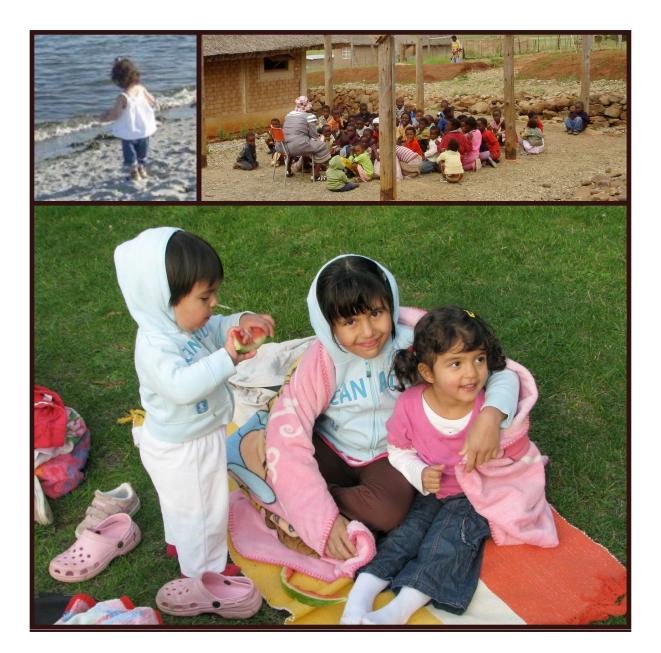


The second section of the handbook focuses on the cross-cultural lessons for research and practice that emerged from field-based research training that took place with the MCHB. Cross-cultural research poses many challenges since each person comes to the table with diverse perspectives, values, and cultural lenses. To ensure the information we gathered for this project was reflective and respectful of the cultural communities, 20 MCHB received field-based research training to conduct the family interviews in the parents' first language and with a MCHB from the same cultural background. During these sessions, the brokers identified the social tensions that may inhibit the relationship building process in a cross-cultural context. This section will highlight three general principles to consider for research and practice; and practical relationship-building tips with specific cultural and religious groups.



## **SECTION ONE:**

## Cross-Cultural Lessons on Early Childhood Developmental Screening of Immigrant and Refugee Children



Consider Sanjeet and Sora's stories as you read through this section of the handbook. In what ways might their pre- and post-migration experiences influence how they respond to a developmental screening tool?

#### **Case Study: Sanjeet - South Asian Immigrant**

Sanjeet came to Canada from Pakistan in 2005, under the Family Reunification program, when she married her husband. When they had their first daughter Zara, her in-laws moved in and took care of the baby and household chores. Sanjeet worked full-time at a factory and was taking ESL classes some evenings and her husband worked full-time as an engineer. When the grandparents brought Zara to her 18-month immunization, they were given an envelope with papers that they could not read. The lady at the clinic did her best to explain that the papers were a screening tool to be completed at home as part of a developmental screening project, however, they did not understand. Luckily, there was an Urdu translation with a contact number for them to call for more information.

Although the ASQ is a parent-completed questionnaire, who would be the most informed to comment about Zara's development?

What are some strategies to address the language barriers?

#### **Case Study: Sora - Sudanese Refugee**

Sora escaped Sudan to a refugee camp in Egypt where she lived for seven years, after which she moved to another refugee camp in Liberia for four years. During this time, Sora gave bith to three children and had very limited access to health care, educational opportunities, and nutrition, with some days where she and her children went without food. Sora was responsible for learning the local language on top of the other three dialects she already spoke but did not have access to books, and was never taught to read or write.

Sora and her three children came to Toronto, Canada under refugee status in 2001. She was very excited about the freedom and opportunities to learn English and be a part of Canadian culture. Shortly after her arrival she gave birth to her fourth child and was sent a bill in the mail requesting her to pay back her departure costs (the Canadian Transportation Loan Policy Act), which were upwards of 15,000 dollars. Despite her limited education, English proficiency, and four children she was able to find work at the local grocery store. However, Sora's full-time job and evening English language course left very limited time to spend with her children and the older siblings became primary caregivers to the baby. At her son's 18-month immunization appointment she was invited to participate in a preschool developmental screening project by completing the ASQ.

Given Sora's previous experiences prior to coming to Canada and her current socioeconomic situation, how will this influence her responses to the questions on the ASQ?

# Do screening tools accurately reflect the developmental skills of immigrant and refugee children?

Based on the results from our study, the following is a list of potential factors that can influence the outcomes of screening for immigrant and refugee children.



#### **Country of Origin and Conditions of Departure**

Here are some facts...

- Based on conditions of departure, the immigrant and refugee family situation varies.
- In a survival environment, such as the pre-immigration experience of refugees (e.g., wars and years in refugee camps in other countries), children may have limited opportunity to engage with certain activities and objects that are presented in screening tools.

So what is the impact on screening?

- Unfamiliarity with certain activities and objects can influence:
  - how a parent responds to certain questions;
  - how children perform on a screening tool.

#### **Context of Arrival**

Here are some facts...

- Some immigrant and refugee families are from a cultural background that is a new emerging community in Canada (e.g., Sudanese).
- These families may not be able to easily find support from their own community.
- This can lead these families to live in isolation from friends and family, who would in their home country, be directly involved in the child development process.

So what is the impact on screening?

- Families may not engage in screening because they have additional concerns to address.
- Because they are isolated they may not have access to health services without the support of cultural brokers.





#### Language

Here are some facts...

- For immigrant and refugee families, English is often not their first language.
- Immigrant and refugee families often speak multiple languages.
- Some of these languages have their own unique structure and communication style (e.g., direct vs. non-direct) that may be different from English.
- Developmental screening tools:
  - are primarily available in English;
  - may contain long questions, unclear examples, and words that are not commonly used in everyday language or cannot be translated (e.g., familiar, imitate, correct, represent, word combinations, addition, and squat).

So what is the impact on screening?

• When screening questions are lengthy, and contain unfamiliar words and are available only in English, parents may not understand what the question is asking and therefore respond in a way that does not accureately reflect the developmental skills of their child.

#### Religion

Here are some facts...

- For many immigrant and refugee families preserving their cultural identity is a priority.
- The religious beliefs are part of the cultural identity of the families and influence their social behaviour, gender roles, parental responsibilities, and child expectations.
- Many parents start teaching their children religious practices from an early age.

So what is the impact on screening?

• Certain activities or objects in screening tool questions (e.g., Does your child turn the pages of a book by himself? ASQ, Fine Motor Question 5) may be in contrast with religious beliefs that parents are trying to teach their child and as a result may influence a child's exposure to an activity or object. For example, in some Muslim communities, it is believed that the Qur'an should be the first book introduced to a child, and exposure to other books might influence the extent to which a child treats the Qur'an as sacred, to be handled with the utmost care.

#### **Oral vs. Written Culture**

Here are some facts...

- In some cases, immigrant and refugee families come from oral cultures, where:
  - essential social transactions are transmitted orally (e.g., learning culture-specific language);
  - story-telling is a more widely used parent-child activity than reading books.
- This influences children's familiarity with literacy related objects and activities at early ages.

So what is the impact on screening?

- Limited experience in a written culture may cause parents to mistrust the screening process that is completed in writing.
- Some questions in screening tools request children to show particular skills using literacy related objects (e.g., pens, pencils, and books), but children may not be exposed to these objects and thus may not perform well on those questions.

#### Interdependent vs. Independent Cultures

Here are some facts...

- Many immigrant and refugee families (e.g. Chinese, South Asian, and African families) come from interdependent cultures.
- In an interdependent culture, recognition by significant others and being able to fit into social roles within the community is highly valued.
- In these cultures, teaching children "how to be independent" (e.g., using a spoon, reaching for things) at an early age is not as important as certain social skills (e.g., greeting, respecting elders, taking care of younger children, and getting along with others).

So what is the impact on screening?

• Many questions in screening tools require children to display independent skills, but this may not reflect what families consider important in interdependent cultures.



#### **Adult-Child Interactions**

Here are some facts...

- Many families come from interdependent cultures in which:
  - it is uncommon for a child to sit and play with an adult;
  - children's play is mostly with siblings or other children;
  - extended family is responsible for taking care of children.
- Also, adjustment to new life in Canada (e.g., employment commitments, re-certification, or learning the English language) limits the parent's availability to engage with their child in a one-on-one interaction.

So what is the impact on screening?

• Many of the activities in screening tools require adult/child one-on-one interaction (e.g., drawing together, or building blocks), but this may not reflect the parenting practices.



#### **Parents' Expectations for Child Development**

Here are some facts...

- Some immigrant and refugee families focus more on the development of their child's social skills and rely on the educational system to introduce literacy related activities (e.g., reading a book) and objects to their children when they attend school.
- Some immigrant and refugee parents believe in a more "naturally occurring development of skills," with little interference on their part. The focus is on children developing at their own pace rather than prescribed stages of development.

So what is the impact on screening?

• Screening tools usually focus on developmental skills that impact children's school readiness, but these skills may not be the parental focus at early ages.



Objects and activities in screening tools: What to keep in mind when using screening tools with immigrant and refugee families



#### **Food and Feeding Practices**

Food or feeding questions are often used on screening tools in order to determine if a child is meeting developmental milestones.

Keep in mind...

- At early ages, many immigrant and refugee families consider feeding to be the responsibility of the parent and as a way to show their love to their children; thus, a child would not be responsible for self-feeding with a spoon, cup or glass at a young age.
- Eating with spoons and forks might be an uncommon practice in some cultures.
- Playing with food may not be appropriate in certain cultures and may conflict with families' religious beliefs.

So what is the impact on screening?

- Food and utensils are used to assess certain developmental skills unrelated to eating, but some children are not expected to feed themselves at early ages. This may lead to parents reporting their child as lacking a particular skill that reflects different feeding practices rather than actual development.
- The use of spoons or forks in screening tools could suggest to parents that this is the way that children should be eating at this age and this may conflict with their cultural feeding practices.



#### **Books and Writing Tools**

Books and writing tools are used as objects within some questions on screening tools.

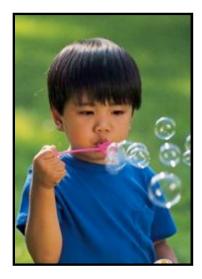
Keep in mind...

- Children of immigrant and refugee families that come from oral cultures may not be exposed to these objects.
- The pre-immigrant experience of some refugee families (e.g., war and refugee camps) may also influence children's exposure to books, pens and pencils.
- Some families may see these objects as a safety hazard for young children.
- Other families may consider these objects as part of schooling; thus, it is the teachers' responsibility to introduce them to children.

So what is the impact on screening?

- If children are not exposed to books and writing tools, their performance on screening tools may not reflect their actual ability.
- Parents may feel a contrast between their parenting choices (e.g., considering writing tools as a safety hazard at early ages) and what screening tools require their child to use.





#### Toys

Blocks, stuffed animals, and shopping carts for example, are also objects used in screening tools that are culturally-loaded.

Keep in mind...

- Due to access, gender roles, religious beliefs, or even the concept of play, toys that are used in screening tools may be uncommon objects in some cultures.
- In some immigrant and refugee cultures where social interaction has a high value, solitary play with toys is not considered an important developmental activity. Alternatively, interaction with elders, siblings, and other people in the community were reported as part of a child's daily activity.

So what is the impact on screening?

• Screening questions that use play or toys to measure developmental skills may be misinterpreted and produce invalid responses. Alternatively, questions may be interpreted correctly, but lack of exposure to certain toys will affect a parent's responding.

#### Sports

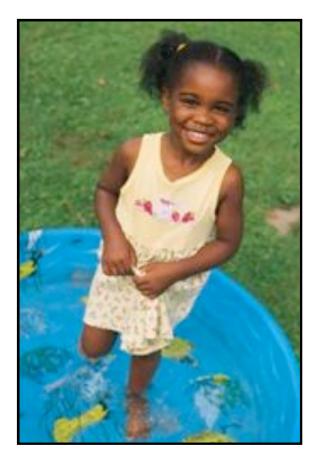
Questions related to physical activities, sports, or sports equipment (e.g., a ball) may also be used in some screening tools.

Keep in mind...

- Gender roles have an effect on children's engagement in sports and physical activities (e.g., kicking or throwing a ball).
- At a very young age parents may not differentiate between the roles of boys and girls in physical activities. As they get older certain types of physical activities (e.g., kicking/throwing balls, biking) may not be considered appropriate for girls.

So what is the impact on screening?

• Children's performance on some gross motor (e.g., that involve kicking or throwing) questions on screening tools may be impacted by what is considered appropriate activities for them according to their gender roles.



#### Conclusions

In order to address the changing demographic of the early childhood population in Canada it is important to examine how early childhood development is being assessed in these populations and how services are being allocated and delivered. Although the results of this study emerged from specific questions on the ASQ, there are common cross-cultural insights that are applicable to all screening and assessment tools. Culture-free and valid screening and assessment tools are not likely to be available for all cultural groups. However, in this study it was found that if practitioners use a cross-cultural lens when interpreting the outcomes of screening and assessment tools, this can reduce the number of over- or under-identified children with developmental concerns. This is accomplished through culturally-sensitive screening and assessment practices that make the process both accessible and useful to families.

For example, practitioners can increase their understanding of cross-cultural differences and how best to support parents in completing screening and assessment tools through translation, explanation, and clarification. Bringing awareness to the impact of western screening practices on immigrant and refugee children and families provides essential information needed to enhance cultural knowledge in the area of screening and assessment.

### Recommendations

- Develop cultural self-awareness
- Find out and consider families' pre- and post-migration experiences as they settle in Canada
- Use cultural brokers or interpreters in the screening and assessment process
- Interpret results from screening and assessment tools with caution and integrate relevant cultural data in the interpretation
- Incorporate non-standardized methods in assessment these include assessments that are not based on fixed-response formats or pre-selected vocabularies
- Debrief the results with the family and together determine the most appropriate intervention process
- Throughout the entire process, validate the family's cultural belief system

## **SECTION TWO:**

## **Cross-Cultural Approaches to Research and Practice with Immigrant and Refugee Families**



### Introduction to Section Two

This section of the handbook is a summary of research and practice considerations for researchers, service providers, and policymakers to take into account when working with immigrant and refugee populations. This section is meant to stimulate further discussion and thought on respectful crosscultural research and practice and not intended to be used as a "how to" guide. Although there are many methods of data collection, the handbook will focus on interviewing practices with immigrant and refugee families.



The Multicultural Health Brokers (MCHB) emphasized the need for researchers to spend time with the families/participants and engage in meaningful relationship-building activities as part of the research process. During the relationship-building process, you need to be conscious of the barriers to participation such as English language proficiency or socio-economic situations that may limit the family's time availability. In addition, researchers should be respectful of the participants' cultural values and practices related to cross-gender interactions such as appropriate dress and expected behaviours when visiting a family home.



#### **Case Study: What Not to Wear!**

The health brokers shared a home visitation experience of an immigrant family in which a service provider wore a short skirt to the family home where the women practice full body covering. The mother, father, and extended family members were not comfortable sharing the needs of their family with the service provider as her dress was not appropriate for cross-gender interactions. This example demonstrates the diverse interpretation of appropriate dress, which is culturally- and socially-influenced. In order to be respectful of the families you wish to work with, understand and practice protocols that will open up spaces for conversation, which will ultimately promote open communication and trust.

## **Three General Principles**

The following are three general principles that span across cultural groups to assist in building respectful relationships with immigrant and refugee families:

- Respect for the participants' cultural traditions and values;
- Respect for barriers-to-participation; and
- Respect for the participants' right-to-know.

These principles can be useful in planning research with immigrant and refugee families but one should acknowledge that these groups can be highly variable in their English language proficiency, education, socio-economic status, and experience with the majority culture. Due to this variability, researchers need to be flexible in altering their methods and practices to suit the needs of each family. Ultimately, having an interviewer from the same ethnic and language group as the interviewee can be beneficial because he/she may be familiar with the customs within a culture and this helps in building trust.

#### **Respect for Cultural Traditions and Values**

The following suggestions given by health brokers are useful for communicating **respect for the participants' cultural traditions and values:** 

- Determine the protocols for cross-gender interactions in the culture. In some cultures it is not proper for female interviewers to develop eye contact, become friendly, or interact freely with males in the family.
- In most cultures, topics pertaining to childcare are the mother's responsibility; however, depending on the research topic in some cultures it is important to consult both parents.
- Determine the rules about greeting family members, deciding a sitting place in the house and accepting refreshments.
- Sharing and accepting food is helpful in building trust and showing respect.
- Dress appropriately, keeping in mind the customs in a family.



#### **Respect for Barriers-to-Participation**

When working with immigrant and refugee families, researchers need to **respect barriers-to-participation**. Immigrant and refugee families face cultural, systemic, and financial challenges while adjusting to life in a new place, with a new language, and different culture. Some measures that researchers can take in this regard are as follows:



- The best venue for collecting information is in the family home, as finding childcare and transportation may be barriers-to-participation.
- Mothers in immigrant families are often very busy; in addition to their household responsibilities and childcare, they may be working outside the home. Therefore, it is important to keep the interview short.
- The interview process should not be highly structured and formal as a lot of information can be obtained through general interaction with the family members, once a cordial relationship has been established.

#### **Respect for the Right-to-Know**

Some immigrants and refugees identified how research was used as a tool for harm in their country-of-birth. They also discussed their lack of exposure or understanding of the intent of research as conducted in North America. Therefore, some immigrant and refugee participants may be skeptical about participating in a research study. It is the researcher's responsibility to **respect the participants' right-to-know** about the research process and explain what the data will be used for. Some considerations in this situation are as follows:

- If the participant is unsure about signing written consent forms, explain to them the procedure and when appropriate use oral consent. Establish trust and ensure confidentiality.
- Explain the purpose of audio recording and note taking; ensure privacy and confidentiality.
- Ask permission for audio recording and note taking; respect the family's wishes if they object.
- When collecting personal information like income, education etc., explain the utility of this information for the study and do not insist if the family is reluctant.



### **Considerations for Specific Cultural Groups**



We are conscious of the fact that each culture is distinct and within a culture there exists a diversity of values, practices, and beliefs. In order to respect the uniqueness of the ethnocultural groups, the health brokers have provided us with specific considerations that they feel are important to keep in mind when conducting interviews with families about child development issues.

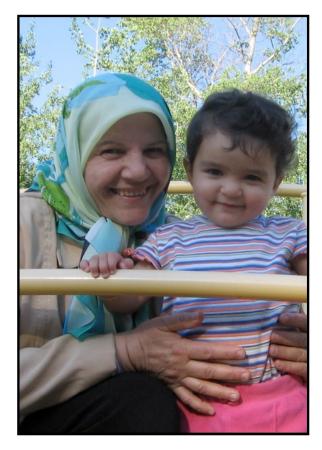
Please keep in mind the diversity of perspectives within each group. For example, when working with Muslim families, researchers should understand the customs for cross-gender interactions in which a female researcher should not shake hands, develop eye contact, or interact jokingly with males in the family.

#### Arabic

- Follow gender protocols for cross-gender interactions. Female interviewers should talk to males with seriousness and respect, maintain strict boundaries and avoid making eye contact.
- Families may not be open to signing a consent form, so ensure confidentiality and accept oral consent.
- Be prepared to take notes as some families may not be open to audio recording.

#### Chinese

- Either parent can be contacted for the interview.
- The researcher can request to talk to the interviewee privately at the time of making an appointment.
- Avoid making direct eye contact for long periods of time as it can make the interviewee nervous.



#### Filipino

- The interview can be done in any private place.
- Use laughter for rapport- and trust-building but be mindful not to take too much of their time.

#### Korean

- Contact mothers about issues related to childcare.
- Be prepared to take notes as some families may not be open to audio recording.



#### **South Asian**

- Take off your shoes at the entrance, and greet all family members in their language.
- Give a good explanation for the purpose of audio recording so the parents express themselves freely during the interview.
- Talk in a casual manner and do not probe a lot about personal information.
- If you are interviewing the mother, be prepared that her husband can be present at the time of the interview and may respond to your questions.
- Researchers should only shake hands with same-sex members of the family.



#### Sudanese

- The interview can be conducted at home or at a clinic.
- When talking to males, be serious, polite, and avoid direct eye contact.
- Avoid recording the interview and do not spend too much time on written consent. If the family is reluctant to answer personal questions, do not probe.

#### Vietnamese

- Consult women for topics related to child development.
- Explain the consent form and accept verbal consent if the family is reluctant to sign a consent form.
- Share the findings from your study.

#### **Former Yugoslavia**

- When determining a meeting time consult both parents to see who wants to be interviewed.
- Share the findings from your study if the parents desire.

#### Conclusion

Research is a powerful tool. It can be used to generate new knowledge that is reflective of the community where the research was conducted. Research can also cause harm when the knowledge is misinterpreted due to cultural misunderstandings. It is the responsibility of the researcher to follow an ethic-of-care, in which the researcher is responsible for learning the cultural protocols for an organization, ethno-cultural group, and family before conducting field-based research.



#### **Acknowledgements:**

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#### **CUP's Mission**

The Community-University Partnership for the Study of Children, Youth, and Families is committed to improving the development of children, youth, families, and communities by:

- Generating, sharing, and mobilizing new knowledge about child and family development;
- Identifying and promoting the use of evidence-based policies and practices for optimizing child and family development; and
- Nurturing a culture, both in the community and the University, in which rigorous research, evaluation, and practice are valued highly as critical components in efforts to understand and optimize development.

CUP produces documents such as this handbook as part of our knowledge-sharing activities. If you have any questions or comments about this document, please contact us.

