According to the U.S. Census Bureau, populations speaking languages other than English in the home has increased by 140% in the past three decades. As our population becomes increasingly diversified, questions about the best ways to support young children and their families within the context of culture arise. In her position paper, “Are early intervention services placing home languages and cultures at risk?,” Puig considers how language and culture shape a child’s development and offers guidance on what early interventionists can do as they support families.

Puig discusses truths and consequences of early exposure to a second language. Although children may seem to learn languages easily and quickly, a child’s second language may be more limited, with simpler sentence structure and/or be rote in style. They may even appear more competent in the second language than they actually are. Sometimes children with English as a second language are assessed and found to have language and cognitive delays in English.

This may also account for some over-representation of non-English speakers in special education. Some educational systems are not fully appreciating the benefit of becoming truly bilingual and instead over emphasize English language learning. Puig highlights Cummins’ interdependence model which states that “second language proficiency is dependent on competence in the first language, at least during the early stages of second language acquisition.” Accordingly, supporting the primary family language would ultimately result in better English language acquisition.

Because English is the conventional language of United States educational systems, there is concern that family languages are becoming vulnerable and undervalued. Furthermore, an over emphasis on English language learning might actually impede a child’s development. Young child learn through daily activities and routines with familiar people, this includes the accompanying
emotions, interactions, and family language. This is the family’s culture and the importance of fully supporting the family language cannot be under emphasized.

How can early interventionists support a family’s home language and culture? Simply considering this question is an excellent beginning. Reflection about the ways we (1) view other groups of people, (2) comprehend disability, (3) consider parenting styles, and (4) think about goal setting are suggestions for becoming more sensitive and responsive to the different families with whom we work. Learning about other cultures can provide insight into the way a family raises their child. Puig suggests, learning about the family resources as a way to understand and support the family. Asking a family about the ideas they hold dear and learning about their belief systems helps interventionists understand the child within the context of the family. Considering how a family views and understands disability is important information to consider as well.

Understanding and respecting family values and life style is foundational to family-centered early intervention. Yet, Lee, Ostrosky, Bennett, and Fowler (2003) found that some early interventionists view providing culturally appropriate services as an additional responsibility to already high caseloads and taxed systems. As such, they might be less likely to delve into understanding the nuances of the family’s culture. Getting to know families and understanding and respecting their unique values and beliefs are paramount to high quality family-centered early intervention. Supporting families in early intervention means learning about and appreciating different cultures and bolstering the unique offerings families contribute to development of their child.


KIT Newsletters are available online at www.edis.army.mil
Awareness of cultural practices is beneficial to increase understanding of common cultural variations. Knowing about childrearing practices and common family belief systems across cultures can help understanding and relationship building when working with families of different cultures.

Over the next months this section of the KIT will highlight general cultural variations among White, Native American, African American, Hispanic, and Asian families. This review will not address the diversity within cultures or highlight assimilation and acculturation, which is inevitable as people of different cultures come to live together in the U.S. Rather, it captures common characteristics of the major cultural groups that shape the U.S. population. As these cultural variations are reviewed and early intervention providers are encouraged to increase awareness of different cultures, attention to individuality within cultures and among families must remain a recognized hallmark of early intervention.

White Americans

A long-standing value of White American families is individualism and independence (Schulze, Harwood, & Schoelmerich, 2001; Harwood, Schoelmerich, Schulze, & Gonzalez, 1999; Sato, 1999; Chen, Hastings, Rubin, Chen, Cen, & Stewart, 1998; Hanson & Lynch, 1994). This cultural value subsequently influences the childrearing practices of White American parents as they facilitate child autonomy. White American children are also encouraged to make decisions and their preferences are often taken into account when family decisions are being made (Robinson, 1996). These children are often given choices and allowed to make decisions. For example, at the check-out line in the grocery store the toddler may be asked which candy he wants or at McDonalds the child makes a decision about what he wants to eat. This democratic participation is reflective of the American held value of equality and freedom to express feelings.

Following the theme of independence, White American babies typically start out in their own bed and often have their own room (Boocock, 1999; Lynch & Hanson, 1994). They are encouraged to engage in self-feeding early (Martini, 2002; Schulze, Harwood, & Schoelmerich, 2001; Harwood, et. al., 1999). Toilet training is encouraged at an early age and communication development is a highly regarded developmental milestone. The expected developmental attainment of such skills is emphasized in developmental evaluations, which are often based on this cultural mainstream framework.

The White American family is generally the nuclear family, including the parents and their children. Extended family is regarded as relatives and may live nearby or may travel a distance to visit, but they generally do not share the same household (Lynch & Hanson, 1994). This further represents the individualism and independence as the children grow up and leave the home to make their own lives and have their own families. While the father was traditionally the head of the household that has changed along with family constellations. Communication styles are turn-taking in nature with an exchange of eye contact and open exchange of opinions. The lives of families are busy; they therefore expect punctuality. This is important, as early intervention providers are also busy and must manage their time to effectively work within family schedules.

Regarding children with disabilities, White American families are generally aware of the numerous causal factors and want to be informed and involved in the diagnosis and treatment processes (Lynch & Hanson, 1994). The public attention to services and inclusion of children with disabilities is a result of all American families advocating for their children with disabilities and being vocal about their desires.
From November through March 2014 we are excited to have Christina Kasprzak and Betsy Ayankoya as our consultation corner experts addressing the topic “Cultural Competence.”

What are the necessary attitudes and skills required for working with young children and families from culturally diverse backgrounds?

As early interventionists, we increasingly find ourselves working with children and families from different cultural and linguistic backgrounds than our own. But what do we need to do to effectively support young children and their families from diverse cultural and linguistic backgrounds? The process of becoming a more effective professional working with diverse children and families starts with learning about your own perceptions, beliefs and values. As professionals, we are most effective with children and families when we can establish a relationship based on acceptance, trust and mutual respect.

Engage in self-reflection.
Early interventionists need to engage in self-reflection to examine personal perceptions, beliefs and values. Begin by exploring your identity through the many groups you belong to, such as race, ethnicity, age, gender, sexual orientation, disability—specifically are you a woman, mother, African American, teacher, middle class, and so forth? Think about the identities that are most important in shaping your life. Consider how has each identity has contributed to your view of yourself and others who share that identity. Consider how each identity has contributed to your view of the world.

Learn about the origin and nature of attitudes towards differences.
Early interventionists need to learn about the origin and nature of positive and negative attitudes toward differences and recognize the impact on children and their families. Starting at a very young age, we learn bias from others—relatives, peers, media. Even when our knowledge and experiences refute these biases, they still exist and can influence our behavior. No one chooses to have these prejudicial ideas, but everyone has them. This does not mean that we are all bigots. It does mean that we need to be aware of how these biases may affect the way we approach others.

As a consequence of stereotypes we have learned, we can hold negative biases about others which impact the way we behave toward them. We can also hold negative biases about our own group that contribute to making us feel less valued or respected. When a member of a group that has historically experienced oppression comes to accept and live out the negative myths and stereotypes applied to their group it is called internalized oppression. Oppression is a universal concept that extends beyond race and ties us to the belief that (because we are female, poor, Black, Asian, etc.) we are not equal, not good enough and not worthy.
Consultation Corner (continued)

Our attitudes and perceptions are infused into every interaction that we have and everything that we do. Even if we are not aware of our own preconceived ideas and biases, we reflect them when we relate to the children in our care. As a consequence, these ideas and biases may negatively influence our relationships with particular families and, moreover, impact children’s identify and self-esteem.

Be aware of cultural and linguistic backgrounds of the children and families you support.

Early interventionists need to be aware of the cultural and linguistic backgrounds of the children and families they support in order to provide effective services. Make time to talk with the families you work with about who they are, what they like to do, and what is most important to them. Often times it is a lack of understanding that leads to miscommunications or misconceptions between professionals and families. So, exploring the family’s values and beliefs will help to build a trusting relationship and will inform you about how to best support a child and family. Diversity is important even when the children and families “appear” to be of similar backgrounds. Families serving in the military certainly experience a “military culture” as an additional layer that impacts their own way of being and viewing the world.

It is critically important to remember that we can’t act or play the role of a skilled professional. We have to be authentic. We must come to every interaction with integrity and authenticity. When we do this, we show respect and begin to build a trusting relationship as the foundation for supporting the family and their child.

For contemplation:

Why do you go to work every day? What led you to the work that you do? Do you still feel a sense of accomplishment? What supports do you need to feel good about the work that you are doing with children and families?

What is your earliest experience with diversity? When did you notice that not everyone was the same? Was it a positive or negative experience? Did it leave you feeling like you belonged or not?

How has your gender, race and nationality influenced your beliefs and/or behavior?

How has your birth order (first born, last born, only children) influenced your beliefs and/or behavior?

Fill in the blank: First born children are:

____________________________________
____________________________________
____________________________________.
The Comprehensive System of Personnel Development (CSPD) is offering a continuing education opportunity for KIT readers.

In line with the focus on Cultural Competence, readers are invited to receive continuing education contact hours for reading the monthly KIT publications (November 2013 through March 2014) and completing a multiple-choice exam about the content covered in these KITs.

KIT readers will receive the exam in April 2014. There is no need to register for the CEUs. Rather, if you are interested complete the exam online at www.edis.army.mil

Upon successful completion of the exam, you will receive a certificate of non-discipline specific continuing education contact hours.

http://eiexcellence.org/

The web resource this month is a new site aimed at promoting early intervention excellence and evidence based practices. The website and associate blog are collaborative efforts of early intervention professionals in North Carolina, but all are welcome to join, participate, and contribute.

The mission of this collaboration is twofold, to connect and serve the diverse community of providers who support families, and to help providers stay abreast of evidence-based practices and expand their knowledge base of best practices.

The site includes resources, tools, videos, and an interactive blog. Be sure to check out the impressive array of blog topics about real life, real time early intervention quality practices.

You can also follow the site on Facebook at:

https://www.facebook.com/pages/EI-Excellence/176380009192517

Thank you for your continued interest in the KIT. Please share your KIT questions/ideas via email to EDISCSPD@amedd.army.mil