

Building Culturally Linguistically Competent Services

to Support Young Children, Their Families, and School Readiness

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Prepared for: The Annie E. Casey Foundation

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About the Author

Kathy Seitzinger Hepburn has worked with and on behalf of children and families throughout her career. Her work has focused on early childhood, young children, and their families in settings that include mental health services, specialty health care, and early care and education. Following years of direct clinical work and support services to children and families, she became Project Coordinator for Health and Mental Health Services for the Region III Head Start Resource and Training Center (HSQIC) at the University of Maryland University College. In this capacity, she provided extensive training and technical assistance to the Head Start and early childhood community. Ms. Hepburn is currently a Research Instructor, Senior Policy Associate on faculty at the Georgetown University Center for Child and Human Development, and works from her home office in California. At Georgetown, she is involved in multiple projects—local, state, and national—that support the early childhood and mental health services communities.

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Introduction

THE PURPOSE OF THIS TOOL KIT

Building Culturally and Linguistically Competent Services to Support Young Children, Their Families, and School Readiness has been created for the Annie E. Casey Foundation to help promote early childhood development and school readiness. The purpose of this tool kit is to provide guidance, tools, and resources that will assist communities in building culturally and linguistically competent services, supports, programs, and practices related to young children, their families. By offering services in culturally and linguistically meaningful ways, communities can engage all families and support young children being ready for school.

The tool kit defines cultural and linguistic competence and its priority for communities, with attention to:

- Diversity and the cultural context of the family and community;
- Understanding the impact of culture on child development;
- Planning and implementing culturally and linguistically competent services;
- Implications for early childhood services and school readiness; and
- Strategies for preparing personnel and implementing culturally and linguistically competent services and supports.

The intent is to support a holistic approach and encourage cultural and linguistic competence across **all systems** that serve young children and their families and help young children grow up healthy, develop well, and enter school ready to learn. Throughout the tool kit, effort has been made to be inclusive of health, mental health, early intervention, and other services systems. Although there may be extra emphasis on the early care and education settings where children spend much of their time growing, learning, and getting ready for school, the concepts and practices relevant to cultural and linguistic competence can be taken in by all those who serve children and their families in the communities where they live.

HOW THE TOOL KIT IS ORGANIZED

The tool kit is organized into seven major content sections.

- I. Introduction: Rationale, Literature Review, and Definitions
- II. Planning and Implementation: Self-Assessment and Planning Process
- III. Learning About Family and Community: Family Culture and Information Gathering
- IV. The Early Care and Education Environment: Curriculum and Family Involvement
- V. Early Learning: Language and Literacy

VI. Family Friendly Communication: Interpreters, Translators, and Translated Materials

VII. Training: Provider and Personnel Preparation

Excluding the Introduction, each section includes an overview of the issue as well as the following text:

Critical Questions for Communities help to frame the work ahead for communities as they attempt to achieve culturally and linguistically competent services and supports.

Key Strategies for Families, Providers, and Administrators offer some direction and steps that can be taken to move toward culturally and linguistically competent services and indicate policy issues for community decision makers.

Guides, Tip Sheets and Checklists provide tools for getting started and moving deeper into the work.

Note: A number of guides, tip sheets, and checklists represent the contributions of the National Center for Cultural Competence (NCCC), a component of the Georgetown University Center for Child and Human Development. The mission of the NCCC is to increase the capacity of health care and mental health programs to design, implement, and evaluate culturally and linguistically competent service delivery systems. The NCCC conducts an array of activities to fulfill its mission including: 1) training, technical assistance and consultation; 2) networking, linkages, and information exchange; and 3) knowledge and product development and dissemination. Major emphasis is placed on policy development, assistance in conducting cultural competence organizational self-assessments and strategic approaches to the systematic incorporation of culturally competent values, policy, structures and practices within organizations. For more information, go to http://gucchd.georgetown.edu/nccc

Promising Practices, whenever relevant, will portray how some communities have approached achieving cultural and linguistic competence as examples and inspiration.

Note: Many communities in this tool kit represent Communities Can! Communities of Excellence. Communities Can!, a program coordinated by Georgetown University Center for Child and Human Development, works with the Federal Interagency Coordinating Council (FICC) to identify and recognize communities that have found effective ways to serve young children (birth through age 8) and their families through integrated, family-centered, and culturally competent services and supports. Each year, this Communities of Excellence program recognizes outstanding communities nationwide, for their success in serving all their community's children, including those with disabilities, and their families. For more information, go to http://gucchd.georgetown.edu/commcan.html

Annotated Resources, which may include books and print, on-line resources, websites, organizations, and training and technical assistance resources, offer tools that communities might use depending on their community-specific interests and action plan. These items have been carefully reviewed, but may need to be adapted to specific communities. Their inclusion does not imply endorsement of any particular product, provider, source or service.

HOW TO USE THE TOOL KIT

The work of integrating cultural and linguistic competence into programs, service systems, and throughout communities can be challenging. This tool kit will be useful for families, community leaders, providers, and administrators—particularly those in early care and education, health care, mental health care, and other service systems. Its use is encouraged for anyone interested in welcoming and building on the strengths of culturally and linguistically diverse children, families, and communities.

The tool kit has been organized so that it is easy to understand and easy to use. The sections are arranged by content, rather than sequentially. It is best for interested users and communities to review and become familiar with the whole tool kit. Depending on the unique needs of each user or community, certain sections may be more useful than others. Those who use this tool kit should also be aware of any local, state, or national laws, regulations or guidelines that might influence their approach to cultural and linguistic competence and tailor their work accordingly. A brief description of each section follows.

I. Introduction: Rationale, Literature Review, and Definitions

This section offers a conceptual and developmental framework for the importance of culturally and linguistic competence in services to young children and their families. The definitions, key elements, and principles provide a foundation on which planning and implementation of competent services can be built. The text and resources are useful for introducing the concepts of cultural and linguistic competence, building consensus on its value for young children and families, and creating a common ground upon which to initiate service systems change. Community leaders, planners/developers, members of the community (including families), providers, administrators, and trainers will find this information useful.

II. Planning and Implementation: Self-Assessment and Planning Process Aimed at community-based efforts, this section provides information and resources useful for initiating planning and completing action steps toward culturally and linguistically competent services. By describing partners, selfassessment, and steps for getting started, this section can be useful to community leaders, planners/developers, members of the community, families, providers, administrators, and facilitators.

III. Learning About Family and Community: Family Culture and Information Gathering

Understanding the impact of cultural and linguistic differences and diversity requires self-reflection and information gathering. This section takes an ecological perspective and provides resources and tools essential for understanding the impact of culture on every individual, families, and young children. By completing a community assessment, using strategies to gather family information, and exposing key cultural issues related to services to young children and their families, communities can begin to address concerns related to early care, education, and school readiness. Families, providers, administrators, and community leaders would find this section useful.

IV. The Early Care and Education Environment: Curriculum and Family Involvement

Early care and education administrators, providers, teachers, and families will find this section particularly useful. The focus on early care and education includes a close look at creating a culturally and linguistically competent and developmentally appropriate learning environment. Specific attention is paid to using a multicultural approach, implementing a multicultural curriculum, and engaging and involving families in culturally appropriate and enhancing ways. Other providers who deliver health, mental health, or other social services to young children and families can also adapt some of the resources and tools to enhance their service environment.

V. Early Learning: Language and Literacy

Early care and education administrators, providers, teachers, and families can use this section's text, tools, and resources to support two essential areas of development: language and literacy. The materials focus on the cultural aspects of language, language acquisition in young children, and guidelines for effective practices in early language learning. In addition, this section links language and literacy by discussing the impact of culture and language on early literacy, literacy resources for English language learners, and family literacy efforts with culturally diverse families. Other providers who work in the area of literacy or adult language education may also find this information useful.

VI. Family Friendly Communication: Interpreters, Translators, and Translated Materials

Communication is essential to including all families in community life. Within communities with diverse populations, interpreters, translators, and translated materials can link families, services and systems and make those services more useful and effective. The text, tools, and resources in this section offer guidance and strategies for selecting, using and funding interpreters and translators and providing translated materials. Community leaders, administrators, all types of providers, families, trainers, and facilitators will find this information useful.

VII. Training: Provider and Personnel Preparation

Delivering culturally and linguistically competent services requires specific knowledge, attitudes, beliefs, behaviors, and competencies. The text, tools, and resources in this section support self-assessment, personnel training and preparation, and planning in-service and training activities. Administrators, providers, families, trainers, and facilitators will find this information useful.

CULTURAL AND LINGUISTIC DIVERSITY: A SNAPSHOT

Cultural and linguistic diversity in the United States has a long history. Today's families include those whose ancestors emigrated from Europe, Africa, Latin America, and Asia and those who represent the Native American population. Every family has a culture that has been more or less shaped by the mainstream culture that is dominant in the United States; as has the mainstream culture been impacted by those cultural groups who bring new and diverse perspectives (National Research Council and Institute of Medicine, 2000).

Today's communities and neighborhoods in the United States are growing more diverse. Reports from the Census Bureau indicate that the nation is more racially and ethnically diverse in the year 2000 than it was in 1990. Since 1990, diverse racial and ethnic groups have increased from approximately one-fourth to one-third of the U.S. population. This trend is expected to continue. The Census Bureau projects that in 2030, diverse racial and ethnic groups will comprise 40 percent (or two-fifths) of the total U.S. population (Goode, 2001).

In the year 2000, there were 70.4 million children under the age of 18 (or 26 percent of the population)—64 percent of whom were white, non-Hispanic; 15 percent of whom were black, non-Hispanic; 4 percent of whom were Asian/Pacific Islander; and 1 percent of whom were American Indian/Alaska Native. The number of Hispanic children has increased faster than that of any other racial and ethnic group, growing from 9 percent of the child population in 1980 to 16 percent in 2000. The percentage of school-age children who speak a language other than English at home and have difficulty speaking English has nearly doubled over the last 20 years, increasing from 2.8 percent in 1979 to 5 percent in 1999 (America's children: Key national indicators of well-being, 2001).

Reflective of these demographic changes, today's early care, preschool programs and primary school classrooms are also increasingly diverse. They include many students who come from homes where English is not spoken. According to Kindler (2002), English language learners (ELLs) now represent 9.6 percent of all students enrolled in public pre-kindergarten through grade 12 classes in the United States. Over sixty-seven percent of these students are enrolled at the elementary school level. Over 44 percent of all ELL students are enrolled in Pre-K through Grade 3, with a decreasing number of ELL students in the succeeding grades. In addition, today's population of ELLs speaks a greater variety of native languages. In fact, states reported more that 460 languages spoken by ELL students nationwide—indicating that Spanish is the native language of the great majority of ELLs. Although a large concentration of these students remains in urban areas, this growth expands beyond big cities to include largely rural states such as Vermont, Nevada, West Virginia, and Oklahoma—where immigrant populations are expanding.

THE FOCUS ON SCHOOL READINESS

As communities have become increasingly diverse, greater focus has been placed on early care, education and school readiness. In 1997, the National Education Goals Panel (NEGP) set forth the educational goals for the year 2000 which have continued to guide the school readiness agenda for all young children along five dimensions:

- Physical well-being and motor development (good health, nutrition, and physical capabilities),
- Social and emotional development (a healthy sense of trust, self, and competence as well as the ability to cooperate, regulate emotions, and get along with others),
- Approaches to learning (curiosity, persistence, and problem solving),
- Language development (receptive and expressive communication skills), and
- Cognition and general knowledge.

The report emphasized that school readiness for young children depends on early supports and strong foundations to assure these five dimensions of readiness. Recognizing the early and important role of family and community supports, the NEGP recommended that parents are recognized as a child's first teacher and that parents receive the support that they need to fill that role; that all children receive the health, mental health, and nutrition they need to be healthy and alert; and that all children have access to high-quality and developmentally appropriate early care and preschool programs. For schools, providing a "ready for children" environment and experience means serving children within their communities; facilitating a smooth transition between home and school; striving for continuity between early care and education programs and elementary school; and offering developmentally appropriate and effective learning experiences (Zaslow et al., 2000). For today's diverse young children, these environments or contexts are first and foremost the family and secondarily the community—both have cultural and linguistic implications.

THE CONTEXT OF FAMILY

When a child is born into a family, that child enters into the world of his or her earliest and closest relationships. Within the context of his or her family, the child's care is influenced by his or her parents' cultural belief systems, which are translated into parenting practices and guidance for child development (Harkness & Super, 1992). The home culture, including language, creates the background for all interactions and early learning within the family. In addition, the family culture provides the child with a sense of identity and a framework for interpreting the world. (Regional Educational Laboratory Network, 2000). Every family, including both immigrant and native-born families with varying cultural and linguistic backgrounds, brings their unique experience, values, and beliefs to being a family and raising young children. The family's cultural influence on health, growth and development, child-rearing, family relationships, and learning expectations can shape the child's (and family's) school readiness as well as the child's success in school. These factors can also impact the family and child's approach to work, play, and access to services and supports in the community.

THE CONTEXT OF COMMUNITY

Defining community is an elusive concept; it means different things to different people (Magrab, 1999). Every community has its own culture, including those where immigrant populations have recreated their home culture. In most cases, today's mobility, sophisticated communication systems, and inter-twined service and support structures inevitably lead to families crossing "community lines" and having exposure to out-of-home and potentially "out-of-culture" experiences. While this applies to all families, it is particularly true of those who are immigrants or refugees, new to a country and community, and speak languages other than English.

Continuity of care is important for developing young children and their families and begins with the development of connections between the child's home and the care and education, health, and social services in the community (Regional Educational Laboratory Network, 2000). Effective communities are those that respect the values, self-determination, and priorities of families and translate their needs and desires into appropriate resources, supports, and services (Magrab, 1999). It is the community where these services strive to be culturally and linguistically competent that can be most responsive to each family and each child, offer continuity of care, and support school readiness.

DISPARITY: WHEN THE WORLDS DON'T MEET

When the impact of a family's race, ethnicity, language, and culture is not recognized and understood there is risk of isolation and alienation. When the community does not offer competent services and supports for diverse families and children, families may be less likely to participate in the community, and access needed services; thus potentially compromising the child's readiness for school. Different worldviews and perceptions of:

- Parenting roles and functions;
- Expectations of young children and beliefs about appropriate developmental goals;
- Views about needing and accepting "help" from non-family members;
- Fears about being judged unfavorably; and
- Barriers imposed by language can result in rejection of and attrition from traditional program formats and strategies (National Research Council and Institute of Medicine, 2000).

Some of the risks of non-access to or non-participation in services have been well documented in health and mental health services. The National Institute of Health (NIH) has documented that U.S. minority populations have shorter overall life expectancies and higher rates of specific diseases, including those that affect young children such as infant mortality, birth defects, immunizations, and asthma. Disparities in health status have been a focus of *Healthy People 2010*; a comprehensive set of national health objectives issued every decade by the Department of Health and Human Services, and have led to high-profile research and policy initiatives to bridge these gaps. The Supplement to Mental Health: A Report of the Surgeon General (U.S. Department of Health and Human Services [DHHS], 1999) documents the existence of striking disparities for minorities in mental health services and the underlying knowledge base. Racial and ethnic minorities have less access to mental health services

and are less likely to receive needed care. When they receive care, it is more likely to be poor in quality. In addition to barriers of cost of care, societal stigma, and the fragmented organization of services, providers' lack of awareness of cultural issues, bias, or inability to speak the client's language are also factors in this disparity.

While much of this research is based on the health and mental health of adults and older youth, it is possible to assume this same basic truth for young children and anticipate the potential impact on school readiness. For example, if one adds the limited availability of mental health services for young children nationally and the reluctance of many to acknowledge emotional or behavioral difficulties in very young children, the picture may be even bleaker for this age group. Those young children who have difficulty managing their feelings, controlling their impulses, and getting along with others **and** are unable to access appropriate services face challenges in being ready for school and academic achievement. As part of better understanding and intervening to reduce these disparities, many of these research studies and initiatives recommend services and supports that are more culturally and linguistically competent. More competent services can support families and young children in all dimensions that influence and define school readiness.

OVERVIEW OF THE LITERATURE AND THE MEANING OF CULTURE IN CHILD DEVELOPMENT

According to the recent and comprehensive study entitled *Neurons to Neighborhoods*, conducted by the National Research Council and Institute of Medicine, the concept of culture offers a promising framework for thinking about the full meaning of nurture, it's influence on child development, and the implications for communities. In its examination of the research and evidence base, the study discovered the complexity and depth of how to really understand the role of culture on child development and in turn, school readiness.

Citing numerous studies and a broad array of extent research related to multiple aspects of child development, family, nurturing relationships, community, and early care and learning environments, the study asserts several important take home messages that establish the relevance of cultural and linguistic competence to all domains for child development and dimensions of school readiness.

TEN TAKE HOME MESSAGES

- 1. Increasing diversity in the contemporary U.S. population and the continuing influx of immigrants and refugees reinforces the compelling need for and the complexity of research on the role of culture in the development of young children.
- 2. In societies where survival and protection is assumed, childrearing practices reveal a process of socialization that reflects the values of the culture and the aspiration of parents for their children.
- 3. Parent belief systems and modes of parent-child interaction provide some of the most important ways in which culture is embedded in the process of child rearing during the early years of life.

- 4. Cultural practices related to early childrearing (e.g., feeding, sleeping, communication, discipline, exploring and learning, fostering independence or interdependence) are highly variable and lead to different developmental outcomes.
- 5. The foundations of relationships and the fundamentals of socialization (e.g., attachment, caregiving roles and responses, getting along with others) are culturally embedded and established during the early childhood years.
- 6. There are cross-cultural differences in the role that parents' expectations play about the importance of various forms of achievement in children's early learning.
- 7. Language development and the emergence of early learning capabilities are resilient processes, similar across cultures, and proceed apace even when the child is faced with learning two languages simultaneously.
- 8. Culture is not static; instead it evolves from one generation to the next. There is considerable variability among childrearing environments that promote healthy development, much of which is embedded in different values and cultural practices that are passed on from one generation to the next and are continually transformed by each generation based on the times in which it lives.
- 9. The design and implementation of early childhood policies and practices must be examined through a cultural lens in order to avoid biased ethnocentric value judgments on the part of providers, avoid inappropriate or intrusive interventions, and guide state-of-the art practices—which include family centered, child-focused, and individualized care.
- 10. The growing racial, ethnic, linguistic, and cultural diversity of the early childhood populations requires that all early childhood programs and medical services, periodically reassess their appropriateness and effectiveness for the wide variety of families they are mandated to serve.

(National Research Council and Institute of Medicine, 2000)

These assertions support the importance of building culturally and linguistically competent services, supports, programs, and practices across those systems that serve young children and their families. From a holistic and ecological view of child development and school readiness, these systems include health, mental health, and early care and education. This tool kit will provide both broad and specific guidelines, strategies, and tools that can be adapted and applied to these service systems.



OVERVIEW OF THE ISSUE

Before beginning the rich and deep process of moving toward cultural and linguistic competence, it is useful to share a common language or set of definitions that have been applied to these concepts. Without this common language and shared knowledge, it is difficult to plan, implement, and evaluate any effort to build culturally and linguistically competent services, supports, programs, and practices. The highlighted definitions represent those terms used most frequently throughout the tool kit.

SOME BASIC TERMS

For the purposes of this tool kit the following definitions will apply:

• Ethnic

Of or relating to large groups of people classed according to common racial, tribal, religious, or linguistic, or cultural origin or background.

• Ethnicity

Ethnic quality or affiliation

• Race

There is an array of different beliefs about the definition of race and what race means within social, political, and biological contexts. The following definitions are representative of these perspectives:

- A tribe, people, or nation belonging to the same stock; a division of humankind possessing traits that are transmissible by descent and sufficient to characterize it as a distinctive human type.
- Race is a social construct used to separate the world's peoples. There is only one race, the human race, comprised of individuals and characteristics that are more or less similar to others.
- Evidence from the Human Genome project indicates that the genetic code for all human beings is 99.9% identical; there are more differences within groups (or races) than across groups.
- Culture

An integrated pattern of human behavior which includes thought, communication, languages, beliefs, values, practices, customs, courtesies, rituals, manners of interacting, role, relationships and expected behaviors of a racial, ethnic, religious or social group and the ability to transmit this pattern to succeeding generations.

Acculturation

Cultural modification of an individual, group, or people which involves adapting or borrowing traits from another culture; a merging of cultures as a result of prolonged contact.

Assimilation

To assume the cultural traditions of a given people or group.

• Cultural Awareness

Being cognizant, observant, and conscious of similarities and differences among cultural groups.

• Cultural Sensitivity

Understanding the needs and emotions of your own culture and the culture of others. (Goode, T, 1997, revised 2000)

• Cultural Competence

Cultural competence is a set of congruent behaviors, attitudes, policies, structures, and practices that come together in a system, agency or among professionals and enable that system, agency or those professionals to work effectively in cross-cultural situations. The word "culture" is used to imply the integrated pattern of human behavior that includes thoughts, communications, actions, customs, beliefs, values, and institutions of a racial, ethnic, religious or social group. The word competence is used because it implies having the capacity to function effectively. A culturally competent system of care, agency, or organization acknowledges and incorporates—at all levels—the five essential elements noted below in all aspects of policy making, administration, practice, and service delivery and systematically involves consumers, key stakeholders, and communities. (modified from Cross, et al., 1989)

• Linguistic Competence

Linguistic competence is the capacity of an organization and its personnel to effectively communicate with persons of limited English proficiency, those who have low literacy skills or are not literate, and individuals with disabilities. These may include, but not limited to, the use of: bilingual/bicultural staff; cultural brokers; multilingual telecommunication systems; TTY; foreign language interpretation services; sign language interpretation services; ethnic media in languages other than English; print materials in easy to read, low literacy, picture and symbol formats; assistive technology devices; computer assisted real time translation; materials in alternative formats; varied approaches to sharing information with individuals who experience cognitive disabilities; and translation of legally binding documents, signage, health education materials, and public awareness materials and campaigns. The organization must have policy, structure, practices, procedures, and dedicated resources to support this capacity. (Goode & Jones, 2002)

A. Definitions

THE CULTURAL COMPETENCE CONTINUUM

To understand the process of moving toward becoming culturally competent, it can be helpful to consider a six-point continuum and the characteristics of each point on the continuum. According to Cross, Bazron, Dennis, and Isaacs, (1989), these points are:

- **Cultural Destructiveness**—characterized by intentional attitudes, policies, and practices that are destructive to cultures and consequently to individuals within the culture.
- **Cultural Incapacity**—characterized by lack of capacity to help minority clients or communities due to extremely biased beliefs and a paternal posture toward those not of the mainstream culture.
- **Cultural Blindness**—characterized by the belief that service or helping approaches traditionally used by the dominant culture are universally applicable, regardless of race or culture. These services ignore cultural strengths and encourage assimilation.
- **Cultural Pre-Competence**—characterized by the desire to deliver quality services and a commitment to diversity, indicated by hiring minority staff, initiating training, and recruiting minority members for agency leadership, but lacking information on how to maximize these capacities. This level of competence can lead to tokenism.
- **Cultural Competence**—characterized by acceptance and respect for difference, continuing self-assessment, careful attention to the dynamics of difference, continuous expansion of knowledge and resources, and adaptation of services to better meet the needs of diverse populations.
- **Cultural Proficiency**—characterized by holding culture in high esteem; seeking to add to the knowledge base of culturally competent practice by conducting research, influencing approaches to care, and improving relations between cultures.

CULTURAL AND LINGUISTIC COMPETENCE IN SYSTEMS OF CARE, SERVICES AND SUPPORTS

When applying the concept of cultural and linguistic competence to organizations, agencies, systems of care, and the personnel offering services and supports to young children and families, it is helpful to have these clear definitions as well as understand their underpinning core elements and values. A culturally and linguistically competent system of care (or services and supports) acknowledges and incorporates—at all levels—the five essential elements and the underlying values and principles that follow. Although these essential elements and the underlying values and principles were developed in the context of examining effective services for minority children who are severely emotionally disturbed (Cross et al., 1989), they can be applied to all systems that support the positive growth and development of young children and their families and prepare young children to be ready for school.

Five Essential Elements for a Culturally Competent System of Care

A culturally competent (*early childhood services and supports*) system of care would:

- Value, accept and respect diversity;
- Have the capacity, commitment, and systems in place for cultural self-assessment;
- Be conscious of the dynamics inherent when cultures interact;
- Have continuous expansion of institutionalized cultural knowledge; and
- Have developed service delivery models, modes, and adaptations to accommodate diversity.

Underlying Values and Principles

- The family, as defined by each culture, is the primary system of support and preferred point of intervention;
- The system must recognize that minority populations have to be at least bicultural and that this status creates a unique set of issues to which the system must be equipped to respond;
- Individuals and families make different choices based on cultural forces; and these choices must be considered if services are to be helpful;
- Inherent in cross-cultural interactions are dynamics that must be acknowledged, adjusted to, and accepted;
- The system must sanction and in some cases mandate the incorporation of cultural knowledge into practice and policymaking;
- Cultural competence involves working in conjunction with natural, informal support and helping networks within the minority community, e.g., neighborhoods, churches, spiritual leaders, healers, etc.;
- Cultural competence extends the concept of self-determination to the community. Only when a community recognizes and owns a problem does it take responsibility for creating solutions that fit the context of the culture;
- Community control of service delivery through minority participation on boards of directors, administrative teams, and program planning and evaluation committees is essential to the development of effective services;
- An agency staffing pattern that reflects the makeup of the potential client populations, adjusted for the degree of community need, helps ensure the delivery of effective services; and
- Culturally competent services incorporate the concept of equal and nondiscriminatory services, but go beyond that to include the concept of responsive services matched to the client population. (Cross et al., 1989)

Planning and Implementation SELF-ASSESSMENT AND PLANNING PROCESS

OVERVIEW OF THE ISSUE

The definitions, essential elements, and underlying values and principles provided in the previous section can help guide the development of culturally and linguistically competent services relevant to young children and their families. These terms can be applied within and across systems that serve young children and their families and can establish common ground within communities for full participation of its members in community development work.

Planning any community or service delivery system effort includes many partners and a process for community and system development. When planning for cultural and linguistic competence and continuity for young children and their families, all systems that are part of the lives of young children and support their healthy growth and development are important partners. In particular, when supporting young children and their families toward school readiness, a holistic perspective must consider health, early care and education, mental health, and social and human service organizations. Partners in the process must represent these systems and must also represent the diversity of the community itself including families as primary partners. By building on the strengths, partnerships, and social capital of a diverse community, services and supports can be made most accessible and responsive to its youngest community members and their families.

PROCESS FOR DEVELOPMENT

A community-based planning process as well as those processes within organizational and service systems can support one another toward culturally and linguistically competent services and supports. A strategic planning process focused on this content area would include the following steps:

- Assessing the environment and building support;
- Facilitating leadership, including family and community representatives;
- Identifying and developing resources;
- Setting goals and outlining action steps;
- Implementation;
- Evaluation; and
- Training and technical assistance.

Many of the available cultural and linguistic competence planning and implementation guidelines, resources, examples, and checklists, are specific to health services and primary care. The planning approach and process described in these resources can be adapted to other systems, organizations, and programs, some of which offer relevant guidelines and policies (see Annotated Resources section for guidelines from Center for Substance Abuse and Prevention, 2000; Division of Early Childhood, 2002; Head Start Bureau, 1992; National Association for the Education of Young Children, 1995; and Office of Minority Health, 2001).

Critical Questions for Communities

- What are the diversity issues within our community and our service and support systems that most impact young children, their families, and their readiness for school?
- What indicators are there to support a need for cultural and linguistic competency? In what services? In what systems?
- What planning group already exists or needs to form to focus on this effort?
- What key partners must be involved and how can family participation be ensured?
- How will leadership and decision making processes be determined?
- What resources or promising practices in cultural and linguistic competency already exist within our community?
- What resources (including training and technical assistance) would be useful to us?
- Once there is a strategic plan, how will implementation, monitoring progress, and evaluating outcomes be assured?

Key Strategies for Families, Providers, and Administrators

What can families can do:

- Represent your community and personal cultural perspective on the planning group for developing cultural and linguistic competence.
- Take a leadership role in the planning, implementation and evaluation process.
- Help to identify key partners who should be included in the planning process.

What providers can do:

• Represent your service system's perspective on the planning group for developing cultural and linguistic competence in your community.

- Volunteer to take a leadership role within your own organization's effort.
- Respect, encourage, and support parent participation and bring other community providers to the table.

What administrators can do:

- Value and support cultural and linguistic competence as a priority for your own organization.
- Dedicate resources (time, staff, expertise, etc.) to the community and/or organizational planning process.
- Adopt policies and practices that support implementation of culturally and linguistically competent services.

McLean County, Illinois

Community-based program forms community partnerships for strong and healthy families.

COMMUNITIES CAN!, COMMUNITIES OF EXCELLENCE, 2003

McLean County is a community of 154,000 people (including the metropolitan area of Bloomington-Normal) located in central Illinois, approximately 130 miles southwest of Chicago. According to Census 2000 data, McLean County's population grew 16.5 percent in the 1990's, including an increase in the diverse cultures and races within the county. The African American community increased more than 67% and the Hispanic/Latino community more than doubled between 1990 and 2000. Though the census shows 3,800 Hispanic/Latino residents, the actual number is estimated to be above 5,000.

Since 1977, the Hispanic Outreach Program of Western Avenue Community Center (WACC-HOP) has served the Hispanic population for "whatever the need is." WACC-HOP is known for its direct service and support to Spanish-speaking children and families, including case management, sponsoring of health fairs and school registration sessions, a pantry for food/clothing/toiletries, interpretation/translation, immigration services, supportive work services, advocacy and counseling services-including a Latino women's self-esteem support group for victims of domestic violence. The Hispanic Outreach Program is the only program of its kind in central Illinois and social service agencies as well as the Hispanic population itself know to contact WACC-HOP when there is a question or need with services. Their excellent reputation of responding to consumers within the Hispanic/Latino community helped forge a new partnership between WACC and the McLean County Health Department in 2002. As a result, WACC-HOP is now the sole provider of Spanish interpreting and translation services for all of the Health Department's public services.

In response to the doubling of the population from 1990 to 2000 and a concern for all sectors to re-evaluate services how to best serve these children and families, several persons in the community came together to develop a task force in 2000. Bienvenidos Neighbors (BN) ("Welcome Neighbors"), sponsored by the Mayor of Bloomington, hoped to help new immigrants assimilate into the community as well as assist the community in serving them. Drawing heavily on the knowledge and experience of the then two staff at WACC-HOP, BN initially completed a community needs assessment. Based on the results from that survey, they hosted several well attended workshops over the next two years that included community resident representatives of many races and cultures as well as representatives from municipalities, service providers, and businesses. This task force has been dormant for two years but has plans to re-initialize in 2004.

For more information about the Hispanic Outreach Program and Bienvenidos Neighbors see the Western Avenue Community Center website at www.westernavenuecc.org or contact HOP by e-mail hop@westernavenuecc.org

Checklist of Potential Partners for Planning and Implementing Culturally and Linguistically Competent Services to Young Children and Their Families

Partners for planning culturally and linguistically competent services and supports for young children and their families should include all those that impact children's growth, development, and readiness for school. Communities should consider this checklist a starting point and make partner selections based on their own community, their particular focus and intent, and available resources.

Families:

Parents Extended family (Grandparents, etc.) Foster parents Adoptive parents Kith—friends who are like family Interested citizens

Community Leaders:

Cultural group leaders Spiritual or religious leaders Community elders Empowered citizens Legislators

Early Care and Education:

Child care providers Head Start and Early Head Start Public and private preschools Early intervention services Special education Elementary Schools

Health and Mental Health Care:

Health care agencies and providers Mental health agencies and providers Public health and WIC services Dental care providers Healthy Start Healthy Families America Visiting nurses Managed care organizations Specialty health care services (occupational therapy, physical therapy, speech therapy, rehabilitation services, etc.)

Business Community:

Major local employers Small business owners Specialty service vendors, e.g., translation services

□ Community and Social Services:

Child welfare Family support TANF Housing authority Recreation and parks Police Immigration Public library services

□ Language and Literacy Groups:

Even Start Family literacy English as second language providers

Advocacy Groups:

Child advocacy groups Parent support and advocacy groups Family support and advocacy groups Mental health advocacy groups Health advocacy groups Cultural advocacy groups

Community Organizations:

Lions Clubs and other civic groups Cultural organizations Volunteer organizations Faith community

Foundations/Non-profits:

United Way Red Cross Private non-profits

Associations:

Parent teacher associations Child care associations Head Start associations Professional associations, e.g., State or local Psychological Association Fraternal associations

Rationale for Self-Assessment

Health and human service organizations are recognizing the need to enhance services for culturally and linguistically diverse populations. Assessing attitudes, practices, policies and structures of administrators and service providers is a necessary, effective and systematic way to plan for and incorporate cultural competence within an organization. Determining the needs, preferences and satisfaction of family members/consumers is an essential aspect of this process.

The Benefits of Self-Assessment

The National Center for Cultural Competence (NCCC) supports the concept that cultural competence is a developmental process and evolves over an extended period. Both organizations and individuals are at various levels of awareness, knowledge and skill acquisition along the cultural competence continuum. The capacity to engage in self-assessment helps organizations to:

- gauge the degree to which they are effectively addressing the needs and preferences of culturally and linguistically diverse groups;
- establish partnerships that will meaningfully involve families/consumers and key community stakeholders;
- improve family/consumer access to and utilization of services and enabling supports;
- increase family/consumer satisfaction with services received;
- strategically plan for the systematic incorporation of culturally and linguistically competent policies, structures and practices;
- allocate personnel and fiscal resources to enhance the delivery of services and enabling supports that are culturally and linguistically competent; and
- determine individual and collective strengths and areas for growth.

There are numerous benefits to self-assessment. Such processes can lead to the development of a strategic organizational plan with clearly defined short-term and long-term goals, measurable objectives, identified fiscal and personnel resources, and enhanced consumer and community partnerships. Self-assessment can also provide a vehicle to measure outcomes for personnel, organizations, population groups and the community at large. The NCCC views self-assessment as an ongoing process, not a one-time occurrence. It offers organizations and their personnel the opportunity to assess individual and collective progress over time.

The NCCC's Values and Guiding Principles of Self-Assessment

The NCCC uses a set of values and principles to guide all of its self-assessment activities including the development of knowledge and products, dissemination, and the provision of technical assistance and consultation.

Self-assessment is a strengths-based model.

The purpose of self-assessment is to identify and promote growth among individuals and within organizations that enhances their ability to deliver culturally and linguistically competent services and supports. Self-assessment emphasizes the identification of strengths, as well as areas of growth, at all levels of an organization. The process also allows organizations to identify and acknowledge the internal strengths and assets of personnel that in many instances are inadvertently overlooked.

- A safe and non-judgmental environment is essential to the self-assessment process. Self-assessment is most productive when conducted in an environment that: (1) offers participants a forum to give honest statements of their level of awareness, knowledge and skills related to cultural and linguistic competence; and (2) provides an opportunity for participants to share their individual perspectives in a candid manner; and (3) assures that information provided will be used to effect meaningful change within the organization. The NCCC embraces the concept that cultural competence is developmental and occurs along a continuum (Cross et. al.) It matters not where an individual or organization starts, as long as there is continued progression towards the positive end of the continuum.
- A fundamental aspect of self-assessment assures the meaningful involvement of consumers, community stakeholders and key constituency groups. Principles of self-determination and cultural competence assure that consumers are integrally involved in processes to plan, deliver, and evaluate services they receive. These principles extend beyond the individual to the community as a whole. Self-assessment must solicit and value the experiences and perspectives of consumers and families who receive services. Similarly, opinions should be sought from key stakeholders and constituency groups within the broad integrated service delivery system. An inclusive self-assessment process can forge alliances and partnerships that have long-lasting benefit for the organization and the larger community.
- The results of self-assessment are used to enhance and build capacity.

The intent of the self-assessment process is neither to render a score or rating nor to label an individual or an organization. Rather, it is intended to provide a snapshot as to where an individual or organization is at a particular point in time. Results should be used to strategically plan long- and short-term objectives to enhance the organization's capacity to deliver culturally and linguistically competent services at all levels within the organization, including: policy makers, administrators, providers, subcontractors and consumers at both the state and local level. The NCCC's experiences with self-assessment have demonstrated that comparisons between professionals and among organizations are of little benefit. Greater benefit is derived from individual and organizational self-comparison over extended periods of time to ascertain the extent to which growth has occurred.

- Diverse dissemination strategies are essential to the self-assessment process. Self-assessment results should be shared with participants and key stakeholders in a manner that meets their unique needs. The NCCC has employed an array of dissemination strategies that are tailored to the specific interests of the participating organization. This involves identification of the audiences and the presentation of the data in formats that are most useful and accessible. Additionally, this recognizes that the need for information will vary for policy makers, administrators, service providers, consumers and other stakeholders. Examples include but are not limited to:
 - comprehensive reports and executive summaries
 - Power Point presentations
 - conference calls
 - on-site program and workgroup consultations
 - "Town Hall" style meetings, and
 - strategic planning sessions.

The NCCC has provided linguistic and sign language interpretation services and translation of materials that respond to the needs of varied constituency groups. These strategies demonstrate an understanding of and respect for the diverse communication and learning styles among individuals and groups.

Useful Steps for Planning and Implementing Self-Assessment

The process of self-assessment is as important as the outcome. The NCCC has found the following steps to be very beneficial to the self-assessment processes it has conducted with seven State Title V MCH/CSHCN programs.

□ Cultivating Leadership. It is incumbent upon leadership to establish a rationale for and to promote self-assessment as an organizational goal and priority. Cultivating leadership, in this instance, would encompass identifying members from all strata of an organization to fulfill leadership roles in the self-assessment process. "Effective leadership usually involves relinquishing or sharing power...at many levels" (Mahan, 1997). An emphasis should be placed on encouraging personnel to assume leadership roles at all levels of the organization. Shared power is an integral principle of leadership development (Kouzes & Posner, 1990; Covey, 1996; Melaville & Blank, 1991; Lipman-Blumen, 1996).

□ Getting "Buy-In". Establish a shared vision that conveys the importance of the selfassessment process to the overall organization, its personnel, the families/consumers and communities served. "Sharing a view of the future represents the most important context for effecting change" (Roberts & Magrab, 1999). When individuals are involved in the generation and use of knowledge...this enables different groups of people to act collectively based on informed decisions (Selener, 1990). A major benefit is the formation of a coalition of stakeholders, who are informed and prepared to affect and sustain change to improve the delivery of services and enabling supports.

□ Assuring Community Collaborations & Partnerships. A major principle of cultural competence involves working in conjunction with natural, informal, support and helping networks within diverse communities (Cross et al., 1989). From the inception of the self-assessment process, include community partners and key stakeholders in meaningful ways. Some examples are developing a shared vision, identifying leadership roles and

responsibilities, distributing tasks equitably based on capacity, and allocating resources. It is important to recognize that individuals and groups will choose different levels of involvement and ways to participate. This may vary from serving on task forces or workgroups, participation in focus groups, making in-kind or other fiscal contributions, sub-contracting for specific services to providing meeting facilities and other accommodations. It is essential to demonstrate that the contributions of each community partner are valued and respected.

□ Structuring Support for the Process. Convene a committee, work group or task force that will assume responsibility for the self-assessment process. The group should have representation from policy making, administration, service delivery, consumers and other community stakeholders. It should also reflect the diversity of the organization and the community at large. This group is the primary entity for planning and implementing the self-assessment process, and should have ready access to decision makers or have the ability to make decisions.

□ Allocating Personnel and Fiscal Resources. Conducting a self-assessment process is resource intensive. It requires a dedicated budget and level of effort for organizational personnel. This may also extend to community partners and key stakeholders involved in the process. Budgetary considerations may include subcontracts for the self-assessment process such as consultants/facilitators, meeting or conference facilities, and interpretation and translation services. There may be other associated costs for: stipends/honoraria for consumer participation and family supports; local/domestic travel reimbursement; and printing, mailing and other dissemination activities. Consideration should be given to the necessary level of effort for personnel who have responsibility for this process. This will entail delineating responsibilities and determining the duration and intensity of time required for personnel. It may require deferment or reassignment of current workload/duties. The self-assessment process depends on a well-crafted allocation of personnel and fiscal resources.

☐ Managing Logistics. The ability to effectively coordinate numerous logistical tasks is vital to the self-assessment process. The task force or workgroup needs to insure sufficient time to plan and prepare, timely dissemination of information to all involved and the development of a calendar and schedule of activities (e.g., sites and times for regular meetings, teleconferences, focus groups, administering the self-assessment instrument, data collection and analysis and dissemination of results).

□ Analyzing and Disseminating Data. The active involvement of individuals, groups and communities is a highly valued and integral aspect of the self-assessment process. Task force and workgroup members need to plan their involvement in data collection (Census and program needs assessment data blended with the data from the self-assessment), analysis, interpretation, presentation and dissemination. This approach is commensurate with culturally competent and participatory action designs in research and evaluation (Brandt, 1999; Caldwell, et al., 1999; Goode & Harrison, 2000).

- ☐ **Taking the Next Steps.** The self-assessment process can yield a wealth of information about organizational strengths and areas for growth. Careful consideration should be given to:
 - establishing organizational priorities;
 - developing a strategic plan with goals and objectives to sustain strengths and address growth areas;
 - allocating necessary resources to accomplish strategic plan goals;
 - sustaining and maintaining partnerships with community stakeholders; and
 - incorporating self-assessment results into the state block grant planning and development process.

The self-assessment process may lead to changes in: organizational mission, policies, structures and procedures; staffing patterns; position descriptions and personnel performance measures; delivery of service and supports; outreach and dissemination approaches; composition of advisory boards and committees; professional development and inservice training activities; and management and information systems (MIS) and telecommunication systems. Achieving cultural competence is a long-term commitment. Remember that it is accomplished one step at a time.

References

Brant, J. et al., Oncology nursing society multicultural outcomes: Guidelines for cultural competence (USA: The Oncology Press, 1999.)

Caldwell, C., Jackson, K., Tucker, B., and Bowman, P. (In press). "Culturally Competent Research Methods in African American Communities: An Update." *Advances in African American Psychology: Theory, Paradigm Methodology, and Reviews*, ed. R.L. Jones. Hampton, VA: Cobb and Henry Publishers.

Covey, S. (1996). Three roles of the leader in the new paradigm. *The leader of the future: New visions, strategies and practices for the new era.* In Hesselbein, F., Goldsmith, M., & Beckhard, R. (Ed.) San Francisco: Jossey-Bass.

Cross, T., Bazron, B., Dennis, K., and Isaacs, M. (1989). *Towards a culturally competent system of care volume I.* Washington, D.C.: Georgetown University Child Development Center, CASSP Technical Assistance Center.

Goode, T. & Harrison, S. (2000). *Policy brief 3: Cultural competence in primary health care: Partnerships for a research agenda.* Washington, D.C.: Georgetown University Child Development Center. Kouzes, J. M. & Posner, B.Z. (1990). *The leadership challenge*. San Francisco: Jossey-Bass.

Lipman-Blumen, J. (1996). *The Connecting edge: Leading in an independent world.* San Francisco: Jossey-Bass.

Magrab, P.R. (1999). The meaning of community. In Roberts, R. N. & Magrab, P.R. (Eds.), (pp. 3-29). Where children live: Solutions for serving children and their families. Stamford, CT: Ablex Publishing.

Mahan, C. (1997). Surrendering control to the locals. *Journal of Public Health Management and Practice, Vol. 3*(1).

Mason, J. (1996). *Cultural competence self-assessment questionnaire*. Portland, Oregon: JLM & Associates.

Melaville, A. & Blank, M. (1991). What it takes: Structuring interagency partnerships to connect children and families with comprehensive services. Washington, D.C.: Education and Human Services Consortium.

Selener, D. (1990). "Participatory Evaluation. People's knowledge as a source of power." *Networking Bulletin.*

Suggested Citation: Goode, T., Jones, W., & Mason, J. (2002). A guide to planning and implementing cultural competence organization self-assessment. Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child and Human Development. For more information go to http://gucchd.georgetown.edu/nccc

Getting Started...Planning, Implementing and Evaluating Culturally and Linguistically Competent Service Delivery Systems for Children With Special Health Needs and Their Families

Implications for Policy Makers and Administrators

This checklist was developed by the National Center for Cultural Competence (NCCC). It is one in a series designed to assist organizations and systems of care to develop policies, structures and practices that support cultural and linguistic competence. This checklist focuses on systems of care and organizations concerned with the delivery of services and supports to children with special health care needs and their families.

- □ **Create a structure.** Convene a work group within your organization with the sole purpose of addressing cultural and linguistic competency. This group should have representation from all levels of the organization. It should also reflect the diversity within the organization and community at large—including family and youth. This group can serve as the primary body to plan, implement and provide oversight to the organization's cultural competence efforts.
- □ Clarify values and philosophy. Ensure that the organization has values, principles and/or mission that incorporate culture as an integral aspect of all of its endeavors. Use an inclusive process to re-visit and if necessary amend the organization's values and mission. The inclusion of families, youth and community constituency groups can enrich this process.
- □ Develop a logic model for cultural and linguistic competence. There are numerous concepts and definitions for cultural and linguistic competence. Reach consensus on a definition or framework for cultural competence and linguistic competence within the context of your organization and the communities it serves. Engage key stakeholders in this process. The work group may assume leadership or facilitate this effort.
- □ Keep abreast of community demographics. Determine the racially, ethnically, culturally and linguistically diverse populations served by your program, and those that live in the geographic area. Determine and address any disparity in access and utilization of services. Be cognizant of the sub-cultures and within group differences among these populations.
- □ Assess consumer satisfaction. Use multifaceted approaches to assess the degree to which youth and families are satisfied with services they receive. Include probes that elicit the extent to which consumers feel their belief systems and cultural practices are respected and integrated in the health care they receive. Telephone interviews, written surveys and focus groups are commonly used processes. Key informants or cultural brokers can provide guidance on approaches to best assess consumer satisfaction that are consistent with the cultural norms of youth, families and communities.

Getting Started... Continued

□ **Create structures for family and youth involvement.** Consumers should be integrally involved in the design and implementation of services they receive. Establish governance boards, advisory committees, task forces and work groups to facilitate the meaningful involvement of families and youth in all aspects of your organization. Ensure an environment where trust, respect and shared power are highly valued and required.

□ Conduct a self-assessment. Assessing attitudes, policies, structures and practices is a necessary, effective and systematic way to plan for and incorporate cultural and linguistic competence in organizations. Determine which instruments and consultants best match the needs and interests of your organization. Use self-assessment results to develop an organizational plan for achieving and/or enhancing cultural and linguistic competence. Self-assessment results may lead to changes in: organizational values, mission, policies and structures; budgets/allocation of fiscal resources; composition of advisory boards and committees; strategic planning processes; staffing patterns, position descriptions and personnel performance measures; approaches to practice, treatment and interventions; delivery of supportive services; quality assurance and evaluation methods; approaches to community engagement and information dissemination; professional development and inservice training activities; management information systems; telecommunication systems; and facility design and décor. Allocate resources to support this process.

Determine staff development needs/interests. Conduct periodic assessments of organizational personnel to determine what they perceive as their training or professional development needs and interests related to cultural and linguistic competence. The assessment should query personnel on the preferred methods, approaches and formats for increasing awareness and acquiring new skills and areas of knowledge. Ensure that resources are budgeted to support these efforts.

□ Engage communities. Develop partnerships that acknowledge strengths and build upon the resiliency and many networks of support within diverse communities. Communities have the inherent ability to recognize their own problems, including the health of their members, and intervene appropriately on their own behalf (Goode, 2002). Expand collaborative relationships to include natural helpers, community informants, cultural brokers, faith-based organizations, ethnic-specific and advocacy organizations and local merchants. Give careful consideration to delineating the values and principles that underpin community engagement.

□ Adopt "lessons learned". Network within and dialog with other organizations or systems of care that focus on children special health care needs and their families that have begun the journey of achieving cultural and linguistic competency. Consider the following: (1) reviewing their policies and practices, (2) adapting those that are consistent with your philosophy of care, and (3) negotiating opportunities for mentoring, training, consultation and technical assistance. Access resources from public and private sector centers and programs that have expertise in cultural and linguistic competence (e.g., integrated therapies, indigenous practices, in-home services, culturally defined approaches for health education and literacy, advocacy and community outreach/engagement and youth and family partnerships). Gather and categorize resource materials to expand your organization's library/resource center.

Getting Started... Continued

□ Create a refuge for sharing and learning. Provide safe, non-judgmental forums for personnel to honestly explore cultural considerations—their own and those of the children, youth, families and communities they serve. Including youth, families and community partners can inform and enhance these experiences.

References

Cross, T., Bazron, B., Dennis, K., and Isaacs, M. (1989). *Towards a culturally competent system of care volume I*. Washington, D.C.: Georgetown University Child Development Center, CASSP Technical Assistance Center.

Goode, T. (2001). Policy Brief 4: Engaging communities to realize the vision of one hundred percent access and zero health disparities: a culturally competent approach. Washington, D.C. National Center for Cultural Competence, Georgetown University Center for Child & Human Development.

Goode, T. & Jones, W. (2000, revised 2002). Definition of Linguistic Competence.

Maternal and Child Health Bureau (2002). MCHB Draft 2003-2007 Strategic Plan.

Suggested Citation: Goode, T. (1999/2003). Getting started...Planning, implementing and evaluating culturally and linguistically competent service delivery systems for children with special health care needs and their families. Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child and Human Development. For more information go to http://gucchd.georgetown.edu/nccc

ANNOTATED RESOURCES

BOOKS AND PRINT

A Practical Guide for the Assessment of Cultural Competence in Children's Mental Health Organizations

(1996) ROIZNER, M.

This guide to planning and implementing cultural competence assessments includes a brief review of 14 assessment tools, resources for post-assessment cultural competence, and contact information useful to agency and program administrators, providers, and human resource personnel, cultural competence trainers, and family members.

Technical Assistance Center, Judge Baker Children's Center, 295 Longwood Avenue, Boston, MA 02115, (617) 232-8390 or order online at www.jbcc.harvard.edu/evaluationnew.htm. (\$15.00)

Developing Culturally Competent Programs for Families of Children with Special Needs

(1990) ROBERTS, R.

This monograph and accompanying workbook is designed to help programs, organizations, and states improve their ability to provide culturally competent services to families. The materials provide a framework, program examples, questions, and activities to guide program planning useful to providers, administrators, and early interventionists.

Early Intervention Research Institute: Utah State University, Logan, UT 84322 (435) 797-1172. Available at no cost.

Towards a Culturally Competent System of Care, Volume 1—A Monograph on Effective Services for Minority Children Who are Severely Emotionally Disturbed (1989) CROSS, T., BAZRON, B., DENNIS, K.,

AND ISAACS, M.

This monograph was developed in order to assist states and communities in addressing one of the primary goals of the Child and Adolescent Service System Program (CASSP)—that of appropriateness of care. CASSP seeks to assure that systems and service development takes place in a culturally appropriate way in order to meet the needs of culturally and racially diverse groups. This seminal piece provides a framework and practical ideas for improving service delivery to diverse children and families and is useful to service providers, policymakers, and administrators of public and private child-serving agencies.

National Technical Assistance Center for Children's Mental Health, Georgetown University Center for Child and Human Development, Washington, DC 20007, (202) 687-5000. (\$8.00)

ON-LINE RESOURCES

Bright Futures Cultural Competence Assessment—Primary Care

(1998) Scholle, T.

This assessment form can be administered to families to elicit feedback about their experience with their child's health care provider. This tool was developed through focus groups and interviews with a diverse group of families. Psychometric data are not available on this instrument at this time. For further information or for use as a research tool, contact the individual indicated on the Instructions for Use page. Full text available at www.brightfutures.org/mentalhealth/pdf/ professionals/cultural_comptnc.pdf

University of Pittsburgh for Bright Futures, National Center for Education in Maternal and Child Health, Arlington, VA.

DEC Position on Responsiveness to Family Cultures, Values, and Languages

(2002) THE DIVISION FOR EARLY CHILDHOOD. This position statement, useful to providers, teachers, and early interventionists, supports individualized approaches to serving infants, toddlers, and young children with special needs and their families. In particular, it focuses on the respect, value, and support of the culture, values, and languages of each home and the active participation of all families in child development and learning. Full text available at www.dec-sped.org/positionpapers.html

Guidelines for Assessing Cultural Competence

(2000) CENTER FOR SUBSTANCE ABUSE PREVENTION. SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES Administration.

Provided as technical assistance to SAMHSA grant applicants, these guidelines reinforce cultural competence as a critical component of SAMHSA grant programs and proposed services. They can be useful to planners across systems that serve young children and families. Full text available at www.samhsa.gov/grants/TAManual/ Module5SAMHSA-13.htm#P458_17265

Multicultural Principles for Head Start Programs

(1992) HEAD START BUREAU, ADMINISTRATION ON CHILDREN, YOUTH, AND FAMILIES, U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES.

The principles detailed in this publication are intended to guide Head Start grantee efforts to individualize services for every child and family through understanding, respecting, and responding to the cultures of those children and families they serve. The principles can provide a structure through which individuals, programs, or organizations can develop personal or organizational strategies to support cultural and linguistic competence, child development, and success. Copies can be ordered through the Head Start Information and Publication Center, 1-866-763-6481 (English and Spanish) or online at www.headstartinfo.org or they can be viewed in abbreviated form within the report, Celebrating Diversity In Head Start online at www.acf.hhs.gov/programs/core/pubs_reports/ diversity/diversity ch1 intro.html

National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health Care

(2001) OFFICE OF MINORITY HEALTH (OMH), U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES. The OMH initiated a project to develop recommended national CLAS standards that would support a more consistent and comprehensive approach to cultural and linguistic competence in health care. A comprehensive final report describes 14 individual standards and outlines the development, methodology and analysis undertaken to create the national standards. Copies of the final report of the project, National Standards on Culturally and Linguistically Appropriate Services (CLAS) in Health Care Final Report, are available on request at the Resource Center at 1-800-444-6472 or full text is available at www.omhrc.gov/clas/ds.htm

Policy Brief 1: Rationale for Cultural Competence in Primary Care

(2003) COHEN, E., AND GOODE, T. This policy brief includes guidance and a checklist to facilitate the development of culturally and linguistically competent primary care policies and structures useful to planning groups, administrators, and policy makers. Full text available at http://gucchd.georgetown.edu/nccc National Center for Cultural Competence, Georgetown University Center for Child and Human Development.

Policy Brief 2: Linguistic Competence in Primary Health Care Delivery Systems: Implications for Policy Makers

(2001) GOODE, T., SOCKALINGAM, S., BROWN, M., AND JONES, W.

This policy brief includes guidance and a checklist to facilitate the development of linguistic competence within primary health care organizations useful to planning groups, administrators, and policy makers. Full text available at http://gucchd.georgetown.edu/nccc

National Center for Cultural Competence, Georgetown University Center for Child and Human Development.

Policy Brief 3: Cultural Competence in Primary Health Care: Partnerships for a Research Agenda

(2002) GOODE, T., AND HARRISON, S. This policy brief includes guidance and a checklist to facilitate the development of polices, structures, and partnership that support a culturally competent research agenda in primary health care useful to planning groups, administrators, and policy makers. Full text available at http://gucchd.georgetown.edu/nccc National Center for Cultural Competence, Georgetown University Center for Child and Human Development.

Policy Brief 4: Engaging Communities to Realize the Vision of One Hundred Percent Access and Zero Health Disparities: A Culturally Competent Approach (2001) GOODE, T.

This policy brief includes guidance and a checklist to facilitate cultural competence in community engagement useful to planning groups, administrators, and policy makers. Full text available at http://gucchd.georgetown.edu/nccc

National Center for Cultural Competence, Georgetown University Center for Child and Human Development.

Responding to Linguistic and Cultural Diversity: Recommendations for Effective Early Childhood Education

(1995) National Association for the Education of Young Children, Washington, DC.

This document, useful to early care and education providers, primarily describes ways to support linguistically and culturally diverse children who speak languages other than English. However, the recommendations of this position statement can also apply to children who, although they speak only English, are also linguistically and culturally diverse. Full text available at www.naeyc.org/ resources/position_statements/psdiv98.htm

Review Guidelines for Material Selection: Program Evaluation

(2001) CULTURALLY AND LINGUISTICALLY APPROPRIATE SERVICES, EARLY CHILDHOOD RESEARCH INSTITUTE, UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN, CHAMPAIGN, IL. These guidelines are intended to help service providers and individuals involved in personnel preparation determine the congruence between the beliefs, values, and practices of the individuals in their community and current recommended practices related to early childhood, special education, and cultural and linguistic competence. The content is specific to program evaluation and can be adapted to meet local needs. Full text available at www.clas.uiuc.edu/review/index.html

WEBSITES

Community Tool Box

http://ctb.ukans.edu/tools

This website supported by University of Kansas offers resources for building healthier cities and communities through involving local people working together. It focuses on core competencies in sections titled, Understanding Community Context; Collaborative Planning; Developing Leadership and Enhancing Participation; Community Action and Intervention; Evaluating Community Initiatives; and Promoting and Sustaining the Initiative. Three chapters that focus on cultural competence and diversity, with the accompanying tip sheets, checklists, and tools, may be useful to community leaders and organizers.

Diversity Rx

www.diversityrx.org

This website is dedicated to promoting language and cultural competence to improve the quality of health care for minority, immigrant, and ethnically diverse communities. Useful to health care programs, administrators, and providers, it focuses on the rationale for competent services; describes models and promising practices; highlights policy issues and laws impacting care, organizational policies and protocols; and offers networking resources and additional links.

ORGANIZATIONS

California Tomorrow

www.californiatomorrow.org

California Tomorrow's mission is to help create a fair and equitable society that promotes full participation of all people, values culture, language and racial identity, and embraces diversity as our greatest asset by supporting individual, institutional, and community transformation through action research, policy advocacy, and capacity building. California Tomorrow provides a variety of services including technical assistance, facilitation, training, and professional development. Activities are designed for a variety of audiences including public school teachers, administrators, child care professionals, and others in the field of integrated human services and community building. All services are rooted in research and expertise on issues of diversity and equity and focus on topics such as immigrant and bilingual education, equitable school restructuring approaches, using data and community voice to drive institutional reform, and principles of quality care and early childhood education in a diverse society.

Multicultural Early Childhood Team Training (MECTT)

www.kihd.gmu.edu/mectt

MECTT is a model for preparing parent and professional leadership teams to improve services to diverse families of young children with special needs—infusing cultural competence in early childhood programs. By providing resources, training, and technical assistance to individual programs as well as community and statewide initiatives, MECTT prepares leadership teams to increase the involvement of diverse families in their children's development and education, deliver culturally competent family centered services, provide training and technical assistance to local staff, and work as a community or statewide team to develop a coordinated plan for infusing culturally responsive services.

National Center for Cultural Competence

http://gucchd.georgetown.edu/nccc

The mission of the National Center for Cultural Competence (NCCC) is to increase the capacity of health care and mental health programs to design, implement and evaluate culturally and linguistically competent service delivery systems. The NCCC conducts an array of activities to fulfill its mission including: 1) training, technical assistance and consultation; 2) networking, linkages and information exchange; and 3) knowledge and product development and dissemination. Major emphasis is placed on policy development, assistance in conducting cultural competence organizational self-assessments, and strategic approaches to the systematic incorporation of culturally competent values, policy, structures and practices within organizations.

National Indian Child Welfare Association (NICWA)

www.nicwa.org

NICWA is a comprehensive source of information on American Indian child welfare and works on behalf of Indian children and families. NICWA provides public policy, research, and advocacy; information and training on Indian child welfare; and community development services to a broad national audience including tribal governments and programs, state child welfare agencies, and other organizations, agencies, and professionals interested in the field of Indian child welfare. NICWA's services include training and technical assistance focused on cultural competence and a Relational Worldview model, which enhances the level and quality of services to children and families.

Walking The Walk at the Frank Porter Graham Child Development Institute www.fpg.unc.edu/~walkingthewalk

Walking the Walk is an outreach project designed to promote cultural and linguistic diversity in the field of early childhood education and development. The project focuses on systems change in early intervention through the recruitment, preparation, and support of leadership personnel serving young children and their families, with emphasis on young children with disabilities in urban communities. Salient features of the project include 1) identifying needs and supports for addressing diversity; 2) providing models, materials, and training to community-based teams; 3) facilitating the development of individual and community action plans; and 4) providing technical assistance and follow-up training.

Learning About Family and Community

Family Culture: Context for Child Development and Early Cultural Learning

OVERVIEW OF THE ISSUE

From an ecological perspective, the family is a child's "first" culture and first community where development and learning take place. Harkness and Super (1992) describe this earliest environment as a child's "developmental niche" or a place where the influence of developmental expectations and the child's daily life converge. This theoretical model includes three components: 1) The physical and social settings of everyday life; 2) the customs and practices of care; and 3) the psychology of the caretakers—especially the parents' cultural beliefs or "ethnotheories" related to child growth, development, and learning. These ethnotheories, or cultural models, influence child rearing practices that are embedded in the values, beliefs, attitudes, and culture of a child's home and community.

From a developmental perspective, the foundation of healthy child development is the establishment of positive attachment between the infant and caregiver. In a Canadian research study titled *Sharing attachment practices across cultures: Learning from immigrants and refugees*, Dr. Pratbha Reebye and associates (1999) interviewed immigrant and refugee mothers about parent-child attachment practices. While there were similarities among mothers from diverse cultures, the differences in attachment beliefs, values, and practices were influences by learned parenting practices (from the country of origin, family, and friends); parents' own attachment history or experience being parented themselves; and accepted cultural parenting norms. Some of the specific cultural norms were influenced by the role of religion or spirituality; generational change and shifts in cultural perspectives; the value of respect between children and parents; and the concept of independence and interdependence. Specific attachment practices that encourage the emotional, cognitive, motor, language

A. Family Culture

and social development of children from birth to five—such as feeding, carrying, touch and display of affection, reading and singing, listening, playing, and teaching—also varied greatly. Similar differences may be found among culturally and linguistically diverse families who have not recently immigrated.

As children grow and develop, there may also be cultural differences related to the attainment of developmental milestones. Schulze et al. (1999) compared milestone attainment expectations between Anglo, Puerto Rican and Filipino families. They found significant differences in expectations for children between the ages of one and four years related to use of a training cup, use of utensils, weaning, sleeping alone, dressing oneself, and playing alone. Values, beliefs, and practices can also influence expectations related to health and wellness, expression and regulation of feelings and emotions, language development and communication style, and learning and school readiness skills.

All of these interactions begin to form the child's identity, including their cultural identity (Rossi and Rossi, 1990). Young children's experiences have a powerful influence over their cultural understanding and sensitivity. As early as three years old, children develop ideas about racial identity and attribute characteristics to cultural group as different from their own (Banks, 1993). The family's culture influences how children interact with adults and siblings, how they are involved in routine daily activities, and generally how they interact and react to the world around them (Goodnow, 1996; Rogoff, 1990). Families also convey their expectations of achievement in various tasks through the time and effort placed on specific activities (Goodnow, 1996). These expectations vary greatly from culture to culture from families who highly prize the ability to read and do math to families who value having the child be happy as the most important (Stevenson & Lee, 1990).

The cultural influence of child rearing practices, learning experience, and achievement expectations all influence a child's development and readiness for school. The research, as well as logic and intuition, indicate that administrators, early care givers and teachers, home visitors, and community providers must commit to partnering with families, engage in learning about one another, and understand each child's unique family and culture in order to provide the best services possible and ensure school readiness.

Critical Questions for Communities



- What theoretical models can help to understand the role of family cultural and linguistic diversity on child development and school readiness?
- What research is available to illustrate the impact of culture on parenting and child outcomes?
- What research is available to inform best practices related to culture and child development?
- How can the "ethnotheories" of families be best explored and understood as the context for child development?
- How will understanding the family context for child development influence services and supports to become more culturally and linguistically competent and effective in building school readiness skills?

Key Strategies for Families, Providers, and Administrators

What Families Can Do

- Reflect on your cultural heritage and what you've learned about families, parenting, and child development from your family and ancestors.
- Examine your beliefs, values, and attitudes about children, how they develop, and what is important for them to learn.
- Consider how your own ideas about child rearing and child development might be a match or mismatch with those who provide out-of-home care, education, or other support services to your young child.

What Providers Can Do

- Reflect on your cultural heritage and what you've learned about families, parenting, and child development from your family and ancestors.
- Examine your beliefs, values, and attitudes about children, how they

develop, and what is important for them to learn.

• Consider how your own culture and the knowledge base you've established through your professional training might influence your practice as well as present a match or mismatch with families of diverse cultures.

What Administrators Can Do

- Encourage staff to reflect on their own cultural heritage and its impact on services to children and families.
- Encourage staff to use theoretical models, research and practice data, and information gathered directly from families to understand the context of family and culture and its influence on child development.
- Adopt an ecological model for designing services to children and families.

A. Family Culture

PROMISING PRACTICE

Miami's Families Starting Early Starting Smart Integrated Behavioral Health and Early Childhood Intervention Services for Multi-Ethnic Families

Miami's Families Starting Early Starting Smart program is administered by the University of Miami (UM) School of Medicine's Prenatal Chemical Addiction Research and Education (CARE) Program. This early childhood integrated behavioral health intervention site is based at the Juanita Mann Health Center, a UM/Public Health Trust Community Health Center, which provides a full array of primary health care services for families living in high-risk neighborhoods. The Perinatal CARE Program had a history of culturally and linguistically-relevant methods of parent training, care coordination and service integration. Miami's Families SESS built upon this history and designed and implemented services to fit within existing systems, as well as to emphasize culturally-specific and community-based approaches.

Parents and caregivers who participate in the program represent primarily African American and Hispanic families, including those whose native language is Spanish. The program staff reflects the diverse community—both ethnically as well as linguistically. Several group and individual services are designed to support successful parenting of infants and young children. Materials to support these services were translated as needed into Spanish if not already available.

Two formal group curriculum interventions used by the program— Therapeutic Baby & Me (caregiver/infant) and Strengthening Multi-Ethnic Families and Communities (parenting along the developmental continuum beyond infancy)—have strong emphases on assessing and supporting family cultural identity and values. These interventions promote successful parenting of infants and young children by working within the family's cultural context; encouraging reflection on family beliefs and cultural traditions related to caregiving for young children; developing cultural awareness through family rituals; and understanding child development and creating a positive caregiving environment by building on family strengths. For more information, contact Connie Morrow at cmorrow@med.miami.edu

Reflection Guide: Personal Cultural Journey for Parents and Caregivers

An important aspect of parenting and providing care to young children is to reflect on your own personal cultural journey. We all have a cultural, ethnic, racial, linguistic, and spiritual heritage and family experience that influences our own attitudes, beliefs, values, and behaviors. For parents or caregivers to understand this influence on their family and young children, their reflective process must include their own family cultural experience as well as the "cultural messages" or lessons received from their community or other sources.

From your own family:

- When you think about your family, your roots, what place(s) of origin do you identify for your family?
- What ethnic group, socioeconomic class, religion, age group and community do you belong to?
- What social interaction did you have with people from ethnic groups, socioeconomic classes, religions, age groups or communities different from your own?
- Do you or does anyone in your family speak a language other than English? If so, what language and how has it influenced your interactions with that family member and others?
- What special foods, holidays, and events do you associate with your family of origin and what is their significance? What do you know about traditions of other cultures?
- What attitudes toward other cultural or linguistic groups did your family of origin have? How are your own attitudes similar or different?
- What values, beliefs, or "cultural messages" did you receive about family? About childrearing or parent and child interactions? About relationships between families and others outside the family?
- What values, beliefs, or "cultural messages" did you receive about community? Who represented "community" in your own experience? Who were the trusted leaders?
- What values, beliefs, or "cultural messages" did you receive about education and achievement? About the interaction between children, parents, and teachers?
- What values, beliefs, or "cultural messages" did you receive about health, wellness, and health care services? About who to turn to for advice? About the interaction between patient and health care provider?
- What personal qualities do you have that will help you establish interpersonal relationships with persons from other cultural and linguistic groups? What personal qualities might be detrimental?

Continued

Reflection Guide: Personal Cultural Journey for Parents and Caregivers Continued

From your community:

- What are the traditional values, beliefs, and practices of your community? How are they the same or different from your own family?
- What values, beliefs, or "cultural messages" did you receive about families? About childrearing or parent and child interactions? About relationships between families and others outside the family—including community leaders?
- What values, beliefs or "cultural messages" did you receive about education and achievement? About the interaction between children, parents, and teachers?
- What values, beliefs, or "cultural messages" did you receive about health, wellness, mental health, and health care services? About who to ask for advice? About the interaction between patients and health care providers?
- What values, beliefs, or "cultural messages" did you receive about leadership? About the interaction between members of the community and those identified as leaders?
- Have you ever felt uncomfortable, upset, or surprised by any expectations of your community? If so, what made you feel this way and how did you resolve these feelings?
- Has any aspect of your community led you to question your own values, beliefs, and behaviors? If so, what was in question and what was the outcome?

From other sources:

- What experience have you had with people from ethnic groups, socioeconomic classes, religions, age groups or communities different from your own?
- What information or "cultural lessons" different from your own did you learn about from these different groups, or communities?
- Have you ever taken part in any parenting or caregiving classes, discussion group, training, or instruction that offered new information and "cultural lessons" different from your own? If so, what were the new lessons?
- How did these "new cultural lessons" impact you personally? How do they impact the way you think and act?
- Did you ever find your own beliefs and values in conflict with those of any service provider or organization from whom you sought services? If so, how did you resolve it?
- Did you ever find yourself changing your own beliefs and values so that they are different from or in conflict with your own family of origin? If so, how did you resolve it?
- In what ways do you seek to understand the impact of cultural and linguistic differences on your relationship to those outside of your family and community who may have a different cultural perspective?

Reflection Guide: Personal Cultural Journey for Providers and Administrators

An important aspect of preparing to work with culturally and linguistically diverse young children and their families is to reflect on your own personal cultural journey. We all have a cultural, ethnic, racial, linguistic, and spiritual heritage as well as family experience that influence our own attitudes, beliefs, values, and behaviors. For providers and administrators to understand this influence on service design and delivery, their reflective process must include their own family cultural experience as well as the "cultural messages" or lessons received through training, work preparation, and work setting or organizational culture.

From your own family:

- When you think about your family, your roots, what place(s) of origin do you identify for your family?
- What ethnic group, socioeconomic class, religion, age group and community do you belong to?
- What social interaction did you have with people from ethnic groups, socioeconomic classes, religions, age groups or communities different from your own?
- Do you or does anyone in your family speak a language other than English? If so, what language and how has it influenced your interactions with that family member and others?
- What special foods, holidays, and events do you associate with your family of origin and what is their significance? What do you know about traditions of other cultures?
- What attitudes toward other cultural or linguistic groups did your family of origin have? How are your own attitudes similar or different?
- What values, beliefs, or "cultural messages" did you receive about family? About childrearing or parent and child interactions? About relationships between families and others outside the family?
- What values, beliefs, or "cultural messages" did you receive about community? Who represented "community" in your own experience? Who were the trusted leaders?*
- What values, beliefs. or "cultural messages" did you receive about education and achievement? About the interaction between children, parents, and teachers?
- What values, beliefs, or "cultural messages" did you receive about health, wellness, and health care services? About who to turn to for advice? About the interaction between patient and health care provider?
- What personal qualities do you have that will help you establish interpersonal relationships with persons from other cultural and linguistic groups? What personal qualities might be detrimental?

Continued

Reflection Guide: Personal Cultural Journey for Providers and Administrators Continued

From your training:

- What are the traditional values, beliefs, and practices of your chosen profession? How are they the same or different from your own family?
- What values, beliefs, or "cultural messages" did you receive about families? About childrearing or parent and child interactions? About relationships between families and others outside the family—including service providers?
- If you are a teacher...what values, beliefs or "cultural messages" did you receive about education and achievement? About the interaction between child, parents, and teachers?
- If you are a health care provider...what values, beliefs, or "cultural messages" did you receive about health, wellness, mental health, and health care services? About the interaction between patients and health care providers?
- Have you ever felt uncomfortable, upset, or surprised by any expectations of your training or orientation to your chosen profession? If so, what made you feel this way and how did you resolve these feelings?
- Has any aspect of your training led you to question your own values, beliefs, and behaviors? If so, what was in question and what was the outcome?
- What training experience did you have with people from ethnic groups, socioeconomic classes, religions, age groups or communities different from your own?
- What information about the influence of culture on individuals, families, and communities did you receive in your training experience?

From your work setting:

- What are your organization's attitudes, values, policies, and practices related to young children and their families?
- What are your organization's attitudes, values, policies, and practices related to cultural and linguistic diversity?
- How have these attitudes, values, policies, and practices impacted you personally or professionally? How do they impact the way you think and act?
- Did you ever find your own beliefs and values in conflict with those of your organization or colleagues? If so, how did you resolve it?
- Did you ever find your own beliefs and values in conflict with those to whom you provide services? If so, how did you resolve it?
- In what ways do you seek to understand the impact of cultural and linguistic differences on your relationship and interaction with those to whom you provide services? With your colleagues?

ANNOTATED RESOURCES

BOOKS AND PRINT

Cultural Models for Early Caregiving (2003, MAY) FINN, C.

This article describes the concept of the cultural model and how family and community beliefs about healthy child development guide parental behavior. It also examines the practitioner's cultural models and the role they play in providing intervention services. This article is useful to early care and education providers as well as other providers of direct services to young children and their families.

In Culture and Caregiving: Goals, Expectations, and Conflict. Bulletin of ZERO TO THREE, 23(5). ZERO TO THREE, National Center for Infants, Toddlers, and Families, 2000 M Street, NW, Suite 200, Washington, DC 20035-3307, (202) 638-1144. (\$10.00 for issue)

How Culture Shapes Social-Emotional Development: Implications for Practice in Infant-Family Programs

 $\left(2004\right)$ Day, M., and Parlakian, R.

Written for program leaders and practitioners, this booklet examines how culture shapes children's fundamental learning about themselves, their emotions, and their way of interacting and relating to others. It includes recommendations for providing culturally responsive services, and an explanation of cultural reciprocity, a framework for resolving cultural dilemmas. Activities are provided that feature a range of infant-family settings. ZERO TO THREE, National Center for Infants, Toddlers, and Families, 2000 M Street, NW, Suite 200, Washington, DC 20035-3307, (202) 638-1144. (\$17.50)

Parental Ethnotheories in Action

(1992) HARKNESS, S., AND SUPER, C. M. This book offers a unique collection of research on the topic of parent beliefs and the ideas that parents have regarding their children and themselves as parents impacting their parenting behavior and actions. The chapter by Harkness and Super describes the ecological model of the developmental niche and is useful to providers who work directly with families.

In I. E. Sigel, A. V. McGillicuddy-DeLisi, and J. J. Goodnow, Eds., Parental Belief Systems: The Psychological Consequences for Children. Hillsdale, NJ: Erlbaum. 1-800-9-BOOKS-9 or online at www.erlbaum.com. (\$49.95)

The Sociocultural Context of Infant Development

(1993) GARCIA COLL, C., AND MEYER, E. This chapter examines the impact of the sociocultural context of infants and families and postulates how these influences can affect infants' mental health. It reviews several theoretical models that incorporate the sociocultural context as an environmental influence on parents and infants and the implications related to defining mental health problems, expectations for intervention, and responsibility for implementing intervention. Although this text is written for those providing clinical mental health services to young children and families, it is also useful to early care and education providers.

In C. H. Jr., Zeanah (Ed.), Handbook of Infant Mental Health, pp. 56-69. New York: Guilford Press. 1-800-365-7006 or online at www.guilford.com. (\$65.00)

The Sociocultural Context of Infant Mental Health in African American Families

(2001, AUG./SEPT.) RANDOLPH, S. AND KOBLINSKY, S. This article frames an ecological model of early development within the African worldview along ten dimensions. These dimensions, when understood by mental health service providers, can guide more responsive mental health services for children and families of color.

In Infant Mental Health and Early Head Start: Lessons for Early Childhood Programs.Bulletin of ZERO TO THREE, 22(1). ZERO TO THREE, National Center for Infants, Toddlers, and Families, 2000 M Street, NW, Suite 200, Washington, DC 20035-3307, (202) 638-1144. (\$10.00 for issue)

A. Family Culture

ON-LINE RESOURCES

Culture and Ethnicity in Social, Emotional, and Academic Development (2002) BARBARIN, O.

This paper describes the status of children of color with respect to academic and social functioning and summarizes what is known about processes that constrain and facilitate that development. It argues that children of color occupy specific cultural niches in American society that expose them to a host of social, familial, and community strains while providing limited resources to help them respond. Implications related to culture, economic and service access disparity, the role of family, and strategies for early intervention are useful to early intervention, mental health, and early care and education providers. Full text available at www.emkf.org/pdf/eex brochure.pdf In Set for Success: Building a Strong Foundation for School Readiness Based on the Social-Emotional Development of Young Children. Kauffman Early Education Exchange, Ewing Marion Kauffman Foundation Fulfillment Center, P.O. Box 12444, North Kansas City, MO 64116. (Free)

Sharing Attachment Practices Across Cultures: Learning from Immigrants and Refugees

(1999) Reebye, P., Ross, S., Jamieson, K., and Clark, J.

This project's goal was to create comprehensive health and social support services for immigrant and refugee women and families with young children in the Parkdale community in Toronto. In an effort to design services that would best fit for families and the context of their cultural, linguistic, and racial diversity, the team collected and examined community-based information on parental attachment beliefs, values, and practices. The website offers a full report of this project that can be useful to providers in health, mental health, early care and education. Full text available at www.attachmentacrosscultures.org *Parkdale Parents' Primary Prevention Project, St. Joseph's Women's Health Center, Toronto, CA.*

Young Lives: Many Languages, Many Cultures

(1992) Alverez, R., Barton, A., Clark, G., Keenan, J., Lalyre, Y., MacNeill, C., and O'Brien, M.

This report useful to language specialists, early care and education providers, and teachers is organized into three parts. Part I provides the theoretical background—a summary of the nature of language and its relationship to culture, second language acquisition and bilingualism. Part II addresses specific applications of this information to various aspects of early childhood program operations-screening and outreach, curriculum, classroom models, working with families and administrative issues. Part III contains a resource section, listing a variety of organizations to contact for information, training, and technical assistance and products; and a bibliography of books and articles that have been used in preparation of this paper. Full text available at www.clas.uiuc.edu

CLAS Culturally & Linguistically Appropriate Services, Early Childhood Research Institute, University of Illinois at Urbana-Champaign, Champaign, IL.

Binformation Gathering: Ethnographic Interviewing

OVERVIEW OF THE ISSUE

Learning about the culture of specific families and communities involves an open approach to gathering information and seeking understanding. As culture is defined in this tool kit, one must learn about an individual's integrated pattern of human behavior which includes thought, communication, languages, beliefs, values, practices, customs, courtesies, rituals, manners of interacting, roles, relationships and expected behaviors. In addition, learning about a community involves understanding the relationships between members of the community; the interests, activities, and values of the community; and the economic, political, and social organization of the community. In all approaches to learning about an individual or community, it is essential to focus on the unique nature, strengths, and experience of any one individual, any one family, and any one community. Truly engaging families and communities avoids stereotyping, focuses on individualization, and ensures authentic relationships. These relationships between parents, providers, and program administrators set the stage for offering respectful and effective support to the home environment; enriching the early care and education environment; assuring quality programs; sustaining family connections to health, mental health, and other vital services; and achieving school readiness.

There are many ways to learn about other cultures including 1) learning though studying and reading about the culture, 2) talking and working with individuals from the culture 3) participating in the daily life of another culture, and 4) learning the language of the other culture (Lynch & Hanson, 1998). In addition to books, magazines, biographies, local newspapers, community bulletins etc., today's electronic age allows sharing across the Internet, television, films, and video. Talking and working with individuals from the cultural group can support a more direct and open exchange of information with opportunities to "checkout" one's understanding of the meaning of beliefs, values, practices, customs, rituals, and events. Often this exchange takes place with a "cultural broker" or mediator-one who bridges two cultures and can offer insights and knowledge where two cultures diverge and intersect. Participating in the daily life of another culture as a participant observer (Lynch & Hanson, 1998) means participating in relationships and in community life in a conscious way that encourages integration of knowledge about an individual/culture/community and observation/reflection of how daily activities and events represent the culture of the individual and/or the community.

B. Information Gathering

For those who work with young children and their families in early care and education, the role of participant observer is a "good fit". Providers can build on their existing skills and utilize the ethnographic interview to learn about families and communities. This ethnographic strategy is designed to discover and describe the meaning to cultural models and includes observation, interviews, and reflection.

Critical Questions for Communities

- What level of diversity exists within the community?
- What knowledge exists about the community and what do we need to know?
- What are some ways to gather background information and what resources are available?
- Who are the "cultural brokers" in the community?
- How can the focus remain on the individual child, family, and/or community and avoid stereotyping?
- How can a community assessment process and interviewing techniques be used to gather information?
- How can reflection on and integration of this information be reinforced and contribute to culturally and linguistic competent services and supports for young children, their families, and school readiness?

Key Strategies for Families, Providers, and Administrators

What families can do:

- Share your cultural perspective and the meaning of practices, events, and relationships that relate to child development, health, mental health, learning, and school achievement.
- Take a leadership role as a "cultural broker" and represent your community's perspective.
- Participate in planning activities for community services and supports.

What providers can do:

- Establish a relationship with a key community person who can act as a cultural broker.
- Take an "ethnographic" approach to observation and reflection on an individual's and or community's

cultural models for child health and development, child rearing, and education.

• Use reflection, supervision, and other learning opportunities to build knowledge about diverse cultural worldviews.

What administrators can do:

- Engage members from diverse communities in a community assessment process.
- Forge partnerships with organizations that represent diverse cultures and the broader early childhood services community (health, mental health, education, etc.).
- Encourage the use of supervision as a time for reflective learning.

Washington County Area, Vermont Family-to-family connections for new immigrants.

COMMUNITIES CAN!, COMMUNITIES OF EXCELLENCE, 2003

PROMISING PRACTICE

Washington County covers 689 square miles of central Vermont, a mix of very rural areas and small cities. Although Washington County is 97 percent white, about 6 percent of families speak a language other than English at home. Many of these individuals are part of the Vermont Refugee Resettlement Program. Bosnian and Congolese families are among the largest group of refugees and immigrants in the area. There are also Hispanic, Asian, and other families represented from countries such as Nicaragua, Ecuador, Nepal, and Ukraine. Continuous efforts are currently being made to increase capacity to engage with and serve these families, by making interpretation services available and producing flyers and pamphlets in other languages.

These efforts also include the Central Vermont Immigration Project Potlucks (CVIPP), which coordinates family-style potlucks for immigrants and refugees in the Central Vermont area to congregate and connect in the community. The potlucks provide an in-home, in-community opportunity for immigrant families to discuss relevant cultural issues and needs and serves as a forum to inform local immigrant families about community resources and services. It also serves as a forum for general discussions about race and ethnic identity in Vermont. Potlucks generally take place at a family's home, and are held every 4-6 weeks. Potluck attendance varies from 20-50 individuals, including children of all ages. At the potlucks, participants bring food to share, stories, to tell, and their cultural perspectives and identities to the table. Today, over 80 families from over 30 countries are part of the CVIPP. A part-time staff person who has strong ties to the immigrant community coordinates the potlucks. CVIPP is sponsored by the Children's Up Stream Services (CUPS) program, a Therapeutic Outreach service for young children with emotional and behavioral challenges within the Washington County Mental Health Department. For more information, contact Melissa Giuttari at 802-476-1480 or MelissaG@WCMHS.org

B. Information Gathering

Franklin County, Vermont

Cultural brokers linking services to diverse communities.

COMMUNITIES CAN!, COMMUNITIES OF EXCELLENCE, 2000

Franklin County, a rural area of Vermont, has population of about 45,000 spread over a wide area. The large single employer, the U.S. Immigration and Naturalization Services, has its Eastern Adjudication Center in St. Albans. As a result, many families from diverse countries may spend weeks or months in Franklin County waiting for their immigration papers to be processed. In addition, migrant farm workers and the American Indian tribe of the Abenaki make this county their home.

In an effort to expand early intervention services within the Abenaki community, the regional Part C program and other members of the Early Childhood Collaborative Council (ECCC) gathered information about beliefs, attitudes, and early intervention service needs from the Abenaki community leaders. The service providers began to work with two cultural brokers and tribal elders to understand specific culture-based concerns. With help from the cultural brokers, service providers were able to involve and engage Abenaki parents and community members, to adapt service delivery and location, and implement personnel preparation (early care and education) toward more culturally competent care. Tribal leadership joined the ECCC and lasting partnerships have been formed with the Abenaki Self Help Association, the Tribal Council, and the Indian Education System. For more information, contact Pam McCarthy at 802-524-7959 or pmccarthy@ncssinc.org

LEARNING ABOUT FAMILY & COMMUNITY

Examples of Ethnographic Questions for Learning about the Culture of Families and Communities

The following questions have been excerpted from *Guidelines for Analysis of Sociocultural Factors in Health*, developed by the Office of International Health, U.S. Public Health Service. They represent questions that can help to understand the cultural models of families and communities, but are not intended as a checklist or interview protocol. These examples can guide an approach to learning about the values, beliefs, behaviors, practices, customs, etc. that are most relevant to a specific learning goal—including those about infancy, early childhood, learning and education, school, and school readiness.

Examples for Families:

• The Family

What are the boundaries of the family?

Is greater importance attached to the nuclear family or the extended family? Who is considered a member of the family?

Are there people who are considered to be family members but who are not related by blood or marriage who have been informally adopted into the family? How are mates selected?

• Pregnancy and Childbirth

Do women follow any special practices during pregnancy? Follow any special rituals? Eat or not eat certain foods?

What sources of advice and care are sought during pregnancy?

Are certain traditional or Western health practitioners consulted during pregnancy?

Are there any special beliefs concerning forces (both animate or inanimate) that may influence an unborn baby? What effects may these forces have?

Are there any special customs or rituals followed concerning delivery or birth?

• Child Care

How do mothers and/or other relevant persons care for infants and children of various ages?

How are infants and children cleaned? Fed? Washed? Toilet trained? Disciplined? Taught various skills? Care for when ill?

What happens if the mother is working? Ill? Absent? Deceased? Who baby-sits for the mother? In what circumstances?

• Health and Hygiene

What is considered a state of "wellness" or "good health"; "illness" or "poor health"? What illnesses are considered to be "physical" and with are considered to be "mental"? What are the beliefs about the organs and systems of the body and how they function? What are the attitudes toward vaccinations, immunizations, various screening tests and preventive health measures?

What are the attitudes and practices concerning personal hygiene such as washing clothes, washing and caring for parts of the body, caring for hair, and caring for teeth?

Continued

B. Information Gathering

Examples of Ethnographic Questions for Learning about the Culture of Families and Communities Continued

• Mental Health

What is the traditional or local name used to refer to mental health? What is the typical community attitude toward mental illness? Are there any special taboos or other beliefs connected with mental illness? Are there certain types of treatment that are more acceptable than others?

• Help Seeking Beliefs and Behaviors

What types of practitioners or other individuals are best able to prevent, diagnose, and/or treat health or mental health concerns?

What is the general understanding of and attitudes toward Western medical explanations and practices?

What are the attitudes toward examination of the body by medical personnel? Who in the community might be a source of advice, support, and/or intervention in health, mental health, or other personal matters?

Examples for Communities:

• The Community

What is the history of the community?

What are the major religious groups in the community? What are the major support organizations or agencies within the community? How is leadership determined within the community?

Communication

How does information spread from one place to another within the community? What are the important formal channels of communication? What are the important informal channels of communication? Where do community members gather as an opportunity to share information?

• Leadership

Who are the important opinion leaders and "communicators" within the community? Who has the greatest authority in the community? Why are various leaders influential?

How do the leaders influence the members of the community?

Adapted from:

Randall-David, E. (1989). *Strategies for working with culturally diverse communities and clients*. Association for the Care of Children's Health. Washington, DC: Office of Maternal and Child Health.

Guidelines for the Home Visitor

These guidelines were originally suggested to assist home visitors and others who work with young children and families in early childhood settings learn more about a family's cultural values and preferences within the context of a family systems approach to intervention (Lynch & Hanson, 1998). They are not intended to be used as a checklist or interview protocol, but can be used to help interventionists, child care providers, and early educators determine the kinds of questions that might be useful to better understand a particular families attitudes, beliefs, values, and practices and design appropriate services, supports, and interventions. The questions can also be more specifically tuned to issues related to learning, school readiness, school entry, and family and school connections.

Part I—Family Structure and Childrearing Practices

■ FAMILY STRUCTURE

- Family Composition
 - Who are the members of the family system?
 - Who are the key decision makers?
 - Is decision making related to specific situations?
 - Is decision-making individual or group oriented?
 - Do family members all live in the same household?
 - What is the relationship of friends to the family system?
 - What is the hierarchy within the family? Is status related to gender or age?
- Primary Caregivers(s)
 - Who is the primary care giver?
 - Who else participates in the caregiving?
 - What is the amount of care given by mother versus others?
 - How much time does the infant spend away from the primary caregiver?
 - Is there conflict between caregivers regarding appropriate practices?
 - What ecological/environmental issues impinge upon general caregiving (i.e., housing, jobs, etc.)?

CHILDREARING PRACTICES

- Family feeding practices
 - What are the family feeding practices?
 - What are the mealtime rules?
 - What types of food are eaten?
 - What are the beliefs regarding breastfeeding and weaning?
 - What are the beliefs regarding bottle-feeding?
 - What are the family practices regarding transitioning to solid food?
 - Which family members prepare food?
 - Is food purchased or homemade?
 - Are there any taboos related to food preparation or handling?
 - Which family members feed the child?
 - What is the configuration of the family mealtime?

Continued

Guidelines for the Home Visitor Continued

- What are the family's views on independent feeding?
- Is there a discrepancy among family members regarding the beliefs and practices related to feeding an infant/toddler?
- Family sleeping patterns
 - Does the infant sleep in the same room/bed as the parents?
 - At what age is the infant moved away from close proximity to the mother?
 - Is there an established bedtime?
 - What is the family response to an infant when he or she awakes at night?
 - What practices surround daytime napping?
- Family's response to disobedience and aggression
 - What are the parameters of acceptable child behavior?
 - What form does the discipline take?
 - Who metes out the disciplinary action?
- Family's response to a crying infant
 - Temporal qualities-How long before the caregiver picks up a crying infant?
 - How does the caregiver calm an upset infant?

Part II—Family Perceptions and Attitudes

■ FAMILY'S PERCEPTIONS OF CHILD'S DISABILITY

- Are there cultural or religious factors that would shape family perceptions?
- To what/where/whom does the family assign responsibility for their child's disability?
- How does the family view the role of fate in their lives?
- How does the family view their role in intervening with their child? Do they feel they can make a difference or do they consider it hopeless?

■ FAMILY'S PERCEPTION OF HEALTH AND HEALING

- What is the family's approach to medical needs?
 - Do they rely solely on Western medical services?
 - Do they rely solely on holistic approaches?
 - Do they utilize a combination of these approaches?
- Who is the primary medical provider or conveyer of medial information?
 - Family members? Elders? Friends? Folk healers? Family doctor? Medical specialists?
- Do all members of the family agree on approaches to medical needs?

■ FAMILY'S PERCEPTIONS OF HELP-SEEKING AND INTERVENTION

- From whom does the family seek help—family members or outside agencies/individuals?
- Does he family seek help directly or indirectly?
- What are the general feelings of the family when seeking assistance—ashamed, angry, demand as a right, view as unnecessary?
- With which community systems does the family interact (educational/medical/social)?

Continued

Guidelines for the Home Visitor Continued

- How are the interactions completed (face-to-face, telephone, letter)?
- Which family member interacts with other systems?
- Does that family member feel comfortable when interacting with other systems?

Part III—Language and Communication Styles

■ LANGUAGE

- To what degree:
 - Is the home visitor proficient in the family's native language?
 - Is the family proficient in English?
- If an interpreter is used:
 - With which culture is the interpreter primarily affiliated?
 - Is the interpreter familiar with the colloquialisms of the family members' county or region of origin?
 - Is the family member comfortable with the interpreter? Would the family member feel more comfortable with an interpreter of the same sex?
- If written materials are used, are they in the family' native language?

■ INTERACTION STYLES

- Does the family communicate with each other in direct or indirect style?
- Does the family tend to interact in a quiet manner or a loud manner?
- Do family members share feelings when discussing emotional issues?
- Does the family ask you direct questions?
- Does the family value a lengthy social time at each home visit unrelated to the early childhood services program goals?
- Is it important for the family to know about the home visitor's extended family? Is the home visitor comfortable sharing that information?

From

"Home-based early childhood services: Cultural sensitivity in a family systems approach" by K. I. Wayman, E. W. Lynch, & M. J. Hanson (1990). *Topics in Early Childhood Special Education, 10,* 65-66. Copyright 1990 by PRO-ED, Inc. Reprinted with permission.

B. Information Gathering

Suggested Questions for Learning about Values, Beliefs, and Practices Related to Learning, and School Readiness

Family expectations and approaches to encourage learning in young children are influenced by family values, beliefs, and parenting practices. This list represents questions that can help to understand the cultural models of families and communities, but are not intended as a checklist or interview protocol. These examples can guide an approach to learning about the values, beliefs, behaviors, practices, customs, etc. that are most relevant to a early learning, school readiness, and education.

Learning At Home:

How do children learn within the family?

To whom do young children turn when they need help with a task or activity at home?

Who in the family might take a guiding or teaching role?

Values and Beliefs about Education:

What are the values or beliefs about education and achievement? What are a family's aspirations for their children? What does it mean to be successful in school?

Learning Outside the Home:

What are children expected to learn in an early care or childcare setting? How do children learn in an early care of childcare setting? How are children expected to learn in school? What is the preferred learning environment or interactive style outside of the home?

School Readiness:

What do children need to know before they go to school? How do you know when a child is ready for school? When is the right time for children to enter school?

Parent, Child, Teacher Interactions:

How are children expected to interact with others? The teacher? Other children? Other adults?

What is the role of the parent in helping a child to learn in school?

What is the role of the teacher in helping a child to learn in school?

Who will be the authority and primary contact for the teacher regarding the child, school and school activities?

How can parents and teachers work together to help the child do well in school? What are the best ways for parents and teachers to communicate?

ANNOTATED RESOURCES

BOOKS AND PRINT

Cultural Models for Early Caregiving (2003, MAY) FINN, C.

This article describes the concept of the cultural model and how family and community beliefs about healthy child development guide parental behavior. It also examines the practitioner's cultural models and the role they play in providing intervention services. This article is useful to early care and education providers as well as other providers of direct services to young children and their families.

In Culture and Caregiving: Goals, Expectations, and Conflict. Bulletin of ZERO TO THREE, 23 (5). ZERO TO THREE, National Center for Infants, Toddlers, and Families, 2000 M Street, NW, Suite 200, Washington, DC 20035-3307, (202) 638-1144. (\$10.00 for issue)

Developing Cultural Competence: A Guide for Working with Young Children and Their Families

(1998) LYNCH, E. W., AND HANSON, M. J. Written for the early intervention community, this book is based on best practices in early intervention, literature on intercultural effectiveness, and insights and experience from the field. The three sections of the book introduce the issues of working with families from diverse cultural, ethnic, and language groups; some broad observations about the history, values, and beliefs of the major cultural and ethnic groups that make up the United States related to family, childrearing, and disability; and a synthesis and recommendations for enhancing the cultural competence of interventionists.

Paul H. Brookes Publishing Company, Inc., P.O. Box 106242, Baltimore, MD 21285, 1-800-638-3775 or order online at www.Brookespublishing.com. (\$41.95)

From Rocks to Diamonds: Mining the Riches of Diversity for Our Children (2003) Barrera, I.

This article describes the use of Skilled Dialogue and how approaching families with respect, reciprocity, and responsiveness can help caregivers understand the context of child rearing practices and help diverse children and families strengthen and sustain their identifies and integrity across environments. Although this article is written primarily for early care and education providers it has important messages for all those who work with diverse young children and their families.

In Culture and Caregiving: Goals, Expectations, and Conflict. Bulletin of ZERO TO THREE, 23 (5). ZERO TO THREE, National Center for Infants, Toddlers, and Families, 2000 M Street, NW, Suite 200, Washington, DC 20035-3307, (202) 638-1144. (\$10.00 for issue)

How Culture Shapes Social-Emotional Development: Implications for Practice in Infant-Family Programs

(2004) DAY, M. AND PARLAKIAN, R.

Written for program leaders and practitioners, this booklet examines how culture shapes children's fundamental learning about themselves, their emotions, and their way of interacting and relating to others. It includes recommendations for providing culturally responsive services, and an explanation of cultural reciprocity, a framework for resolving cultural dilemmas. Activities are provided that feature a range of infant-family settings.

ZERO TO THREE, National Center for Infants, Toddlers, and Families, 2000 M Street, NW, Suite 200, Washington, DC 20036-3307, (202) 638-1144. (\$17.50)

Sensitivity to Cultural and Linguistic Diversity in Early-Intervention Family Information Gathering

(2003) Banks, R.

This text examines philosophical approaches to family information gathering, implications of and strategies to address cultural and linguistic diversity, and guidelines for cultural and linguistic sensitivity to family information gathering in early-intervention. This resource and additional materials included in the collection can be useful to providers and administrators of early care, early-intervention, and service to young children and their families.

In S. Fowler, R. Milagros Santos, and R. Corso (Eds.), CLAS Collection #1: Appropriate Screening, Assessment, and Family Information Gathering. SOPRIS WEST Educational Services, 4093 Specialty Place, Longmont, CO 80504, (303) 776-5934, 1-800-547-6747 or online at www.sopriswest.com. (\$12.00)

B. Information Gathering

ON-LINE RESOURCES

Review Guidelines for Material Selection: Family Information Gathering

Culturally and Linguistically Appropriate Services Early Childhood Research Institute, University of Illinois at Urbana-Champaign, Champaign, IL.

These guidelines are intended to help service providers and individuals involved in personnel preparation determine the congruence between the beliefs, values, and practices of the individuals in their community and current recommended practices related to early childhood/special education/ and cultural and linguistic competence. The content is specific to Family Information Gathering and can be adapted to meet local needs. Full text available at www.clas.uiuc.edu/review/index.html

WEBSITES

Asian-Nation*

www.asian-nation.org

This website is described as a "one-stop" information source on the historical, political, demographic, and cultural issues that make up today's diverse Asian American community. Its purpose is to educate those who would like to know more about the Asian American population, provide general and specific information on topics and issues that affect the Asian American community, and identify other sources of information related to Asian Americans.

Queensland Government Queensland Health*

www.health.qld.gov.au/multicultural/default.asp The worldwide nature of the Internet allows access to international websites such as this one that was developed by the Australian government to support the provision of culturally sensitive health care in hospitals and community health services. The multicultural health site offers a starting point to an understanding of cultural and health issues for ethnic communities in a multicultural environment.

WWW Hmong Homepage*

www.hmongnet.org

This website represents an effort to bring together a collection of resources related to Hmong news and current events, issues, history, publications, and culture. The audience is anyone seeking more information about the Hmong people. In addition to basic background and historical information, the site includes extensive references to on-going research projects, resettlement, and repatriation.

*Culture specific websites or those topical websites that also provide a description of the history, language, values, beliefs, attitudes, and practices of a particular cultural group can be useful in learning about some aspects of a cultural and linguistic group. It is important to consider this type of information as background material that may assist in preparing for an authentic relationship with and a genuine understanding of a specific individual or a specific community. The information should not be used to create or reinforce stereotypes. In addition to general information, searching this type of site with key words such as young children, early childhood, parenting, or education may result in information that is most relevant to early care, education, and school readiness. Some websites may include relevant translated materials in the cultures native language as well as resources. These selected sites represent a sample of the many culture-specific sites available on the Internet.

The Early Care and Education Environment

Curriculum

OVERVIEW OF THE ISSUE

For young children, their family is their first "developmental niche" and learning environment. From the anticipated birth, delivery and arrival, through daily routines and relationships with family and caregivers, children are influenced by the culture—or values, beliefs, practices, customs, etc., of their home environment. A greater number of children enter childcare and early outof-home settings than ever before. These numbers include those of culturally and linguistically diverse families and challenge the capacity of these settings to support school readiness for each child.

The early care and education environments where young children continue to grow and learn can also support learning about culture—and diversity. Childcare settings must be responsive to each child and whenever possible adapt practices and routines to assure continuity of care and culture between home and the early care setting (Chang & Pulido, 1994). Similarly, as the young child moves into the pre-school and school setting, the early education environment can value diversity, teach from a multicultural perspective, and promote antibias and tolerance for differences. By doing so, the early care and education environments can demonstrate respect for the strengths of families, the value of cultural and linguistic differences, and honor the uniqueness of each individual child and family.

The multicultural perspective is for everyone. Offering culturally and linguistically competent care and teaching with a multicultural perspective require knowledge about the meaning of culture and the impact on child development; attitudes and behaviors that value respectful and open discovery of differences; and skills to design and implement learning experiences that support multicultural learning. Flexibility in caregiving and early teaching and

A. Curriculum

instruction practices—offering multiple ways for children to explore their world, to demonstrate their learning, to participate in classroom activities, and to interact with adults and other children—may be particularly conducive to teaching diverse groups of children (National Research Council and Institute of Medicine, 1994). Numerous research studies about the early process of identity and attitude development conclude that children learn by observing the differences and similarities among people and by absorbing the spoken and unspoken messages about those differences. By teaching children to respect different cultures, children gain positive feelings about themselves and learn to live and work together respectfully. Enriching early care and education environments is one way that communities can participate in nurturing culturally and linguistically competent services and supports.

Strategies for caregiving and technical tools for teaching with a multicultural perspective in a childcare or classroom environment include provider preparation, involving families, and utilizing developmentally appropriate curricula, educational materials (books, toys, games), and other childcare and classroom helps.



- What is the level of value and commitment to adapting to diversity and a multicultural, anti-bias approach in early care and education?
- What do we need to learn about diversity and implications for learning, caregiving, and working with young children and families to support school readiness?
- How can the daily routine, curriculum and the early care or classroom environment support diversity, multiculturalism and represent movement toward cultural and linguistic competence?
- How can multiculturalism be infused into learning rather than held separate as a "special" learning event?
- What resources exist to support this effort and what strategies might be most accessible and affordable for early care and classroom settings?

Key Strategies for Families, Providers, and Administrators

What families can do:

- Support multicultural and anti-bias education by sharing their own cultural perspective and experience.
- Encourage their children's learning outside of the classroom by answering questions about their own identity and background, exposing them to children and adults of other backgrounds, and discussing differences and similarities.
- Model the behaviors and attitudes they want their children to adopt.

What providers can do:

• Support multicultural and anti-bias education by raising personal awareness of cultural and linguistic diversity and anti-bias issues as well as committing to the value of human diversity and the fair treatment of all people.

- Observe and evaluate one's own behavior and the early care and/or classroom environment for messages about multicultural diversity.
- Use the whole learning environment and curriculum for "teachable moments" to explore diversity—not just one lesson plan at a time.

What administrators can do:

- Establish agency or organization-wide policy that supports respect for diversity and multiculturalism.
- Make resources available for early care environment or classroom curricula and materials to support in-classroom learning as well as facility-wide promotion activities.
- Establish support structures and strategies (teamwork, training, coaching, mentoring, counseling) to help staff maintain the vision and commitment to this effort.

A. Curriculum

The Goals and Common Pitfalls of a Multicultural Anti-Bias Curriculum

Goals

In the big picture, the goal of multicultural education is to empower all students (children) to become knowledgeable, caring and active citizens in a multicultural and linguistically diverse world around them. (Banks, 1993)

For each student, the goals of a multicultural and anti-bias curriculum are to foster each child's:

- Construction of a knowledgeable, confident self-identity;
- Comfortable, empathic interaction with people from diverse backgrounds;
- Critical thinking about bias; and
- Ability to stand up for herself or himself, and for others, in the face of bias (Hohensee & Derman-Sparks, 1992).

While these may appear to be lofty goals when thinking about young children, it is clear that acquiring self-identity, perceptions of differences in others, developing self-esteem, and having empathy toward and engaging in empathic interactions with others are very early developmental tasks.

Common Implementation Pitfalls

- Viewing cultural is an "add on": Providing care and education through a multicultural approach is not something that is added on top of other teaching. It is about understanding and integrating an approach that makes all learning experiences more complete, accurate, and sensitive. It ties the learning experiences of young children to their everyday world of family and community.
- Believing that talking openly about differences and diversity will create conflict and divide children: Talking about differences AND how children and families are similar enriches the point of view of children and families as well as early care and education providers. It can teach the values of understanding and negotiating differences toward mutual understanding and getting along.
- **Reinforcing differences and stereotyping:** Stereotypes can be reinforced by focusing on differences between cultural groups. For example, making broad statements and comparisons between Asians and Americans or African Americans and Latinos, can lead to assumptions about individuals within a cultural group. Instead, teaching a multicultural perspective reinforces learning about individuals and families and their unique cultural experience.
- Taking the tourist approach: This approach to multicultural learning offers a limited view where children "visit" a culture for a special occasion. For example, by focusing on holidays rather than on integrating cultural perspectives into everyday learning in

Continued



The Goals and Common Pitfalls of a Multicultural Anti-Bias Curriculum Continued

early care and education, there is the risk of trivializing cultural and linguistic differences rather than magnifying the similarities and everyday nature of cultural and linguistic influences.

- **Implementing the "Culture Curriculum":** Similar to the tourist curriculum, this pitfall keeps the study of diverse cultures as separate lessons, rather than integrating the multicultural approach into an everyday, every-lesson learning experience.
- Thinking the curriculum is "in place": Implementing multicultural learning is never complete. Like culture itself, it evolves through continued dialogue, learning, and reflection. Keeping families involved in the early care and education setting and understanding their unique cultural perspective is essential and has an ever-evolving impact on multicultural learning within the early care and education setting.

Adapted from:

Banks, J. (1993). Multicultural education: Development, dimensions, and challenges. *Phi Delta Kappan*, 75(1), 22-28.

Hohensee, J., & Derman-Sparks, L. (1992). *Implementing an anti-bias curriculum in early childhood*. Retrieved June 23, 2003, from the ERIC EECE Clearinghouse on Elementary and Early Childhood Education, U.S. Department of Education Web site: http://ecap.crc.uiuc.edu/eecearchive/digests/1992/hohens92.html

Menkart, D. (1993). Multicultural education: Strategies for linguistically diverse schools and classrooms. National Center for Bilingual Education: Program Information Guide Series, Number 16. Retrieved June 19, 2003, from www.ncela.gwu.edu/pubs/pigs/pig16.htm

North Central Regional Educational Laboratory. (1998). Critical issue: Meeting the diverse needs of young children. Retrieved June 2, 2003, from www.ncrel.org/sdrs/areas/issues/students/earlycld/ea400.htm

Checklist for Implementing a Multicultural Anti-Bias Curriculum in Early Childhood Education

Personnel Preparation

- □ Teachers and early care providers understand the rationale for and benefits to implementing a multicultural curriculum.
- Teachers and early care providers are committed to a multicultural approach.
- □ Teachers and early care providers are aware and knowledgeable of their own biases.
- □ There are strategies in place for teachers and early care providers to learn about cultures different from their own.
- Teachers are familiar with and prepared to implement a multicultural approach.
- □ There are strategies in place for involving parents and families in the preparation and implementation of the curriculum.
- □ There are continuous learning and support opportunities for teachers and early care providers to build self-awareness, learn new skills, problem solve and evaluate implementation.

Curriculum

- A curriculum development/selection and review process is in place.
- □ The curriculum is developmentally appropriate.
- Cultural and linguistic diversity permeates the curriculum.
- □ The curriculum portrays culture as a dynamic characteristic that is shaped by new learning and experiences as well as social, political, and economic conditions.
- ☐ The curriculum includes people of various cultural and class backgrounds throughout.
- □ The curriculum shows respect and offers affirmation for each child's cultural and linguistic background.
- □ The curriculum helps children learn to understand experiences and multiple perspectives other than their own.

Continued



Checklist for Implementing a Multicultural Anti-Bias Curriculum in Early Childhood Education Continued

Classroom Practices and Activities

- ☐ There are various types of learning situations available—working in groups, pairs, or individually.
- □ Language use and communication style (verbal and nonverbal) is tailored to be culturally and linguistically sensitive.
- □ All children are equally encouraged to participate in classroom activities and discussion.
- The classroom models a democratic and equitable decision making process.
- □ Teachers and early care providers have integrated the curriculum so that "teachable moments" can be used to reinforce concepts from the formal curriculum.
- □ Parents are involved in classroom practices and activities to bring their cultural and linguistic strengths into the learning environment.

Materials

- □ Books, textbooks, and other written or picture materials reflect the culture of the students in the program.
- Play materials (blocks, dolls, musical instruments, dramatic play etc.) represent the culture of the students in the program and are relevant to each child's life and experiences.
- □ Display materials reflect the culture of all the students in the program and include pictures of people like themselves.
- □ Bi-lingual materials (books, signs, posters, etc.) are available for those who are English Language Learners.

Adapted from:

Hohensee, J., & Derman-Sparks, L. (1992). *Implementing an anti-bias curriculum in early childhood*. Retrieved June 23, 2003, from the ERIC EECE Clearinghouse on Elementary and Early Childhood Education, U.S. Department of Education Web site: http://ecap.crc.uiuc.edu/eecearchive/digests/1992/hohens92.html

Menkart, D. (1993). Multicultural education: Strategies for linguistically diverse schools and classrooms. National Center for Bilingual Education: Program Information Guide Series, Number 16. Retrieved June 19, 2003, from www.ncela.gwu.edu/pubs/pigs/pig16.htm

Seattle Public Schools. (2003). *Standards for instruction in multicultural settings*. Retrieved August 27, 2003, from the Seattle Public Schools Web site: www.seattleschools.org/area/acastan/stan/socstud/ISMCS.xml

A. Curriculum

Caregiving: Transferring Culture through Daily Routines—A Quick Checklist

For very young children, the curriculum for learning and development is deeply embedded in the daily routines and caregiver-child interaction. Within the family home or early care and education setting, caring for young children conveys cultural messages. The continuity of care and the continuity of these messages is critical to infants and toddlers.

Build on Parenting Knowledge from the Family's Own Culture

In order to better serve the infants and toddlers in our care, we:

- □ Provide a warm and accepting environment for families of diverse cultures.
- Engage in sensitive family information gathering to inform us about the family's beliefs, values, and customary care of their young child.
- □ Try to match families with staff who are from or have knowledge of the family's culture.
- Draw upon the cultural experience of the staff.
- □ Invite parents to continue to guide us in the care of their infants and toddlers.
- □ Engage in dialogue and a process where we 1) ask for information, 2) reflect to understand, 3) offer a different perspective, and 4) negotiate with families when we reach a point of cultural difference or conflicting views in the care of their child.

Adapt Early Care Practices

Whenever possible and in keeping with developmentally appropriate practices, we:

- □ Encourage provision of services in the families' preferred language; especially comforting phrases to help soothe each child.
- ☐ Adapt feeding and eating practices to accommodate those that are practiced in the home and most effective with the child.
- □ Support attachment by carrying the child in the ways that are most familiar and comforting to that child.

- □ Use touch and display of physical affection in ways that are known to, acceptable, and comfortable for each child.
- Arrange for sleeping accommodations that are most familiar and effective for each child.

Child and Caregiver Interaction

To support relationships and early learning in keeping with developmentally appropriate practices, we:

- □ Encourage provision of services in the families' preferred language.
- Design activities based on input from families about their culture and common teaching interactions with toddlers.
- Use familiar songs, music, and lap games from their culture to engage infants and toddlers.
- □ Use picture books and other materials that represent children and families that look like them and represent their culture.

Adapted from:

Chang H., & Pulido, D. (1994, October/November). The critical importance of cultural and linguistic continuity for infants and toddlers. *Bulletin of ZERO TO THREE*, *15*(2), 13-17.

Pulido-Tobiassen, D., & Gonzalez-Mena, J. (1999). *A place to begin: Working with parents on issues of diversity.* Oakland, CA: California Tomorrow.

Reebye, P., Ross, S., Jamieson, K., & Clark, J. (1999). Sharing attachment practices across cultures: Learning from immigrants and refugees. Toronto, CA: St. Joseph's Women's Health Center, Parkdale Parents' Primary Prevention Project. Retrieved September 15, 2003, from www.attachmentacrosscultures.org

ANNOTATED RESOURCES

BOOKS AND PRINT

Anti-Bias Curriculum: Tools for Empowering Young Children

(1989, Seventh Printing 1993) Derman-Sparks, L., and the A.B.C. Task Force.

This classic text offers a rationale and steps to creating an anti-bias environment by practicing anti-bias curriculum. It suggests ways that early care and education staff and teachers can use materials, activities, and interaction with children, parents, and one-another to promote acceptance of cultural, linguistic, and other types of diversity. Implementation guidance also includes ways to support staff development and implement antibias curriculum into an early care or education program. Additional resources include lists of children's books and sources for additional curriculum materials.

National Association for the Education of Young Children, 1509 16th Street, NW, Washington, DC 20036-1426, 1-800-424-2460. (\$15.00)

Bridging Cultures Between Home and School: A Guide for Teachers

(2001) Trumbull, E., Rothstein-Fisch, C., Greenfield, P., Quiroz, B.

This guide for teachers provides a framework for learning about culture, along with may teachercreated strategies for making classrooms more successful for students, particularly those from immigrant backgrounds.Related texts are Bridging Cultures: Teacher Education Module and Bridging Cultures in Our Schools: New Approaches that Work, both available from WestEd.

WestEd Center for Child and Family Studies and the California Department of Education, CDE Press, Sales Office, P.O. Box 271, Sacramento, CA 95812-0271, 1-800-995-4099. (\$17.50)

Creative Resources for the Anti-Bias Classroom

(1998) SADERMAN HALL, N.

This resource book for early care and education staff and teachers describes ways to integrate the anti-bias approach into all areas of curriculum. It includes hundreds of activities, grouped into four units—infant, toddler, preschool/kindergarten, and elementary age (up to age 11). Each unit has a developmental overview, ideas for interacting with parents and 20-50 activities, outlined by skill. Includes appropriate books, finger plays, rhymes, and songs.

Redleaf Press, St. Paul, MN, 1-800-423-8309 or order online at www.redleafpress.org. (\$58.95)

Developing Cultural Competence: A Guide for Working with Young Children and Their Families

(1998) LYNCH, E. W., AND HANSON, M. J. Written for the early intervention community, this book is based on best practices in early intervention, literature on intercultural effectiveness, and insights and experience from the field. The three sections of the book introduce the issues of working with families from diverse cultural, ethnic, and language groups; some broad observations about the history, values, and beliefs of the major cultural and ethnic groups that make up the United States related to family, childrearing, and disability; and a synthesis and recommendations for enhancing the cultural competence of interventionists.

Paul H. Brookes Publishing Company, Inc., P.O. Box 106242, Baltimore, MD 21285, 1-800-638-3775 or order online at www.Brookespublishing.com. (\$41.95)

How Culture Shapes Social-Emotional Development: Implications for Practice in Infant-Family Programs

(2004) DAY, M., AND PARLAKIAN, R.

Written for program leaders and practitioners, this booklet examines how culture shapes children's fundamental learning about themselves, their emotions, and their way of interacting and relating to others. It includes recommendations for providing culturally responsive services, and an explanation of cultural reciprocity, a framework for resolving cultural dilemmas. Activities are provided that feature a range of infant-family settings.

ZERO TO THREE, National Center for Infants, Toddlers, and Families, 2000 M Street, NW, Suite 200, Washington, DC 20035-3307, (202) 638-1144. (\$17.50)

A. Curriculum

Infants, Toddlers, and Caregivers, Fifth Edition

(1997) GONZALEZ-MENA, J., AND WIDMEYER EYER, D. This book reviews infant-toddler development and quality childcare. It emphasizes the importance of addressing cultural differences in all aspects of the program, including bilingual communication and culturally appropriate curricula. The text is especially useful for caregivers, directors, and trainers.

Mountain View, CA: Mayfield Publishing Co. 1-800-433-1279. (\$46.95)

Multicultural Issues: In Child Care, Third Edition

(2000) GONZALEZ-MENA, J.

This supplemental text useful to early care and education providers presents cultural differences relevant to all caregiving settings (day care, nursery, and preschool programs). Daily caregiving routines and objectives are stressed throughout. Sensitivity, communication, and problem solving are key to meeting the needs of young children according to their individual development, their parents' beliefs, and the beliefs of the caregiver.

Columbus, OH: McGraw-Hill Co. 1-800-262-4729. (\$22.50)

Roots and Wings: Affirming Culture in Early Childhood Programs, Revised Edition (2003) YORK, S.

This updated edition presents a practical resource for early childhood teachers on current anti-bias and culturally relevant issues in educating young children. The text includes a curricular approach to supporting culture, activities for the classroom, practical examples and staff-training recommendations as well as chapters focused on bilingual education, culturally responsive teaching, and children and prejudice. The book also

includes an extensive list of resources. Redleaf Press, St. Paul, MN, 1-800-423-8309 or order online at www.redleafpress.org. (\$29.95)

ON-LINE RESOURCES

¡Hola Means Hello! Resources and Ideas for Promoting Diversity in Early Childhood Settings

(1998) FENSON, C., DENNIS, B., AND PALSHA, S. This 30-page booklet is designed to assist childcare providers, teachers, and other personnel who provide services to young children and families in creating opportunities for children to appreciate the diversity around them. It contains resources that include a list of sources and types of classroom materials for enhancing cultural awareness, teacher materials to promote cultural awareness, self-assessment checklist for personnel, extensive booklists for enriching classroom diversity, and helpful websites. Many items described are available at low cost department stores. Full text available at

www.fpg.unc.edu/Hola/hola.htm Frank Porter Graham Child Development Center, UNC-CH, Publications & Dissemination Office, Chapel Hill, NC 27599, (919) 966-0857.

The Critical Importance of Cultural and Linguistic Continuity for Infants and Toddlers

(1994, OCT./NOV.) CHANG, H., AND PULIDO, D. This article focuses on the ability of the provider to understand, respect, and build upon the cultural as well as linguistic practices of the home to ensure a child's continued growth and development. It also offers examples and raises issues for further research and analysis. Full text available at www.californiatomorrow.org/files/pdfs/ Cultural_Linguistic_Continuity.pdf *In* Bulletin of ZERO TO THREE, 15 (2). ZERO TO THREE, National Center for Infants, Toddlers, and Families, 2000 M Street, NW, Suite 200, Washington, DC 20035-3307, (202) 638-1144.

TRAINING AND TECHNICAL ASSISTANCE

In Our Own Way: How Anti-Bias Work Shapes Our Lives

(1998) Contributions from Alvarado, C., Burnley, L., Derman-Sparks, L., Hoffman, E., Jimenez, L. I., Labyzon, J., Ramsey, P., Unten, A., Wallace, B., and Yasui, B.

Filled with the personal reflections of people who have done anti-bias work in child care and early childhood settings, this text shows how the writers learned to think critically and how they learned to teach this skill in their anti-bias work. Childcare providers and teachers can learn from the experience of those who have gone before and continue to learn themselves.

Available from Redleaf Press, St. Paul, MN, 1-800-423-8309 or order online at www.redleafpress.org. (\$19.95)

Program for Infant/Toddler Caregivers Module IV: Culture, Family, and Providers

(1998) Program for Infant/Toddler Caregivers (PITC).

One in a series of four training modules produced by WestEd PITC, Module IV includes: The curriculum Infant/Toddler Caregiving: A Guide to Culturally Sensitive Care (\$12.50), a Trainer's Guide: Module IV: Culture, Family, and Providers (\$20.00), and Video: Essential Connections: Ten Keys to Culturally Sensitive Child Care (\$65.00). Articles in the curriculum guide focus on development of a child's development in the context of culture, cultural diversity, the development of cultural sensitivity, and support to a child's full participation in his or her home culture. The video supports these messages through recommending and describing ten strategies to strengthen children's connections with their family and their home culture and is available in English, Cantonese, and Spanish. Audiences would include: professional developers, social service agencies, community-based organizations, and parents.

WestEd Center for Child and Family Studies and the California Department of Education, CDE Press, Sales Office, P.O. Box 271, Sacramento, CA 95812-0271, 1-800-995-4099.

Start Seeing Diversity: The Basic Guide to an Anti-Bias Classroom

(1998) WOLPERT, E.

This study guide and accompanying video help teachers recognize and address bias by illustrating one community's effort to create a responsive childcare program. The study guide includes discussion questions and handouts. Appropriate for trainers, directors, and instructors.

Committee for Boston Public Housing, Redleaf Press, St. Paul, MN. 1-800-423-8309. (Guide and 52 minute video—\$69.95)

OVERVIEW OF THE ISSUE

Actively involving families in early childhood settings is essential as the families are the child's first and primary educators. In addition, research indicates that having families involved in young children's educational experience fosters positive attitudes toward the educational process, supports school readiness, and increases achievement and school success (Henderson, 1995). As the country's demographics diversify, communities must tailor outreach and engagement strategies to involve families from many racial, cultural, and linguistic groups. It is a challenging as well as an exhilarating task.

In a recent synthesis of effective strategies to connect schools, families, and community, the Southwest Educational Development Laboratory's National Center for Family & Community Connections with Schools reviewed research, promising practices, and the evidence base to identify best practices and how schools connect with families. The report titled *A New Wave of Evidence—The Impact of School, Family, and Community Connections on Student Achievement* (Henderson & Mapp, 2002) includes research that identifies key findings related to engaging culturally and linguistically diverse families in their child's early care and education. These key elements for effective programs included the capacity to:

- Recognize, respect, and address families' needs as well as class and cultural differences;
- Build on cultural values and strengths of families;
- Stress personal contact with families;
- Foster communication with families, including translated materials and available interpreters;
- Create a warm and welcoming environment for families;
- Facilitate structural accommodations for parent involvement;
- Prepare parents for the "culture" of school and expectations related to child development, education, and parent involvement (their role in their child's education) focused on the benefits to their child;
- Utilize cultural brokers to help bridge the "culture gap" between school and families; and
- Build linkages with community and culture-based organizations.

These same strategies are appropriate for early care and education settings for infants, toddlers, and preschool age children. However, one must consider the more intimate nature of caregiving for such young children and the cultural and linguistic implications related to child development, family practices, and family expectations. Parent-provider partnerships are crucial in being able to work together so that the early care provider can sensitize their approaches to the culture of the child's home, and so that the parent can learn about the provider's practices to support child development. In *Infant toddler caregiving, A guide to culturally sensitive care* (1995), Alicia Lieberman identifies similar effective strategies for parent-provider communication and connections. They are to:

- Consider the language difference;
- Explain the child care routine;
- Acknowledge tension and think about reasons for it;
- Ask questions about the family's childrearing;
- Serve as a cultural bridge between the parents and the culture of childcare;
- Remember that you are an authority figure;
- Establish a trusting atmosphere that encourages dialogue; and
- Give constructive feedback.

By engaging parents in their child's early care and education, parents and providers—as partners—can support each child's trust and attachment, healthy growth and development, curiosity and learning, and school readiness.



- What do families in diverse communities care about most in their child's early care and education?
- How does culture influence family expectations and aspirations related to early care and education?
- How are families involved in determining the goals and design of early multicultural learning?
- How successful are current strategies for involving diverse families in multicultural learning?
- What new efforts, new partners, and new resources might need to be considered?

B. Family Involvement

Key Strategies for Families, Providers, and Administrators

What families can do:

- Learn about your child's early care and education program and how it supports diversity and multicultural learning.
- Express your hopes and desires for your child's development and learning experience.
- Offer your personal view and or cultural experience to help guide the planning for continued learning experiences in out-of-home and inschool settings.

What providers can do:

- Provide a welcoming atmosphere and show genuine interest in each family member.
- Offer specific ways that parents can work with their child at home to reinforce activities in early care and learning at school.

- Invite families into the early care setting or classroom to share their cultural traditions, crafts, and knowledge with early care and education staff.
- Communicate...and listen, listen, listen...to learn about a family's perspective, and consider how that may influence multicultural learning for each individual child.

What administrators can do:

- Encourage staff to use creative methods to engage families in multicultural learning.
- Make resources available so that all school meetings, events, and activities are "family friendly"—translated materials, interpreters, times and locations fit with family needs, offer childcare, etc.
- Involve parents in leadership roles around multicultural learning and solicit parent feedback.

PROMISING PRACTICE

Kauai County, Hawaii Community devised parent education, culture preservation, and parent leadership.

COMMUNITIES CAN!, COMMUNITIES OF EXCELLENCE, 2000

Kauai County is located at the northern end of the Hawaiian Islands, and includes two small, uninhabited islands and two inhabited islands of Nihau and Kauai. The current population of Kauai is about 58, 350 and represents a variety of ethnic groups, including Caucasians, Filipinos, Japanese, Hawaiian, Chinese, Koreans, Marshallese and other Pacific Islander groups.

The Kauai Good Beginnings (KGB) coalition includes parents, business, local health and service agencies, and other community groups interested in child development and early intervention. A cornerstone for engaging families early in their children's development is the Keiki Play + Learn Program run by KGB. Keiki Play + Learn is a weekly playgroup for children from birth through 5 in local gathering places in diverse communities. Funding is provided through donations and grants, and it is offered at no charge for the families

Participating parents, mothers, fathers, and grandparents learn about child development, available resources for children and families, advocacy for their children, and parenting skills. An early childhood professional coordinates and oversees the work of parent leaders in the different communities. Families participate in the play and parenting activities to share their culture, demonstrate cultural traditions, and build a stronger cultural community. For more information contact Judy Fraser at 808-632-2114 or judyfraser@goodbeginnings.org

B. Family Involvement

Tips for Bringing Family Strengths into the Early Care and Classroom Setting in Support of Multicultural Learning

Family involvement in the early care and classroom setting supports achievement and can greatly strengthen the respect for and response to cultural and linguistic diversity. Parent involvement provides natural opportunities for modeling, guiding, and nurturing positive racial, ethnic and cultural attitudes and perspectives. Children learn best when parents are involved and when the classroom curriculum represents the history and culture of all the children. This experience promotes each child's self-esteem and sense of uniqueness as well as the uniqueness of others. In addition, effective teachers and early caregivers want and need to learn about home culture and incorporate elements of other cultures into their classrooms. The following tips can guide thinking about the teacher and parent partnership and bringing family's cultural and linguistic strengths into the early care and classroom setting.

Staff and Parent Partnerships

Building Relationships—Teachers or Providers Can:

- Create a warm and welcoming environment.
- Openly express interest in each child and family's culture and communicate in a culturally sensitive way (using interpreters when necessary).
- Orient parents to the program, curriculum, multicultural approach setting and daily routines.
- Provide a clear rationale for a multicultural approach to providing services.
- Reflect a willingness to support and adapt to individual cultural differences.

Parent Teacher Conferences—Parents Can:

- Provide the teacher or caregiver with information about specific beliefs, values, and child care practices at home.
- Provide cultural and personal guidance for adapting classroom practices.
- Participate in staff development to help teachers or caregivers better understand their cultural history, practices, rituals, and their influence on daily life.
- Suggest additional contacts, resources, or ways a teacher or caregiver can continue to learn about their culture.

Continued



Tips for Bringing Family Strengths into the Early Care and Classroom Setting in Support of Multicultural Learning Continued

School-Family Multicultural Curriculum Activities

Decision Making—Parents Can:

- Participate in program study or discussion groups on racial and cultural differences.
- Review and have input into the multicultural approach and curriculum.
- Make suggestions for and participation in planning learning activities, field trips, presentations or programs that reflect their culture.
- Inform the teacher or provider when there are concerns about materials that may be culturally inappropriate or contain factual errors.

Resources for Learning Experiences-Parents Can:

- Share artifacts, books, music, musical instruments, and other items that represent their culture.
- Participate in storytelling, singing, or other interactive learning experiences to share their culture and language.
- Display or recommend drawings and writings by family members or cultural leaders to convey history and other cultural messages.
- Use family photos or home videos to convey information about family structure, extended family, traditions, rituals, and cultural events.
- Contribute traditional materials and demonstrate their use in daily life in ways that fit into the regular learning routines.

Adapted from:

Derman-Sparks, L., & the A.B.C. Task Force. (1989). Anti-bias curriculum: Tools for empowering young children. Washington, DC: National Association for the Education of Young Children.

Gomez, R. (1991). *Teaching with a multicultural perspective*. ERIC EECE Clearinghouse on Elementary and Early Childhood Education, U.S. Department of Education.

Reese, D. (1996). Multicultural parents and families: How you can be involved in your child's education. *Parent News for November 1996*, National Parent Information Network.

Swick, K. (1995). *Family involvement in early multicultural learning*. ERIC EECE Clearinghouse on Elementary and Early Childhood Education, U.S. Department of Education.

B. Family Involvement

ANNOTATED RESOURCES

BOOKS AND PRINT

A Place to Begin: Working With Parents on Issues of Diversity

(1999) Pulido-Tobiassen, D., and Gonzalez-Mena, J.

This resource binder offers rich information, anecdotes, exercises and tools, and handouts for parents and staff that can assist child care providers health professionals, social services staff, and parents to become more reflective and sensitive to the impact of culture on caring for young children. The handouts can be available in English, Spanish, Vietnams, and Chinese. This resource is useful for caregivers, directors, trainers, and parents.

California Tomorrow, 1904 Franklin Street, Suite 300, Oakland, CA 94612, (510) 496-0220 or order online at www.californiatomorrow.org. (\$24.00)

Bridging Cultures in Our Schools: New Approaches that Work

(2000) TRUMBULL, E., ROTHSTEIN-FISCH, C., AND GREENFIELD, P.

This knowledge brief provides a framework for understanding how teachers' culturally driven values influence classroom practice and expectations, and when in conflict with the values of immigrant and other parents from diverse cultures can challenge parent-teacher communication. The brief examines some specific sources of cross-cultural conflicts and illustrates some strategies for resolving them. Related texts are Bridging Culture between Home and School: A Guide for Teachers and Bridging Cultures: Teacher Education Module.

WestEd Center for Child and Family Studies and the California Department of Education, CDE Press, Sales Office, P.O. Box 271, Sacramento, CA 95812-0271, 1-800-995-4099. (\$8.00)

Infant Toddler Caregiving: A Guide to Creating Partnerships with Parents

(1996) THE CENTER FOR CHILD AND FAMILY STUDIES. This guide is rich in practical guidelines and suggestions for ways to establish and nurture the partnership between caregivers and families of infants and toddlers in child care. Special attention is given to bonding and separation, family stress, and cultural differences. Audiences would include early care and education providers, social services agencies, and professional developers. *WestEd/Far West Laboratory, San Francisco, California Department of Education, Sacramento, CA, (916) 445-1260. (\$12.50)*

Infants, Toddlers, and Caregivers, Fourth Edition

(1997) GONZALEZ-MENA, J., AND WIDMEYER EYER, D. This book reviews infant-toddler development and quality childcare. It emphasizes the importance of addressing cultural differences in all aspects of the program, including bilingual communication and culturally appropriate curricula. This text is useful for caregivers, directors, and trainers.

Mountain View, CA: Mayfield Publishing Co. 1-800-433-1279. (\$46.25)

ON-LINE RESOURCES

A New Wave of Evidence: The Impact of School, Family, and Community Connections on Student Achievement

(2002) HENDERSON, A., AND MAPP, K. This new publication offers a review and synthesis of literature and research that supports the everstrengthening case that families have a major influence on their children's achievement in school and through life. The text includes effect strategies for community planners, school administrators, and teachers to connect schools, families, and community. Descriptions of promising practices offer ideas for working within diverse communities. Full text available at www.sedl.org/pubs/catalog/items/fam33.html National Center for Family and Community Connections with Schools, Southwest Education Development Laboratory, Office of Educational Research and Improvement, U.S. Department of Education.

Families and Teachers as Partners

(1998) KREIDER, H.

Focused on helping families and teachers work together, this article lists what questions families might ask themselves to begin to do their part in building a working relationship and what teachers need to know to work with families to help young children learn. The text is useful for educators, families, and parent advocates. Full text available at www.gse.harvard.edu/hfrp/pubs/

onlinepubs/ecd/mar98.html

Harvard Family Research Project, Early Childhood Digest, National Institute on Early Childhood Development and Education of the Office of Educational Research and Development in the U.S. Department of Education.

Family and Community Involvement: Reaching Out to Diverse Populations

(2000) SOUTHWEST EDUCATIONAL DEVELOPMENT LABORATORY, OFFICE OF EDUCATIONAL RESEARCH AND IMPROVEMENT, U.S. DEPARTMENT OF EDUCATION. This handbook is designed for teachers, principals, superintendents and other educators who want to begin to develop meaningful parent and community involvement in public education in culturally and linguistically diverse communities. Full text available at www.sedl.org/pubs/family29

Family Resource Centers: Where School Readiness Happens

(1998) LITTLE, P.

This article describes the characteristics of family resource centers and how they can help parents get young children ready for school. It also includes suggestions for how parents can get involved in family resource centers. The text is useful for families, educators, and parent advocates. Full text available (English and Spanish) at www.gse.harvard.edu/hfrp/pubs/ onlinepubs/ecd/oct98.html

Harvard Family Research Project, Early Childhood Digest, National Institute on Early Childhood Development and Education of the Office of Educational Research and Development in the U.S. Department of Education.

Helping Parents Communicate Better with Schools

(1999) KREIDER, H., MAYER, E., AND VAUGHN, P. Good communication between parents and teachers has many benefits and can be more comfortable when a variety of strategies are considered. This article offers concrete ways that parents might explore for interacting with teachers, communicating from home, and dealing with language and cultural differences. Suggestions for teachers are also included. The text is useful for families, educators, and parent advocates. Full text available (English and Spanish) at www.gse.harvard.edu/hfrp/pubs/ onlinepubs/ecd/may99.html

Harvard Family Research Project, Early Childhood Digest, National Institute on Early Childhood Development and Education of the Office of Educational Research and Development in the U.S. Department of Education.

Latino Families: Getting Involved in Your Children's Education

(1999) Levine, E.

This article, written for Latino families but applicable to families of other culture, uses a family situation to raise questions and offer suggestions about what schools want, how parents can help with their child's education at home, how parents can help with their child's education at school, and what to do if there are concerns with the school. The article is useful for educators, families, and parent advocates. Full text available (Spanish or English) at www.gse.harvard.edu/hfrp/pubs/ onlinepubs/ecd/apr99.html

Harvard Family Research Project, Early Childhood Digest, National Institute on Early Childhood Development and Education of the Office of Educational Research and Development in the U.S. Department of Education.

B. Family Involvement

Parent Involvement

(1998) LOFARO, N., AND NAINIS, L. The purpose of this guide is to provide information to early care and education providers, family development specialists, and family advocates on resources that support families and build confidence in their knowledge, interest, and skills. Parent Involvement means that families take an active role in their child's education and development, helping to make decisions about their program in partnership with other parents, staff, and program coordinators. Included in this guide are selected recent journal articles, book titles, video titles, and lists of associations and organizations that specialize in Parent Involvement. A separate resource guide, Parent Resources: An Internet Pathfinder, contains Internet sties on Parent Involvement. Full text available at www.headstartinfo.org/pdf/ rg prntin.pdf

Head Start Publications Management Center, Head Start Bureau, Washington, DC.

Parent Involvement in Children's Education: Successful Local Approaches— An Idea Book

(1997) FUNKHOUSER, J., AND GONZALES, M. Based on the positive influence of parent involvement and student achievement, this publication for school administrators, principals, and educators describes resources for involving parents in education, successful local approaches, and other organizations or sources for building successful partnerships. There is specific focus on bridging school and family differences including language and cultural diversity. Document index and full text links available at http://ed.gov/pubs/FamInvolve/index.html *Policy Studies Associates, Inc., Office of Educational Research and Improvement, U.S. Department of Education.*

WEBSITES

Harvard Family Research Project (HFRP) www.gseweb.harvard.edu/~hfrp/

The Harvard Family Research Project strives to increase the effectiveness of public and private organization and communities as they promote child development, student achievement, health family functioning, and community development. HFRP collects, analyzes, synthesizes, and applies information that can guide problem-solving and decision-making relevant to children and families. One subject category, Early Childhood Care and Education, is most relevant to this tool kit.

Head Start Information and Publication Center (HSIPC)

www.headstartinfo.org

The Head Start Information and Publication Center, a federal clearinghouse, is operated as a service of the Head Start Bureau. The mission of the HSIPC is to provide training, guidance, and other materials and information to the broad community supporting Head Start in order to promote the delivery of Head Start quality services. The site offers access to a wide range of training material, resources, and information that can also be useful to child care, child development, and preschool programs not directly affiliated with Head Start.

National Coalition for Parent Involvement In Education (NCPIE)

www.ncpie.org

NCPIE is a coalition of major education, community, public service, and advocacy organization working to create meaningful familyschool partnerships in every school in America. This site offers extensive resources and links to other organizations and websites focused on parent involvement and the achievement benefits of family and school partnerships.

National Parent Teachers Association (PTA) www.pta.org

This National PTA is the largest volunteer child advocacy organization in the United States committed to school excellence through partnerships between parents educators, students and other citizens active in their schools and communities. The site offers many resources relevant to parent involvement including an early childhood initiative, specific standards related to affirming cultural and linguistic diversity, as well as a Checklist for Quality Indicators- a selfevaluations to help schools examine the current status of parent and family involvement. The checklist is available in English, Spanish, Chinese, Korean, Cambodian, and Vietnamese and available in full text from www.pta.org/parentinvolvement/ standards/appenda.asp



Language

OVERVIEW OF THE ISSUE

Helping children whose home language is other than English get ready for school is a shared responsibility among parents, caregivers, and early care and education providers. Young children themselves have great capacity and developmental momentum to learn language. Language acquisition is considered to be a robust and resilient process that is in fact, quite similar across cultures (National Research Council and Institute of Medicine, 2000). Young children learn language in their daily routines and in relationships with caregivers. Early communication and language are rooted in the home culture and the non-verbal aspects of appropriate social behaviors, demonstrating respect, and showing affection towards others (Regional Educational Laboratory Network, 2000). Language and its social context make it one of the most significant tools for interaction, learning, and conveying cultural messages.

As today's early care and education programs and primary classrooms face more diverse groups of children and a greater number of English Language Learners (ELL), family culture and circumstances, early learning opportunities, and instructional practices must be considered in the context of cultural and linguistic diversity. There has been and continues to be differences of opinion about the approach to ELL support: essentially how to best honor and preserve the child's first and native language and simultaneously facilitate English language learning. Cultural and linguistic continuity is especially important for infants and toddlers and many would recommend that these very young children receive their childcare from those who can speak the home language. While this continuity has clear advantages, ensuring that other caregivers have these skills can be challenging. When children enter care outside of the home or preschool and early education, developmentally appropriate practices can

A. Language

support bi-lingual learning. In partnership, parents and caregivers or educators, can nurture the continued development of the home language while creating the conditions for them to acquire English as well (Wong Fillmore, 1991). Characteristics of young English Language Learners that are important to keep in mind include those listed below.

- Young children's first language (especially before age 5) is not fully developed and children are therefore working toward two milestones at the same time.
- Children need to develop their native language along with English so that they can maintain communication and relationships with their parents, extended family members and community.
- Learning English is an additive process and the children's native language must be respected in the early learning setting to preserve self-esteem and encourage its use.
- Involving parents is essential to support learning at home, explore language and literacy patterns in the home, and integrate culture and language into classroom learning (Coltrane, 2003).

Critical Questions for Communities

- What national, state, and/or program laws and regulations guide early childhood program services to children whose first language is other than English?
- What resources or organizations (federal, state, local, or private/non-profit) offer linguistic services for children and/or families?
- What resources are required within the early care or education program?
- What support is available to families for their own language development?
- What values for language acquisition do families of young ELL's have for their children?
- What approach to language instruction is developmentally appropriate and prepares young children for school?
- How will families be engaged in the education of their children?
- How will linguistic development and literacy be linked and support school readiness?

Key Strategies for Families, Providers, and Administrators

What families can do:

- Talk directly to your children by imitating early vocalizations and during daily routines.
- Sing songs and play games using action and language to interact with your child.
- Consider your preference for native language and/or English language development and how you and your child's out-of-home caregivers might work together.
- If you also have limited English proficiency, consider building your own language skills.

What providers can do:

- Help parents identify their language goals for their child and themselves.
- Create a "bilingual" learning environment through materials,

labeling, and other strategies and learn a few helpful phrases to fit with daily routines.

• Provide parent resources in their own non-English language and take-home learning tools that support the native language and English language learning.

What administrators can do:

- Hire bilingual staff who can support young children in having a consistent language with caregiving adults, opportunity to use their native language, and support for English language learning.
- Partner with community agencies to support adult learning for parents who have limited English proficiency.
- Support staff development in learning about cultural diversity and building linguistic capacity.



Principles Related to Fostering Second Language Development in Young Children

The changing demographics of children in early care and education demand that all teachers have some knowledge about second language development and instructional strategies for developing English language proficiency. As a beginning, it is useful for care providers and educators to have a framework of principles derived from current thinking and research in the field of second language acquisition and culturally sensitive instruction.

Principle 1:

Bilingualism is an asset and should be fostered.

There are cognitive, social, and economic advantages to knowing another language. In their immediate social context, children who do not develop and maintain proficiency in the home language run the risk of losing the ability to communicate well with their family and of shifting roles, responsibilities, and relationships among them.

Principle 2:

There is an ebb and flow to children's bilingualism; it is rare for both languages to be perfectly balanced.

Even though a bilingual child's performance in either language may lag behind that of monolingual speakers, this represents a phase in language development when learning in two languages. Most bilingual children are able to reach age-level proficiency in their dominant language given enough exposure and opportunities for use of that language.

Principle 3:

There are different cultural patterns in language use.

Cultural differences in communication—pace, taking turns, silence, and speaking up, for example—have cultural influences that may impact how children participate in early care and education activities.

Principle 4:

For some bilingual children, code-switching is a normal language phenomenon.

Code-switching or mixing two languages in the same sentence is common and in young children can help to resolve ambiguities and clarify statements.

Principle 5:

Children come to learn second languages in many different ways.

Simultaneous acquisition of two languages is when children learn two languages at once. Successive acquisition of two languages is when children learn a new language after the first, usually considered to occur after the age of 3 when most aspects of the first language have been acquired. There will also be language-learning differences based on the child's motivation toward and comfort with the learning process as well as level of exposure to both languages.

Continued

Principles Related to Fostering Second Language Development in Young Children Continued

Principle 6:

Language is used to communicate meaning.

Strategies, such as encouraging children to let you know when they do not understand, using demonstrations and role plays, and using simple sentence structure and paraphrasing, are useful to assure that a child understands the message of language critical to learning and language development.

Principle 7:

Language flourishes best in a language-rich environment.

Opportunities for exposure to and practice with language facilitate language learning. Strategies such as speaking clearly and coherently, expanding and elaborating on a child's speech throughout the day, and explaining unfamiliar vocabulary are just a few examples of enriching teacher-child language interaction.

Principle 8:

Children should be encouraged to experiment with language.

Children learning a new language will make many mistakes—similar to those of a younger child learning their first language. Rephrasing and expanding speech encourages the child's learning in a positive way.

Adapted from:

Coltrane, B. (2003). *Working with young English language learners: Some considerations*. Washington, DC: U.S. Department of Education, National Library of Education, Office of Educational Research and Improvement. Retrieved June 23, 2003, from www.cal.org/resources/digest/0301coltrane.html

McLauglin, B. (1995). Fostering second language development in young children: Principles and practices (Educational Practice Report 14). Washington, DC: U.S. Department of Education, Office of Educational Research and Improvement, National Center for Research on Cultural Diversity and Second Language Learning. Retrieved May 23, 2003, from www.ncela.gwu.edu/pubs/ncrcdsll/epr14.htm

Tips for Parents: What You Say Is Important!

How to Maintain Your Home Language When Your Child Is Learning English

Remember:

A. Language

- You are your child's first teacher.
- Being able to speak two languages is a strength!
- Your home language and English are both important to your child's growing up and being ready for school.
- Your childcare provider or early childhood teacher can be your partner.
- Other parents and your community can work with you too.

Following are some ideas for activities to do with your child:

- Only speak your native language in your home.
- Continue to talk, read and sing songs to your child in your own language.
- Look for bookstores that carry children's books in your home languages or use the Internet to find books, music and children's software in your home language.
- Ask at the library or your child's early care or education program to borrow books in your language.
- Have storytelling time at home using your home language. Share family history and describe what it was like for you growing up. Remember a special event from your childhood and describe who was there, what happened, and what you remember thinking and feeling.
- Create your own materials. Record your own stories and songs for your children. Share fairy tales and songs that you heard as a child.
- If you can't find your child's favorite picture book in your home language,

maybe you can translate it yourself. Write the translation right on the page of the book for a bilingual edition. Or write on a label and cover up the English.

- Share your own materials with childcare or preschool program for staff to play or read during the days your child is there.
- Many schools and child programs label objects and areas in the classroom. Volunteer to write the labels in your home language.
- If you have a flexible work schedule, perhaps you could join in the classroom activities and tell stories, read books or sing songs in your home language.
- Ask teachers in the program to help you connect with other families who speak your language.
- Get together with families who speak your language on a regular basis. Only speak your home language while you are together.
- Meet with other parents to talk about strategies, share materials, and resources for helping children maintain their home language.
- Participate in community activities such as religious or social events or other celebrations and gatherings where your home language is spoken.
- Be patient! Learning and practicing two languages takes time. Your child might mix up words or mix languages together. Some confusion is to be expected.

Adapted with permission from:

Pulido-Tobiassen, D., & Gonzalez-Mena, J. (1999). A place to begin: Working with parents on issues of diversity, Chapter four: Language and bilingualism (pp. 93). Oakland, CA: California Tomorrow.

ANNOTATED RESOURCES

BOOKS AND PRINT

A Place to Begin

(1999) Pulido-Tobiassen, D., and Gonzalez-Mena, J.

This resource binder offers rich information, anecdotes, exercises and tools, and handouts for parents and staff that can assist child care providers health professionals, social services staff, and parents to become more reflective and sensitive to the impact of culture on caring for young children. One chapter focuses on language and bilingualism. The handouts can be available in English, Spanish, Vietnamese, and Chinese. *California Tomorrow, 1904 Franklin Street, Suite* 300, Oakland, CA 94612, (510) 496-0220 or online at www.californiatomorrow.org. (\$24.00)

Looking In, Looking Out: Redefining Child Care and Early Education in A Diverse Society

(1996) Chang, H., Muckelroy, A., and Pulido-Tobiassen, D.

This book explores the roles that childcare and early education play in supporting the well-being of young children and families of diverse racial, cultural, and linguistic backgrounds. It offers principles and strategies that every early care and education program can implement. Of particular interest are those sections that focus on language development, preserving children's family languages, and encouraging all children to learn a second language.

California Tomorrow, 1904 Franklin Street, Suite 300, Oakland, CA 94612, (510) 496-0220 or online at www.californiatomorrow.org. (\$26.95)

One Child, Two Languages: A Guide for Preschool Educators of Children Learning English as a Second Language

(2002) TABORS, P.

Written expressly for teachers, this highly readable resource moves beyond the basics of child development to describe the natural progression of second-language acquisition in young children. Specific attention is given to creating a support classroom environment, addressing differences, measuring progress, and working with parents all related to second-language learners. This text is appropriate for administrators, trainers, and teachers.

Paul H. Brookes Publishing, Baltimore, MD or online at www.brookespublishing.com. (\$24.95)

Preschool Second-Language Acquisition: What We Know and How We Can Effectively Communicate with Young Second-Language Learners (2003) SINGLETON, J.

This text, useful to early care, education and intervention providers and administrators, examines major theories in the area of second language acquisition, describes the developmental process and factors affecting acquisition of a second language, and recommends communication support useful in the early care and education setting. This resource and additional materials included in the collection can be useful to understanding and addressing communication issues with linguistically diverse families.

In R. Milagros Santos, R. Corso, and S. Fowler (Eds.), CLAS Collection #3: Working with Linguistically Diverse Families. SOPRIS WEST Educational Services, 4093 Specialty Place, Longmont, CO 80504, (303) 776-5934, 1-800-547-6747 or online at www.sopriswest.com. (\$12.00)

A. Language

ON-LINE RESOURCES

Bilingualism in Young Children: A Pathfinder for Sources

(2001) WETSEL, J. This text is designed to direct early childhood educators to those resources they need to work with young children, ages birth through eight years, and their families who speak languages other than English. The article offers library resources, search engines, books and journal articles as well as government documents and online resources. Full text available by linking from http://128.174.128.220/ cgi-bin/clasSearch/viewitem.cgi?id=3978 *Oklahoma Christian University, Oklahoma City, OK.*

If Your Child Learns In Two Languages: A parent's guide for improving educational opportunities for children

acquiring English as a second language (2000) ZELASKO, N., AND ANTUNEZ, B. This 31 page guide includes information for parents on the benefits of learning two languages, the research about learning two languages, school services and education decision making related to learning two languages, related federal policies, and resources for additional information. Full text available at in English, Spanish, Vietnamese, Chinese, and Haitian Creole at www.ncela.gwu.edu/pubs/parent/index.htm Online library National Clearinghouse for Bilingual Education (NCELA). Can be ordered by contacting NCELA at 800-531-9347 or 202-467-4283. (\$4.00 each)

Technical Assistance Paper No. 5 Linguistic Diversity and Early Literacy: Serving Culturally Diverse Families in Early Head Start

(2001) Early Head Start National Resource Center, ZERO TO THREE.

This document developed by Early Head Start National Resource Center staff in collaboration with the Head Start Bureau focuses on language development in children from culturally and linguistically diverse families and the implications for later literacy development. The paper offers an overview of language development, current research, family literacy, the literacy-rich environment, and the implications for program management within an Early Head Start or early childhood program. Full text available at www.ehsnrc.org/pdffiles/TA5.pdf Early Head Start National Resource Center, ZERO TO THREE, 2000 M. Street NW, Suite 200, Washington, DC 20036-3307, 202-638-1144.

The Critical Importance of Cultural and Linguistic Continuity for Infants and Toddlers

(1994, OCT./NOV.) CHANG, H., AND PULIDO, D. This article focuses on the ability of the provider to understand, respect, and build upon the cultural as well as linguistic practices of the home to ensure a child's continued growth and development. It also offers examples and raises issues for further research and analysis. Full text available at www.californiatomorrow.org/files/pdfs/ Cultural_Linguistic_Continuity.pdf

In Bulletin of ZERO TO THREE, 15(2). ZERO TO THREE, National Center for Infants, Toddlers, and Families, 2000 M Street, NW, Suite 200, Washington, DC 20035-3307, (202) 638-1144.

Tips for Practitioners: Supporting a Linguistically Diverse Environment in Infant/Family Programs

(2003, JULY) ZERO TO THREE, CENTER FOR PROGRAM EXCELLENCE, WASHINGTON, DC. This brief article for early care and education program staff and administrators focuses on the issue of supporting linguistic diversity within early care and education environments to assure high quality services to infants, toddlers and their families. The article offers a cultural and developmental rationale and suggestions for specific strategies and practices to promote home culture and language. Full text available at www.zerotothree.org/cpe/tip_2003_07.html

What Works Briefs #2: Understanding the Impact of Language Differences on Classroom Behavior

(2002) SANTOS, R., AND OSTROSKY, M. This brief and the accompanying handout offer easy-to-read information about the impact of language differences (including skill levels of English language learners) on children's behavior and social interaction. It offers suggestions for teachers and caregivers to provide a supportive early care and education environment. Full text available at www.csefel.uiuc.edu/briefs/wwb2.html *Center on the Social and Emotional Foundations for Early Learning, University of Illinois at Urbana-Champaign, IL.*

Young Lives: Many Languages, Many Cultures

(1992) Alverez, R., Barton, A., Clark, G., Keenan, J., Lalyre, Y., MacNeill, C., and O'Brien, M.

This report useful for early care and education providers and teachers is organized into three parts. Part I provides the theoretical background-a summary of the nature of language and its relationship to culture, second language acquisition and bilingualism. Part II addresses specific applications of this information to various aspects of early childhood program operations-screening and outreach, curriculum, classroom models, working with families and administrative issues. Part III contains a resource section, listing a variety of organizations to contact for information, training, and technical assistance and products; and a bibliography of books and articles that have been used in preparation of this paper. Full text available at http://128.174.128.220/cgi-bin/ clasSearch/viewitem.cgi?id=187

CLAS Culturally & Linguistically Appropriate Services, Early Childhood Research Institute, University of Illinois at Urbana-Champaign, Champaign, IL.

WEBSITES

ERIC Clearinghouse on Languages and Linguistics (ERIC/CLL)

www.cal.org/ericcll

The ERIC Clearinghouse on Languages and Linguistics is operated by the Center for Applied Linguistics to provide a wide range of services and materials for language educators. ERIC/CLL collects and disseminates information on current developments in education research, educational methods and materials, program design and evaluation, teacher training and assessment in a number of areas including English as a second language, bilingualism and bilingual education, and intercultural communication and cultural education.

National Association for Bilingual Education (NABE)

www.nabe.org

NABE is the only professional organization devoted to representing both English language learners and bilingual professionals (including educators and parents) with affiliate organizations in most states. NABE supports the education of English language learners through professional development, collaboration with civil rights and education organizations, conferences, and offering products and publications valuable to schools and parent involvement in their child's education.

National Clearinghouse for English Language Acquisition and Language Instruction Educational Programs (NCELA)

www.ncela.gwu.edu

NCELA (formerly NCBE, the National Clearinghouse for Bilingual Education) is funded by the U.S. Department of Education Office of English Language Acquisition, Language Enhancement & Academic Achievement for Limited English Language Proficient Students (OELA) to collect, analyze, and disseminate information related to the effective education of linguistically and culturally diverse learners in the U.S. Offering information, publications and products, NCELA strives to address critical issues of linguistically and culturally diverse students, serve as a broker for exemplary practices and research, and become a valuable source of information of English as a Second Language programs, Head Start, Title1, Migrant Education or Adult Education programs.

Office of English Language Acquisition, Language Enhancement, and Academic Achievement for Limited English Proficient Students (OELA)

www.ed.gov/offices/OBEMLA

OELA administers Title III of the No Child Left Behind Act (2001). OELA also provides national leadership in promoting high quality education for English language learners (ELLs). Its mission is to identify major issues affecting the education of ELLs and to assist state and local systemic reform efforts that emphasize high academic standards, school accountability, professional training and parent involvement. The site includes resources, publications, legislation, regulations, and links to state directors of bilingual education.

A. Language

TRAINING AND TECHNICAL ASSISTANCE

Assessing and Fostering the Development of a First and Second Language in Early Childhood

(1998) California Department of Education. CDE press is the largest education publisher in the United States and primarily supports the education community in California. These resources include Assessing and Fostering the Development of a First and Second Language in Early Childhood: Training Manual (\$19.00); Fostering the Development of a First and a Second Language in Early Childhood: Resource Guide (\$10.75); and a companion 30 minute video Talking with Preschoolers: Strategies for Promoting First and Second Language Development. (\$12.00). They can be used to train staff and parents who work in a preschool program to foster language development in children from diverse backgrounds. Two additional resources on assessing language development are also available.

California Department of Education, CDE Press, Sales Unit, 1430 N. Street, Suite 3410, Sacramento, CA 95814, 1-800-995-4099 or online catalog at www.cde.ca.gov/cdepress/catalog/childdev.html

The Program for Infant/Toddler Caregivers Module III: Learning and Development

(1998) PROGRAM FOR INFANT/TODDLER CAREGIVERS (PITC).

One module in a series of four training modules produced by WestEd PITC, Module III includes the Curriculum: Infant/Toddler Caregiving: A Guide to Language Development and Communication (\$12.50); Trainer's Guide: Module III: Learning and Development (\$20.00); and Video: Early Messages: Facilitating Language Development and Communication (\$65.00). Articles in the curriculum guide focus on language development and communication of older infants, emphasizing that the home language and culture of children play a vital role in their early development and care. The video, available in English, Cantonese, and Spanish, supports these messages through rich examples of infant-caregiver communication and illustrates ten strategies caregivers can use to enhance communication and language development. Audiences would include: professional developers, social service agencies, community-based organizations, and parents.

WestEd Center for Child and Family Studies and the California Department of Education, CDE Press, Sales Office, P.O. Box 271, Sacramento, CA 95812-0271, 1-800-995-4099.

BLiteracy

OVERVIEW OF THE ISSUE

Language and literacy development are inseparably linked. For young children, both begin early and in the context of relationships with parents and other caregivers. Early literacy is defined as those experiences and skills from birth through early childhood that promote the later development of reading and writing. These experiences and skills—like language development—take place in everyday routines, activities, and observations and can be supported by specific strategies. Research has shown that children benefit from environments that have high amounts of rich discourse or conversation and print-related experiences. Parents can foster early literacy by talking with their child, playing word or sequencing/sorting games, and reading to them in an interactive and engaged manner. To what extent these home experiences are available to young children can depend on many factors—including social class and parent education.

A family's culture, language, child rearing practices, and expectations can also be an influence. The nature of literacy and numeracy interactions in the home are a direct reflection of parents/views (values and beliefs) about how children learn to read, write, use numbers and acquire other competences. This is not to assume a negative effect or deficit model. Instead, it simply stresses the importance of a culturally and linguistically competent partnership between families and providers in order to understand differences in perspective and approach to supporting literacy development in young children.

Creating a literacy rich environment for young English language learners—in the home and the early care and education settings—is one approach to supporting early literacy and the development of reading and writing skills. Important aspects to a literacy rich environment relative to cultural and linguistic competence are:

- The family's involvement in the child's development and education;
- The family's adult education/literacy level;
- The overall quality of the early care and education program;
- The quality of adult-child conversation, interaction, and messages about the "joy" of reading;
- The availability of developmentally appropriate reading materials—such as books, bi-or multi-lingual books and other learning experiences; and
- The presence and messages of multicultural materials that relate to culturally diverse community experiences and/or home life (Smallwood, 2003, Snow et al., 1999).

B. Literacy

Family literacy is one approach to helping parents help their children succeed in gaining literacy skills. It is generally a program where adults and children learn side-by-side. Children develop the language and literacy skills they need with the support of their parents or caregivers, who also have the opportunity to improve their own skills (National Center for Family Literacy, 2003). In a recent review of literacy programs, Caspe (2003) of the Harvard Family Research Project found that those family literacy programs that were successful with culturally diverse, immigrant families were guided by several principles. These principles indicated that programs should:

- Strive to understand parents' literacy strengths and reinforce their knowledge and skills;
- Believe that literacy is acquired through shared dialogue, where learners are actively contributing to their own learning;
- Provide opportunities for adults and children to reflect on literacy practices in their daily lives;
- Recognize the literacy history of parents;
- Grow out of the needs of participants and examine resources in a sociocultural context;
- Adopt an empowerment philosophy and take action to break down patterns of social isolation; and
- Respond to the interests of adults and children.

These principles reinforce the importance of culturally and linguistically competent services in supporting child and family literacy and school readiness.

Critical Questions for Communities



- What national, state, and/or program laws and regulations guide literacy services to children and their families?
- What resources or organizations (federal, state, local, or private/non-profit) offer literacy services for children and/or families?
- What resources are essential within the early care or education program to support school readiness?
- What support is available to families for their own adult literacy development?
- What values and home approaches for literacy development do families have for their young children?
- What approach to literacy instruction is developmentally and linguistically appropriate?
- How will families be engaged in the education of their children?
- How will linguistic development and literacy be linked?

Key Strategies for Families, Providers, and Administrators

What families can do:

- Read aloud to your children and have children's books available to your child with pictures and words that match their age and development and that they can handle and explore with your encouragement.
- Take advantage of your local library's services for young children: book lending, story time, etc.
- If your own reading skills are limited, consider building your own literacy skills.

What providers can do:

- Help parents identify literacy goals for their child and themselves.
- Create a literacy rich environment in your program that includes multicultural materials, multimedia

resources, and interactive learning that is developmentally appropriate.

• Invite parents to participate in learning activities in your program where literacy development activities can be modeled and practiced.

What administrators can do:

- Invest in materials and curricula that best support literacy development of young children, including those who are bi-lingual.
- Partner with community agencies to link family literacy and literacy skill development in young children.
- Support staff development in learning about cultural diversity and creative ways to engage families in the curriculum and early literacy activities.

B. Literacy

Commitment to cultural knowledge and family literacy supports services for culturally diverse families.

COMMUNITIES CAN!, COMMUNITIES OF EXCELLENCE, 2001

Lowell is located about 30 miles northwest of Boston. With a long history of welcoming immigrant groups, over half of the 100,000 people in Lowell are from diverse racial and ethnic groups. Cambodians and Hispanics form the largest ethnic populations (the Cambodian community is the second largest in the US). Other immigrants come from Portugal, Brazil, Vietnam, Laos, and from those parts of India that speak Gujarati. Over 50 percent of the children in the community learn English as a second language.

A family literacy program at The Lowell Family Literacy Center and Building Language for Literacy, a research-based curriculum in preschool classrooms, have been major strategies in supporting the diverse children and families in Lowell. The Family Literacy Center offers a variety of bilingual services (playgroups, social events, parent meetings, referrals to health and social services, and early childhood and adult education classes), has flexible hours, and offers these services in a family-friendly environment at no cost to families. Parents learn about their important role as their children's first teachers as well as guidance on child and language development.

The preschool curriculum is offered in public school preschools, Head Start, and childcare settings and is supported by other contact points (WIC, pediatricians offices, social service agencies) where "literacy bags" are given to children and families. With support from the Literacy Center, materials and resources have been translated into several languages, and information on community programs is placed in local ethnic supermarkets. For more information, contact Karen Tewhey at 978-446-7499 or ktewhey@lowell.k12.ma.us

EARLY LEARNING

Simple Things You Can Do: Tips for Families, Providers, Administrators, and Communities

Everyone has an important contribution to help young children develop literacy skills and be ready for school. Many opportunities to help are simple and can be supported by families, providers, and community members. The following is a quick list to stimulate creative thinking about other possibilities within your community.

Families:

- □ Read to your child for 30 minutes every day. Sing songs or tell stories.
- Borrow books from the library or from your child's day care of preschool program.
- □ Keep books that interest your children in places where they can easily reach them.
- □ Have crayons, pencils, and paper available so your children can practice writing.

Providers:

- ☐ Make reading books part of your one-on-one time with babies.
- \Box Set up a reading area that is cozy, well lit, and has books within reach.
- □ Teach children rhymes, songs, and poems.
- □ Publish a multilingual newsletter with short stories that parents can read to their children.

Administrators:

- □ Start a school or community wide reading program.
- Establish a family literacy program.
- □ Organize volunteers as reading partners for young children or their parents.
- □ Find ways to make the school library a community resource.

Community, Cultural, and Religious Organizations:

- □ Volunteer as reading partners or tutors for young children and their families.
- Donate children's books to an early childhood center or a parent/child play group.
- Develop a weekly storytelling hour at your organization or center.
- □ Join together for a community-wide ready initiative.

From:

U.S. Department of Education. (1997). Simple things you can do to help a child read well and independently by the end of the third grade. Retrieved August 24, 2003, from www.ed.gov/pubs/SimpleThings

B. Literacy

Checklist for Selecting Multicultural Picture Books

For young children, multicultural picture books represent a rich resource for literacy, language, and cognitive development. It is important that these books represent the wide variety of ethnic, racial, and cultural groups within the United States and allow young children opportunities to develop their understanding of others, while affirming children's own diverse backgrounds. In addition, there are thematic and language considerations, particularly for young English language learners and their families who speak languages other than English at home.

Selecting the multicultural picture books that are culturally and linguistically competent requires an intentional review of the book's pictures and text. Some key considerations for selecting multicultural picture books are noted below.

- □ Is the story interesting, engaging, and free of stereotyping?
- □ Are characters "outside the mainstream culture" depicted as individuals or as caricatures?
- ☐ Are the character illustrations of those from the same ethnic group depicted as individuals with unique features? Or do they all look alike?
- Does their representation and depicted lifestyles include significant specific cultural information? Or does it oversimplify and follow stereotypes?
- □ Who has the power in this story? What is the nature of their power, and how do they use it?
- □ Who has the wisdom in the story? What is the nature of their wisdom, and how do they use it?
- □ What are the consequences of certain behaviors? What behaviors or traits are rewarded, and how? What behaviors are punished and how?
- □ How is language used to create images of people of a particular group? Does the dialogue accurately represent oral tradition from which the characters come?

- ☐ How are the relationships between characters from different cultural groups portrayed?
- □ What does the narrative or story and the pictures say about race? Class? Culture? Gender? Age?
- □ Who has written this story? Who has illustrated it? Are they part of the culture they represent?
- □ How recently was the book published and does it represent current understanding and dynamics of cultural and linguistic diversity?
- \Box Is the book available in other languages?
- □ Is the book available in bilingual format with English and another language side-by-side?
- □ Is the text of the book age appropriate and is its language at or slightly above the child's mastery of the English language?
- Does the book contain repeated, predictable language patterns, such as rhyming and repetition of sounds, words, refrains, or entire sentences that can reinforce English language learning?
- ☐ Are the illustrations clear and help tell the story for children who are English language learners?

Adapted from:

Higgins, J. (2003). Multicultural children's literature: Creating and applying an evaluation tool in response to the needs of urban educators. Retrieved July 30, 2003, from New Horizons for Learning Web site: www.newhorizons.org/strategies/multicultural/higgins.htm

Selecting multicultural picture books. (2002, Spring). ERIC/ECCE Newsletter, 14(1).

Smallwood, B. (2002, November). Thematic literature and curriculum for English language learners in early childhood education. *ERIC Digest*. Retrieved July 30, 2003, from www.cal.org/resources/digest/0208smallwood.html

Resources for Multicultural and Bilingual Books for Young Children and English Language Learners

These resources offer multicultural and bi-lingual books for young children and English language learners that may be used in the home or early care and education settings. They offer a variety of books for children of different ages and skill levels in formats that include English only, languages other than English only, and bilingual combinations of English and other languages. In addition, some offer multi-media kit combinations of books and audiotapes as well as activity cards for "do-at-home" parent involvement.

Bebop Books

An imprint of LEE & LOW Books, Inc. 95 Madison Ave. New York, NY 10016 (212) 779-4400 www.bebopbooks.com Bebop books are child-centered stories that support literacy learning and provide multicultural content for beginning readers in guided reading settings.

Children's Book Press

246 First Street, Suite 101
San Francisco, CA 94105
(415) 995-2200
www.cbookpress.org
Children's Book Press publishes multicultural books and audiocassettes for children including folktales and contemporary stories from minority and new immigrant cultures. Bilingual books are available.

Innovative Educators

P.O. Box 520
Montezuma, GA 31063
1-888-252-5437
www.innovative-educators.com
Innovative Educators offers customized, packaged sets of books to meet the specific needs of any early care and education program. Multicultural and bilingual (primarily Spanish) books are available.

Kaplan Early Learning Company

P.O. Box 609 Lewisville-Clemmons Road Lewisville, NC 27203-0609 1-800-334-2014 www.kaplanco.com This company is a major source of early childhood educational resources and materials, including multicultural and bilingual (primarily Spanish) books.

Continued



Resources for Multicultural and Bilingual Books for Young Children and English Language Learners Continued

Lakeshore Learning Materials

2695 E. Dominguez Street
Carson, CA 90810
1-800-778-4456
www.lakeshorelearning.com
This company is a major source of early childhood educational resources and materials, including multicultural and bilingual (primarily Spanish) books.

Multicultural Kids

P.O. Box 757
Palatine, IL 60078
1-800-711-2321
www.multiculturalkids.com
This source of multicultural materials to preschool and elementary school age children, including books, videos, arts and crafts, puzzles, music, and educational resources.
Translated materials are available in French, German, Italian, Japanese, Chinese, Khmer, Tagalog, and Spanish.

Oyate

2702 Mathews St. Berkeley, CA 94702 (510) 848-6700

www.oyate.org

This Native American organization's mission is to see that the lives and histories of Native people are portrayed authentically. They offer recommended storybooks about their cultural that are appropriate for young children.

Pan Asian Publications

29564 Union City Blvd. Union City, CA 94587 (510) 475-1185 www.panap.com

A leading supplier and library service provider of Asian language materials to schools and libraries across the world; this company offers multicultural, multilingual books as well as those in a bilingual format. Translated or bilingual materials are available in 36 languages, including Spanish, Somali, Tagalog, Portuguese, Lao, Hmong, Farsi, and Arabic.

Shen's Books

40951 Fremont Blvd. Fremont, CA 94538 1-800-456-6660 www.shens.com

Shen's Books offers a large selection of multicultural and multi-lingual books for children of all ages, including young children. A selection of translated materials is available in French, German, Italian, Japanese, Chinese, Spanish, Tagalog, Hmong, Khmer, Vietnamese, Lao, Korean, Russian, and Navaho.

ANNOTATED RESOURCES

BOOKS AND PRINT

Children Achieving: Best Practices in Early Literacy

(1998) NEUMAN, S., AND ROSKOS, K. EDS.

This text for providers and teachers focuses on the theory and practice of early literacy instruction for children ages 2-8. Each chapter examines and describes practices surrounding a critical issue in early literacy. Several chapters focus on teaching children who are learning English as a second language, culturally responsive instruction, and parent involvement. Learning resources for young readers and writers are included in the appendix.

International Reading Association, 800 Barksdale Road, P.O. Box 8139, Newark, DE, 1-800-336-7323. (\$28.95)

Family Literacy: An Annotated Bibliography

(2000) U.S. DEPARTMENT OF EDUCATION, WASHINGTON, DC.

This document summarizes writings and research on family literacy and related topics useful to program staff, researchers, community leaders, and policy makers. Specific topics include programs and practices, program development, assessment, and curriculum and instructions. Additional focus is given to emergent literacy, parent-child interaction, and intergenerational programs.

U.S. Department of Education, Washington, DC. Can be ordered via Internet at www.edpubs.org. (Free)

ON-LINE RESOURCES

Family Literacy: A Review of Programs and Critical Perspectives

 $\left(2003\right)$ Caspe, M.

This critical review of approaches to family literacy highlights the emerging principles of offering family literacy programs that might be most effective with immigrant families. The text offers some promising practices that could be useful to literacy specialists, administrators, and community planners. Full text available at

http://gseweb.harvard.edu/hfrp/projects/fine/ resources/research/literacy.html

Harvard Family Research Project. Harvard Graduate School of Education, Cambridge, MA.

Family Literacy for Language Minority Families: Issues for Program Implementation

(1994, SUMMER) NATIONAL CENTER FOR BILINGUAL EDUCATION, PROGRAM INFORMATION GUIDE SERVICES, NUMBER 17.

This article describes considerations in designing and implementing family literacy programs for limited-English speaking families, illustrated by one federally funded program for Latino families, Project FLAME (Family Literacy: Aprendiendo, Mejorando, Educando/Learning, Better, Education). The article, useful to literacy specialists, administrators, community planners, and families, reviews the family's role and involvement in children's learning and discusses the practical issues of program development. Full text available at www.ncela.gwu.edu/pubs/pigs/pig17.htm

Guide for Reading: How Parents Can Help Their Children Be Ready to Read and Ready to Learn

(2003) U.S. DEPARTMENT OF EDUCATION, WASHINGTON, DC.

This brochure provides tips to parents of young children regarding how to prepare them for reading and learning though parent involvement and at home activities. Available in Spanish and English at www.edpubs.org

Head Start Literacy Tool Kit

HEAD START INFORMATION AND PUBLICATION CENTER, HEAD START BUREAU, WASHINGTON, DC. Guided by research, developmentally appropriate practices, and Head Start legislation and regulations, this tool kit offers literacy specialists, early care and education providers, and family development specialists information and links to Head Start specific resources, books, articles, federal resources, websites, and organizations that can be useful to any early childhood program. The tool kit can be accessed at www.headstartinfo.org/infocenter/literacy_tk.htm

B. Literacy

Multicultural Children's Literature: Creating and Applying an Evaluation Tool in Response to the Needs of Urban Educators

(2002) Higgins, J.

This article defines multicultural children's literature, provides a rational for and information about current trends, and offers a list of recommended books that meet the evaluative criteria set forth in the Multicultural Children's Literature Evaluation Tool. The text and resources are useful to early care and education providers, teachers, and literacy program specialists and administrators. Full text available at www.newhorizons.org/strategies/ multicultural/higgins.htm

New Horizons for Learning, Seattle, WA.

READY-SET-READ

(1997) DEPARTMENT OF HEALTH AND HUMAN SERVICES, THE CORPORATION FOR NATIONAL SERVICE, AND THE DEPARTMENT OF EDUCATION, WASHINGTON, DC.

This kit for both families and caregivers provides ideas useful to helping young children learn about language and its connection to reading to promote reading and language skills for children. It includes READY—SET—READ for Families: Early Childhood Language Activities for Children from Birth through Age Five (English and Spanish); READY—SET—READ for Caregivers: Early Childhood Language Activities for Children from Birth through Age Five (English and Spanish); On the Road to Reading: A Guide for Community Partners; and Reading Helpers: A Handbook for Training Tutors. All are available through the National Child Care Information Center 243 Church Street NW, 2nd Floor, Vienna, Virginia 22180, 800-616-2242. Also available on-line at www.ed.gov/Family/ RSRkit.html

Review Guidelines for Material Selection: Emergent Literacy

(2001) Culturally and Linguistically Appropriate Services Early Childhood Research Institute, University of Illinois at Urbana-Champaign, Champaign, IL.

These guidelines are intended to help service providers and individuals involved in personnel preparation determine the congruence between the beliefs, values, and practices of the individuals in their community and current recommended practices related to early childhood/special education and cultural and linguistic competence. The content is specific to emergent literacy and can be adapted to meet local needs. Full text available at www.clas.uiuc.edu/review/ index.html

Simple Things You Can Do To Help All Children Read Well and Independently by the End of Third Grade

(1997) America Reads Challenge: Read*Write*Now!, U.S. Department of Education.

This resource lists ways that all members of a community—families, teachers, principles, librarians, literacy organization, businesses, cultural and religious groups, non-profits, universities, and the media-can get involved in increasing the language and reading skills for young children. It also lists additional literacy resources. Full text available at www.ed.gov/PDFDocs/simple.pdf

Technical Assistance Paper No. 5 Linguistic Diversity and Early Literacy: Serving Culturally Diverse Families in Early Head Start

(2001) EARLY HEAD START NATIONAL RESOURCE CENTER, ZERO TO THREE.

This document developed by Early Head Start National Resource Center staff in collaboration with the Head Start Bureau focuses on language development in children from culturally and linguistically diverse families and the implications for later literacy development. The paper offers an overview of language development, current research, family literacy and the literacy-rich environment, and the implications for program management within an Early Head Start or early childhood program. Full text available at www.ehsnrc.org/pdffiles/TA5.pdf

Early Head Start National Resource Center, ZERO TO THREE, 2000 M. Street NW, Suite 200, Washington, DC 20036-3307, 202-638-1144.

WEBSITES

Family Literacy Foundation *www.read2kids.org*

The Family Literacy Foundation encourages parents and extended family members to read aloud with young children, with special emphasis on the first five years, for the educational and emotional benefits to all involved. The website includes descriptions of programs sponsored by the organization and read aloud resources. In particular, the read aloud resources include multicultural and bi-lingual (English/Spanish) books.

National Center for ESL Literacy Education (NCLE)

www.cal.org/ncle

This national center is operated by the Center for Applied Linguistics (CAL) with funding from the U.S. Department of Education, Office of Vocational and Adult Education. It is the only national information center focusing on the language and literacy education of adults and outof-school youth learning English. NCLE provides information and resources to teachers, tutors, program directors, researchers, and policy makers interested in the education of refugees, immigrants, and other U.S. residents whose native language is other than English.

National Center for Family Literacy (NCFL)

www.famlit.org

The National Center for Family Literacy (NCFL) works to ensure that parents and children have the literacy skills they need to succeed. NCFL is recognized worldwide as the leader in family literacy development, providing training and resources to practitioners and administrators. The site offers information about initiatives, training and conferences, products, and resources.

National Child Care Information Center (NCCIC)

http://nccic.org

This website, designed to support child care providers, offers links to literacy resources including publications, organizations, children's literature book lists, and non-internet resources.

National Even Start Association

www.evenstart.org

The mission of the National Even Start Association is to provide a national voice and vision for Even Start Family Literacy programs. The work of the association is to support approximately 800 local Even Start sites across the United States that enrich language development and literacy skills in both children and families through integrated learning and education. This web can assist in linking to local sites and related resources.

Family Friendly Communication

Interpreters and Translators

OVERVIEW OF THE ISSUE

Interpreters and translators enable community members to communicate, build relationships, and work together. They are essential to understanding, not just language or the written word, but can assist in eliciting the meaning of an individual's experience, attitudes, values and culture. It is through language that we communicate and can describe individual cultural meaning. To make a distinction between the two:

- Interpreters are those who orally restate in one language what has been said in another language;
- Translators are those who convert the written materials from one language to another.

The role of interpreters and translators is important in assisting families who have limited English proficiency or speak a language other than English. Interpreters can help families express their interests, gather information, as well as engage them in the community and ways to support their child's healthy development and school readiness. For providers, they can help build cultural knowledge and facilitate their work in supporting children and families. Administrators can gather information from their whole constituency and design and deliver service that will best serve the whole community. For neighborhoods, interpreters and translators can link families, services, and systems and build cohesion and a greater sense of community.

A. Interpreters and Translators

Critical Questions for Communities

- What personal attributes, education, and skills should an interpreter and/or translator have?
- What are important steps in working with interpreters and/or translators?
- How and where can one find interpreters and/or translators?
- What are some important considerations and/or potential pitfalls?

Key Strategies for Families, Providers, and Administrators

What families can do:

- Help to identify resources in the community that may offer interpreter or translation services.
- Be willing to work with an interpreter/translator with whom they may not be completely familiar.
- Volunteer to translate materials within their range of proficiency.

What providers can do:

• Prepare themselves for working with interpreters and translators by being clear about their roles and responsibilities.

- Understand the stages of preparing to work with interpreters and translators.
- Consider the issues of confidentiality.

What administrators can do:

- Identify resources within the community for interpreters and translators.
- Provide training for staff/providers on how to work with interpreters and translators.
- Initiate partnerships and/or contracts with organizations that will support interpretation and translation services.



Guidelines for Selecting and Working with Interpreters

Communicating effectively with culturally and linguistically diverse families requires having access to interpreters and translators. Having resources available to offer the services of these specialists is invaluable to effective programs and impacted by laws that assure access to services. These guidelines can help with choosing interpreters and making the most of their services.

Select interpreters that are:

- Proficient in the language (including dialect) of the family and the interventionist so that both parties are assured accurate and understandable interpretation.
- Trained and experienced in cross-cultural communication and the dynamics of serving as an interpreter. This includes the professional and ethical matters of neutrality, accuracy, and confidentiality.
- Trained in the appropriate professional field relevant to the specific family interventionist interaction. Familiarity with the field will enable the interpreter to interpret information accurately, including more technical terms, without changing the intent or substance of the message.
- Able to understand and appreciate the respective cultures of both parties and to convey the more subtle nuances of each with tact and sensitivity. The interpreter can then provide guidance related to the "do's" and "don'ts" of verbal and nonverbal factors in interpersonal, inter-cultural communication.

Avoiding Potential Pitfalls

- Avoid using bilingual friends or adult family members who have not training as interpreters, may be unfamiliar with the content or technical meaning of the information to be relayed, and although trusted by the person for whom the interpretation is being made, may not be bound to keep sensitive information confidential.
- Avoid using bilingual children within the family or the early care and education program who may not have full language capacity or be mature enough to understand and relay the message. It is preferable to have adults translate for family members to convey respect and support for the parent or caregiver as the empowered decision maker.
- Be sensitive to the cultural issues of social class, educational level, age, or sex of the interpreter. Differences between the interpreter and the individual for whom the interpretation is offered may be a concern and limit the success of the interpretation.

Work with interpreters effectively by:

- Preparing for the Interview
 - Meet with the interpreter and relay the specific nature and purpose of the family interaction, the corresponding content areas to be addressed and their relative significance, and who will be participating in the interview.

Continued

Guidelines for Selecting and Working with Interpreters Continued

- Be sure that the interpreter is familiar with any technical terms, written documents, or other special content or materials that will be part of the interaction.
- Ask the interpreter to guide your preparation, which may include learning proper protocols and forms of address (including a few greetings and social phrases) in the family's primary language, appropriate verbal and non-verbal behavior, and other cultural factors that may influence effective interaction.

• Engaging in the Interview

- Try to make sure that there is time for the interpreter to meet with the family prior to the formal meeting to make introductions, learn something about one another that may assist with the interpretation and interaction, and establish rapport.
- During the interview, address your remarks and questions directly to the family (not the interpreter); look at and listen to family members as they speak and observe their facial expressions, voice intonations, and other nonverbal communication.
- Use a positive tone of voice and facial expressions that sincerely convey respect and your interest in the family; and address them in a calm, unhurried manner. Avoid body language or gestures that may be offensive or misunderstood.
- Speak clearly and somewhat more slowly. Limit your remarks and questions to a few sentences between translations and avoid using jargon, giving too much information, or long complex instructions.
- Periodically check on the family's understanding and the accuracy of the translations by asking the family to repeat instructions or whatever has been communicated in their own words, with the interpreter facilitating.
- Expect the interpreter to use the client's own words as much as possible rather than paraphrasing or "polishing" it into professional jargon. This approach will also help to make sure the family understands the communication. It will also help to gauge the family's reaction or emotional state during the interaction.

• Debriefing after the Interview

- Meet with the interpreter to clarify any questions related to the responses from the family and the interaction during the interview. These may include questions about the verbal or nonverbal exchange, cultural issues and protocols, or planning for next steps.
- Discuss the interpretation process and deal with any concerns related to working with the interpreter and ways to improve on the interaction between the interpreter and the provider for future interviews.

Adapted from:

Lynch, E. W., & Hanson, M. J. (1998). Developing cross-cultural competence—A guide for working with children and their families (2nd ed.). Baltimore, MD: Paul H. Brookes Publishing Company.

Randall-David, E. (1989). *Strategies for working with culturally diverse communities and clients*. Association for the Care of Children's Health. Washington DC: Office of Maternal and Child Health.

Slentz, K. (1997). Evaluation and assessment in early childhood special education: Children who are culturally and linguistically diverse. Seattle Public Schools, Special Education, Office of Superintendent of Public Instruction. Retrieved June 19, 2003, from the Seattle Public Schools Web site: www.kl2.wa.us/SpecialEd/pubdocs/CLD.pdf

ANNOTATED RESOURCES

BOOKS AND PRINT

Developing Cultural Competence: A Guide for Working with Young Children and Their Families

(1998) LYNCH, E., AND HANSON, M. Written for the early intervention community, this book is based on best practices in early intervention, literature on intercultural effectiveness, and insights and experience from the field. The three sections of the book introduce the issues of working with families from diverse cultural, ethnic, and language groups; some broad observations about the history, values, and beliefs of the major cultural and ethnic groups that make up the United States related to family, childrearing, and disability, and a synthesis and recommendations for enhancing the cultural competence of interventionists.

Paul H. Brookes Publishing Company, Inc., Baltimore, MD. (\$41.95)

Working with Interpreters to Plan Early Childhood Service with Limited-English-Proficient Families

(2003) Ohtake, Y., Fowler, S., and Milagros Santos, R.

This text for program planners, administrators, and early care and education providers will review the complexity of the interpretation process, identify interpreter styles and skills, describe strategies for enhancing accurate interpretation, and provide guidance for using interpreters. This resource and additional materials included in the collection can be useful to understanding and addressing communication issues with linguistically diverse families.

In R. Milagros Santos, R. Corso, and S. Fowler (Eds.), CLAS Collection #3: Working with Linguistically Diverse Families. SOPRIS WEST Educational Services, 4093 Specialty Place, Longmont, CO 80504, (303) 776-5934, 1-800-547-6747 or online at www.sopriswest.com. (\$12.00)

ON-LINE RESOURCES

Policy Brief 2: Linguistic Competence in Primary Health Care Delivery Systems: Implications for Policy Makers

(2001) Goode, T., Sockalingam, S., Brown, M., and Jones, W.

This policy brief includes guidance and a checklist to facilitate the development of linguistic competence within primary health care organizations useful to planning groups, administrators, and policy makers. Full text available at http://gucchd.georgetown.edu/nccc National Center for Cultural Competence, Georgetown University Center for Child and Human Development.

Providing Language Interpretation Services in Health Care Settings: Examples from the Field

(2002) YOUDELMAN, M., AND PERKINS, J. This report profiles a variety of programs around the country that provide interpretation services in health care settings, and also identifies federal, state, local, and private funding sources for interpretation services. Full text available at www.cmwf.org/programs/minority/ voudelman_languageinterp_541.pdf or at www.healthlaw.org/race.shtml National Health Law Program for The Commonwealth Fund.

WEBSITES

American Translators Association www.atanet.org

The American Translators Association is a professional membership organization of interpreters and translators in the United States. Its primary goals include fostering and supporting the professional development of translators and interpreters and promoting the translating and interpretation professions. The website offers an online directory of translators and interpreters, searchable by language, area of specialization, and zip code.

A. Interpreters and Translators

Diversity Rx

www.diversityrx.org

The mission of Diversity Rx is to promote language and cultural competence to improve the quality of health care for minority, immigrant, and ethnically diverse communities. The website includes access to a data base of cultural competence model programs, applicable federal standards, medical interpretation resources and reference guide, and best practices descriptions.

National Health Law Program (NHeLP) www.healthlaw.org

The National Health Law Program is a national public interest law firm that seeks to improve health care for America's working and unemployed poor, minorities, the elderly and people with disabilities. NHeLP serves legal services programs, community-based organizations, the private bar, providers and individuals who work to preserve a health care safety net for the millions of uninsured or underinsured low-income people. The website offers multiple resources and links related to immigrant access to health care and ensuring language services and linguistic access in health care settings.

TRAINING AND TECHNICAL ASSISTANCE

Conversations for Three: Communicating Through Interpreters

(1999) CHEN, D., CHAN, S., AND BREKKEN. L. This 60 minute training video and step-by-step trainer's guide teaches service providers and interpreters how to communicate effectively with families, regardless of their cultural or linguistic backgrounds.

Paul H. Brookes Publishing Co, Inc., PO Box 10624. Baltimore, MD 21285, 1-800-638-3775 or order online at www.BrookesPublishing.com. Can also be ordered through Child Development Media at www.childdevmedia.com. (\$75.00)

Branslated Materials

OVERVIEW OF THE ISSUE

To encourage family involvement in their child's healthy development, early care and education, and school readiness, family friendly materials (brochures, guides, books, etc.) that reinforce developmentally appropriate practices can be useful. Although learning for adults often occurs in the context of a relationship with a teacher, instructor, trainer or service provider, written materials have their place. For all families, effective written materials convey messages that have personal value and meaning for them. For those families whose English language proficiency is limited, the additional feature of accurate translation into their home or native language is most useful.

Translated standard documents, such as registration materials, financial forms, and medical forms as well as materials or guides related to child care resources, school enrollment, child development information brochures, and parent education curricula can optimize the opportunity for parents and communities to support strong families and young children. Simple translation, however, does not necessarily reflect cultural and linguistic competence. Culturally competent translated materials also demonstrate a respect for the beliefs, values, practices, and beliefs of those for whom the materials are written as well as of those who are trying to convey important health, mental health, child development or early care and education information.

In general:

- Most family friendly materials related to child development and school readiness are available in English.
- Most existing translated materials related to children and families focus on health.
- Most translated materials are available in Spanish, with fewer resources in other languages.
- Translated materials from national resources tend to have a broad focus and universal application (e.g., Centers for Disease Control, U.S. Department of Education, Office of Minority Health).
- Translated materials tend to be locally created by state/county health departments, health care systems, universities (extension programs), and school districts or in collaboration with literacy councils and ESL programs (e.g., local service brochures, parent information materials, etc.).

B. Translated Materials

Critical Questions for Communities

- What are the key messages for families about child health, development, and school readiness?
- What family friendly materials already exist within our community?
- What family friendly materials exist outside of our community and can be used or adapted to meet our needs?
- What translated materials already exist within our community?
- What translated materials do we need? In what languages? For what cultural groups?
- What translation resources are available to our community?
- What translated materials exist outside of our community and can be used or adapted to meet our needs?

Key Strategies for Families, Providers, and Administrators

What families can do:

- Provide a personal, cultural perspective.
- Describe what kind of information they need.
- Review translated materials and give feedback.

What providers can do:

- Review current or already translated materials that might be useful.
- Provide information for the content of the message.
- Request input and feedback from families.

What administrators can do:

- Determine a process for working with families, providers, and community partners.
- Craft and adopt an organizational policy that supports culturally and linguistically competent materials.
- Identify funding, partners, and/or community resources to support translation of materials.

The Multilingual Health Resources Exchange A Way to Share Translated Health Education Materials

PROMISING PRACTICE

In Minnesota, more than a dozen health care organizations agreed to collaborate to explore ways to share the responsibility and cost of creating and distributing health education materials for non-English speaking patients. Hospitals, community health departments, insurers, health clinics, managed care providers, and university education and research centers joined together to form the Multilingual Health Resources Exchange. The goals of the Exchange are to share information about translated materials currently available in the state and nationwide; to share health education approaches that work for patients whose first language is not English; to develop a clearinghouse for translated written, audio, and video health education resources; and to jointly create new materials in multiple languages.

The Exchange has established a Web site that allows Exchange members to download and print translated materials. Collaborating members contribute an annual fee and three or more of their own translated printed materials for inclusion on the Exchange website. The site has been available for member organizations since April 2003 and at present, there are approximately 300 translated materials on more than 30 topics that can be printed by Exchange members, as needed. Contact information for audio and video health education resources is also included in the Exchange database

By working together, each organization experiences cost savings and is better equipped to serve the culturally and linguistically diverse families and children in Minnesota. For more information go to www.health-exchange.net or contact Marcia Hayes marcia.g.hayes@healthpartners.com or Patricia Ohmans pohmans@healthadvocates.info

A Guide to Choosing and Adapting Culturally and Linguistically Competent Health Promotion Materials

Purpose of this Document

Healthy People 2010 sets elimination of health disparities as a key goal for the United States (U.S. Department of Health and Human Services, 2000). For many of the diseases and conditions targeted in HP 2010, health promotion messages can play an essential role in reducing risk and in decreasing debilitating effects and death rates among diverse populations. While a large body of literature on the general theory and methods of developing health promotion messages and materials exists, a paucity of its content addresses specific approaches effective with diverse populations. The purpose of this document is to provide guidance on how to assure that health promotion materials reflect the principles and practices of cultural and linguistic competence.

The Guide aims to assist these groups in making appropriate choices among existing materials, as well as to provide recommendations to adapt such materials for use in health promotion efforts. The Guide is designed to be used by a variety of audiences, including: those who implement health promotion activities and want to ensure cultural and linguistic competence; community organizations, including faith-based organizations, that want to address health issues and public health officials and funders who want to assure that health promotion activities they support are culturally and linguistically competent.

DEFINITION OF TERMS

Health Promotion: "Health promotion represents a comprehensive social and political process. It not only embraces actions directed at strengthening the skills and capabilities of individuals, but action directed towards changing social, environmental, and economic conditions so as to alleviate their impact on public and individual health. Health promotion is the process of enabling people to increase control over the *detriments of health* and thereby improve their *health*" (World Health Organization, 1998).

Health Promotion Messages: Health promotion messages are the content delivered to an audience to have an impact on awareness, values, beliefs and attitudes and thus behaviors, as part of a health promotion effort. These messages may address risk reduction, community action, or support for those affected by a health issue to prevent secondary morbidity. For example, messages that provide bereavement support may prevent ongoing mental health problems.

Health Promotion Materials: Health promotion materials are defined, for the purpose of this document, as print or audio-visual formats used to deliver health promotion messages. Such materials may include, but are not limited to, pamphlets, brochures, web-based materials, CDs and DVDs, posters, flyers, newspaper ads or articles, other periodicals, videos, public service announcements, or television or radio coverage of a topic.

A Guide to Choosing and Adapting Culturally and Linguistically Competent Health Promotion Materials Continued

Steps for Choosing or Adapting Culturally and Linguistically Competent Health Promotion Materials

- □ Determine the need for the health promotion effort and materials to support it. The impetus for addressing a health issue in a particular community may come from individuals, government agencies, community service, advocacy, social or faith organizations, a local health crisis, or national health initiatives. Such promotion efforts can be effective when a community health problem exists that can be *mitigated by changing or affecting health beliefs and practices*. The initiator(s) should gather input from a broad array of community members to determine whether the health outcome is of concern and importance to those affected by it. Are they even aware that there is a problem? Do they have knowledge about the kinds of risk reduction actions that can be taken? Are there any other efforts under way in the community to address the health issue? Answering these questions will help the initiator(s) decide whether a new effort is needed to address the health outcome and what aspect the messages will address—raising awareness, addressing beliefs and attitudes, and/or promoting behavior changes.
- □ Identify and engage key community partners. Establishing a shared vision of the need for and the nature of a community health promotion activity is key to assuring cultural and linguistic competence and success. Community partners must be involved as part of the team from the very beginning in all decisions, including the decision about whether to address the health issue and how to develop the approach. Potential partners should reflect the diversity of the community, including members who are affected by the health issue to be addressed. Potential partners may include representatives from the following:
 - individuals/families affected by the health issue
 - elders in the community
 - leaders in the faith/spiritual community
 - politicians that represent the community
 - health care professionals and institutions that serve the community
 - community-based health and social service agencies
 - community-based service, advocacy or social organizations
 - local/ethnic media
 - community businesses

To assure active and substantive participation by all partners it is important to allow time to build trust among team members and to consider the following actions:

- provide opportunities for mutual education about the science of the health concern and about the community's history, strengths, resources and concerns
- utilize a variety of avenues for involvement that respect cultural differences in expression of opinions and in decision-making processes
- have a community member and a health professional or agency representative cochair the effort
- provide interpretation and translation services for participants with limited English proficiency or who need accommodations due to disability
- arrange for childcare and other supports and choose meeting times to allow for maximum participation by members of the community



A Guide to Choosing and Adapting Culturally and Linguistically Competent Health Promotion Materials Continued

□ Determine the focus and intended audience for the health promotion effort and the materials to support it. With the community partners, determine what culturally based beliefs, values and attitudes may be influencing the behaviors that affect the identified health concern. This information will help provide the focus for the messages and materials chosen. For example, if the intended audience believes that putting a baby to sleep on its back may lead to choking, then the focus of messages about back sleeping to reduce the risk of Sudden Infant Death Syndrome should address this belief. Make no assumptions—beliefs, values and attitudes are very local in nature. Generalizations about a particular racial, ethnic, or cultural group may misguide an organization choosing or adapting culturally and linguistically competent materials.

The team also needs to decide on the audience for the message and thus the materials. Consider cultural patterns related to lines of authority, caretaking roles, and health decisions. For example, health promotion messages related to infants and young children could be directed at multiple audiences—parents, grandparents, other relatives and siblings, childcare providers, and teachers, etc. Yet, the approach to each group may be different. If grandmothers are considered the authority on child-rearing practices, in a particular community, for example, they may be the desired audience. If most of the children in the community spend many hours in childcare, then that group may be the best audience. Community partners can help determine which audience will have the greatest impact on the problem.

- □ **Understand the intended audience.** To choose health messages and materials that will be effective with the intended audience, consider a variety of factors including the following: race, ethnicity, cultural identification, language preference, time lived in the community and in the United States (if immigrants or refugees), level of acculturation, age, gender, education and literacy and socioeconomic status. Work with the community team to understand how these factors affect the intended audience's beliefs, values, attitudes, practices. Determine dominant and trusted sources of information and preferred ways of receiving information. Work with community partners to understand culturally related motivations for changing behaviors. Individuals may be motivated by the following:
 - living longer,
 - improving health in their community,
 - having better health,
 - pleasing authority figures in the group,
 - being more economically successful, ٠
 - being better-liked or more popular, or
 - becoming assimilated.

Without this level of understanding of the intended audience, it is difficult to choose materials that are effective and culturally and linguistically competent. Materials that resonate with teens who are born in the United States and speak English fluently will be different than those that may be effective with their parents or older relatives who were born elsewhere and who may have limited English proficiency. If staying true to cultural beliefs and traditions is key, then messages and materials should provide this context for the information.

GUIDES, TIP SHEETS, AND CHECKLISTS

A Guide to Choosing and Adapting Culturally and Linguistically Competent Health Promotion Materials Continued

- □ **Determine the mode of delivery.** In order for health messages to be culturally competent and effective, great care must be taken in choosing the modes of delivering these messages. The team should first consider what methods are likely to be effective. Take into account the following factors:
 - Which individuals are seen as trusted sources of information about health practices and lifestyle by the intended audience (peers, elders, spiritual leaders, medical professionals, celebrities)?
 - What formats for receiving information are preferred—print materials, audio-visual presentations on local, ethnic or lifestyle media, including determining which are key outlets, word of mouth, etc.?
 - What is the preferred language for receiving the messages? Again, do not make assumptions; get input from community members. People who speak a language in addition to English may prefer some types of information in their first language and other types of information in English.
 - Consider adaptations to formats needed for individuals with disabilities such as large print, Braille, closed-captioning of television messages, etc.

The team should then consider its resources in the following areas:

- What funds are available or can be leveraged?
- What access does it have to media or other outlets for disseminating messages?
- Which outlets are available as a public service or a contribution by the media organization or another sponsor?
- What person-power and other resources are available in the community to support the delivery of the messages and materials?

Finally, the team should determine what other partners will be needed in delivering the chosen messages and materials.

- □ Create criteria for choosing health promotion materials. The team should next derive a set of criteria that can be used to choose materials based on the information developed in the previous step. The team should also prioritize these criteria, since finding materials that are a perfect fit may be difficult. With a prioritized set of criteria, the team can choose the most likely matches to their needs. Criteria should address each of the following areas:
 - Content of the message. What focus must be addressed? What beliefs, values and attitudes as well as cultural and spiritual traditions of the intended audience should be reflected?
 - Audience. For what audience should the existing materials have been developed? What are the key characteristics of the intended audience that must be considered?
 - Literacy levels/level of verbal vocabulary. What is required to reach the target audience?
 - Language. What language or languages are needed? Determine whether national or regional dialects are required for the intended audience.
 - Graphics/pictures/visual features. What types of pictures and symbols will resonate with the target audience and be seen as reflecting their culture?
 - Format. What types of format have been determined best for the intended audience—print materials, pictorial materials, videos, etc.?
 - Resource limitations. What, if any limits, does the team have on dollar and other resources?

B. Translated Materials

FAMILY FRIENDLY COMMUNICATION

A Guide to Choosing and Adapting Culturally and Linguistically Competent Health Promotion Materials Continued

- □ Gather and review existing materials. There are many possible sources for existing health promotion materials to address a wide array of health issues. The Resources section of this document provides some guidance on ways to search for those materials. Check also with local librarians, who can help identify available resources through the Internet or other approaches. When materials are identified, try to contact the developers to ascertain the following about each:
 - the characteristics of the population for which they were developed;
 - the credibility of the source of the medical information;
 - when they were developed;
 - whether the information is still current and accurate;
 - the cost to obtain or reproduce;
 - copyright issues or other restrictions on using the materials; and
 - their availability in electronic format that, with permission, could be customized for your use.

The team should then use the criteria to assess the materials. If the materials meet some, but not all the criteria, the team will then have to determine if the highest priority criteria have been met. If not, the team can then consider what might "fix" the existing materials and how much the changes will cost. Sometimes a simple insert can add information. If the materials are in an electronic format, changes can be made to customize the content or the graphics. Sometimes it may require combining more than one resource to address the community's needs. Input from the intended audience who are members of the team will be key in making these kinds of decisions.

- □ Elicit reactions from the intended audience. Informal feedback from key community partners is invaluable, but is also essential to obtain input from a larger group of the intended audience. This step can be time consuming, but it provides a "reality check" that can increase the likelihood of success and assures that the time spent choosing the materials and any expense toward their purchase or reproduction is not wasted. There are many formal ways to obtain feedback (see Resources section on general health promotion, p. 8), but they may be too resource intensive for some community efforts. In that case, develop a way to ask members of the intended audience the following questions about the materials:
 - what was the main idea?
 - was the information new to you?
 - do you think you will change your ideas or behaviors based on this information? (if yes, why; if no, why not)
 - what else should be included?
 - was it easy to read (if print material)?
 - was it easy to understand?
 - were images presented to you and respectful (if pictorial or video)?
 - could you easily understand the speakers (if audio/visual)?

If the materials are in a language other than English, it is important to ascertain whether the words and phrases used in the materials have the desired meanings for your intended audience.

A Guide to Choosing and Adapting Culturally and Linguistically Competent Health Promotion Materials Continued

- □ Develop and implement a plan for dissemination. The team should determine a plan that will most effectively bring the desired message to the intended audience. Where do they look for or receive important information? Use key community partners to help determine the approach. Dissemination points may include the following: local or minority newspapers or radio stations; local advertising circulars; faith-based organizations; recreation centers; grocery or convenience stores; childcare facilities; health clinics and doctors' offices; businesses in the community; social and service clubs; schools; hair and nail salons; bars/liquor stores, etc. In some communities, there may be traditional ways in which important topics are discussed. For example, in some Native American communities, a talking circle may be an effective dissemination strategy. Learn the best approach from the intended audience—do not assume that health messages are best disseminated in health care settings.
- □ Create a mechanism for periodic review and modification. A formal evaluation of a health promotion effort is very resource intensive. The team can, and should, however, continue to meet to gain input from the community partners about how the message is being received. This information may lead the team to add other messages and materials, to make changes to the ones chosen or to rethink the total approach. Culturally and linguistically competent approaches to promoting health must be reviewed and updated over time. Remember, the intended audience may change. First, demographics of the community may change. For example, if the ethnic, linguistic, and cultural make-up of the workforce in the community changes, so must materials chosen for childcare providers. Second, the attitudes, beliefs and values of the same groups and individuals in the community may change over time.

References

Cross, T., Bazron, B., Dennis, K., and Isaacs, M. *Towards a culturally competent system of care: Volume I.* (Washington, DC: Georgetown University Child Development Center, CASSP Technical Assistance Center, 1989).

U.S. Department of Health and Human Services. *Objectives for Improving Health. Healthy People 2010: Understanding and Improving Health.* 2nd ed. vol. 2. (Washington, DC: U.S. Government Printing Office, November 2000).

World Health Organization. Health Promotion Glossary. (Geneva: Author, 1998).

Excerpted from: Bronheim, S., & Sockalingam, S. (2003). *A guide to choosing and adapting culturally and linguistically competent health promotion materials.* Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child and Human Development. For full text go to http://gucchd.georgetown.edu/nccc

Examples of Family Friendly Translated Materials Related to Child Development and School Readiness

Some websites offer already translated resources that can serve as examples or that can be adapted to fit a specific audience or community. In addition, they represent national, public, private, and local sources that might help each community to consider where to turn to meet their needs for translation services. The example resources are included for their relevant content to early care, education, and school readiness and may need to be adapted to meet individual community needs.

Child Development/Health/Safety:

Healthy Start, Grow Smart

(2002) U.S. Department of Agriculture, U.S. Department of Education, and U.S. Department of Health, Washington, D.C.

This series was an initiative of Laura Bush as the First Lady of Texas and sponsored by the Texas Department of Health. President Bush and Mrs. Bush have asked that this series of booklets be revised and distributed by the three federal agencies noted above. The series focuses on child development month-by-month, from birth to 12 months and is available in English and Spanish. Full text available at www.ed.gov/parents/earlychild/ready/healthystart/index.html

How I Grow: Birth through Five: A Guidebook for Parents

(1997) SUNY-Albany, NY. The University of the State of New York, New York State Education Department Publications Sales Desk, Office of Vocational and Educational Services for Individuals with Disabilities, 89 Washington Ave., Albany, NY 12234 (518) 474-3806. (\$.75 each)

This guidebook for parents discusses developmental milestones for children ages birth to five and provides a timetable to record a child's developmental progress. Each age grouping includes anticipated child skills, things parents can do with their children, and age-appropriate safety tips. The text is available in English and Spanish with full text online at http://unix32.nysed.gov:9280/lsn/HowIGrow/intro.htm

Safety for Babies and Children (\$4.00) Accessing Health Care (\$4.00)

Growth and Development (\$5.00)

Anoka County Community Health and Environmental Services in partnership with Multi-Cultural Educational Services and Allina Health System. Available through Multi-Cultural Educational Services, 832 104th Lane NW, Coon Rapids, MN 55433, (763) 767-7786 or order through the website at www.mcedservices.com/index.html. Each of these booklets, as well as others not indicated here, include a complete English text with direct translations into other languages. Depending on the specific booklet, languages could include Bosnian, Russian, Spanish, Nuer, Hmong, Lao, Vietnamese, Arabic, and Somali. Some booklets include three languages with the English text. For more information got to the website noted above.

Continued

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Examples of Family Friendly Translated Materials Continued

Education and School Readiness:

A Guide to Your Children's Schools: A Parent Handbook

Adult Learning Resource Center in partnership with the Illinois Department of Human Services/Bureau of Refugee and Immigrant Services and the Illinois State Board of Education, Des Plaines, IL.

This handbook is intended to give parents important information about the school system in the United States and the state of Illinois. It offers general information including basics about how the schools are organized, how to enroll, the school calendar and daily schedule, transportation, school procedures, who works at the school, instructional programs, the parents role in their child's education and learning, and adult education. This guide is available in English, Arabic, Bosnian, Russian, Spanish, and Vietnamese. Full text available at www.isbe.net/bilingual/htmls/Resources1.htm

Helping Your Child Series

(2002) U.S. Department of Education, Washington, DC.

This publication series aims to provide parents with the tools and information necessary to help their children succeed in school and life. These booklets feature practical lessons and activities to help their school aged and preschool children master reading, understand the value of homework and develop the skills necessary to achieve and grow. All six publications are available in English and Spanish. Full text available at www.ed.gov/parents/academic/help/hyc.html

Working With Your Child's School

(1998) University of Minnesota Extension Service, University of Minnesota, MN (612) 624-2200).

This information brief, written in bilingual format (side-by-side English with Spanish, Hmong, and Somali) gives tips on how parents can be involved in their child's school including steps to get to know the teacher, attend school functions, volunteer, and honor the child's work and school success. Full text available at

www.extension.umn.edu/info-u. Full text available at www.extension.umn.edu/info-u/ and search by language—English, Cambodian, Hmong, Laotian, and Vietnamese.

Early Intervention, Special Education, and Disabilities:

Beginning with Families: A Parent's Guide to Early Intervention

Parent Educational Advocacy Training Center (PEATC), Springfield, VA 703-923-0010 or e-mail at partners@peatc.org. (\$5.00 each)

This booklet contains practical advice about how a family can plan services for their child and themselves. It explains early intervention and the Individualized Family Service Plan. It includes charts and forms that help families keep track of information and important telephone numbers. It is available in English, Spanish, Korean, Vietnamese and Farsi.

Continued

Examples of Family Friendly Translated Materials Continued

FAMILY FRIENDLY COMMUNICATION

Building a Strong Family: A Handbook for Hispanic/Latino Parents (Spanish, \$8.00)

Building a Strong Family: A Handbook for Hmong Parents (Hmong, \$8.00)

Do the Smart Thing: Ask Important Questions (African American, Hmong) (Free)

Do the Smart Thing: Exercise Your

Rights (African American, Hmong, or Lao) (Free)

Parent Advocacy Coalition for Education Rights (PACER Center), Minneapolis, MN (952) 838-0190 or order at www.pacer.org/publications/multicultural.htm.

The mission of the PACER Center is to expand opportunities and enhance the quality of life of children and young adults with disabilities and their families. These and other resources offer information, guidance, and support to families.

Family/Educator Guide

(2002) Office of Superintendent of Public Instruction, Olympia, WA This publication incorporates the state and federal regulations relevant to special education services and describes various aspects of special education services and resources within the state of Washington. The publication is intended to support and guide family/educator partnerships to help implement an education plan that ensures that every student (preschool through young adulthood) who has a disability and needs specially designed instruction qualifies and receives special education. The text is available in English, Korean, Spanish, Vietnamese, Cambodian, and Russian. Full text available at www.k12.wa.us/SpecialEd/publications.aspx

Welcome to Parenthood: A Family Guide (\$1.00)

Child Health: Early Help Makes a Difference (\$.75)

New York State Department of Health, Health Education Services P.O. 7126, Albany NY 12224 (518) 439-7286 and online at www.hes.org.

Welcome to Parenthood: A Family Guide is a booklet for new parents that offers encouragement, advice, and suggestions about health care and is available in Spanish and English. Early Help Makes a Difference is a colorful brochure written as a developmental checklist from ages 3 months to 3 years with advice on where to go for help. This brochure is available in 18 languages. Both are free within the state of New York and available for sale to others outside of the state. A catalog of other resources is available.

ANNOTATED RESOURCES

ON-LINE RESOURCES

A Guide to Choosing and Adapting Culturally and Linguistically Competent Health Promotion Materials

(2003) BRONHEIM, S., AND SOCKALINGHAM, S. This guide aims to assist community groups in making appropriate choices among existing health materials as well as provide recommendations to adapt such materials so that they are culturally and linguistically appropriate for a specific community. The guide provides definitions, values, guiding principles, steps for choosing or adapting materials, and resources. Full text available at http://gucchd.georgetown.edu/nccc *National Center for Cultural Competence, Georgetown University Center for Child and Human Development*

Clear and Simple: Developing Effective Print Materials for Low-Literate Readers

(1994) NATIONAL INSTITUTES OF HEALTH, NATIONAL CANCER INSTITUTE, WASHINGTON, DC. A workgroup composed of Government communicators from diverse Department of Health and Human Services' agencies met to design these guidelines to assist writers in communicating effectively to low-literate audiences. They outline a process for developing publications for people with limited-literacy skills, and making the materials accessible to most audiences. Starting with accessible text in English can assist in making translated materials accessible as well. Full text available at http://cancer.gov/cancerinformation/ clearandsimple

Developing Materials: Getting Translations

(2003) HEALTH EDUCATOR'S TOOLBOX AT THE HEALTH EDUCATION RESOURCE EXCHANGE. WASHINGTON STATE DEPARTMENT OF HEALTH, OFFICE OF HEALTH PROMOTION, OLYMPIA, WA. This four-page guide for communities and service health providers and educators lays out steps and suggestions for getting translations done accurately and efficiently with community involvement. It includes a contact list of private, Washington State Department of Health certified translation services. Full text available at www.doh.wa.gov/here/howto/ toolbox.asp

Policy Brief 2: Linguistic Competence in Primary Health Care Delivery Systems: Implications for Policy Makers

 $\left(2001\right)$ Goode, T., Sockalingam, S., Brown, M., and Jones, W.

This policy brief includes guidance and a checklist to facilitate the development of linguistic competence within primary health care organizations useful to planning groups, administrators, and policy makers. Full text available at http://gucchd.georgetown.edu/nccc National Center for Cultural Competence, Georgetown University Center for Child and Human Development

Review Guidelines for Material Selection: Translated Materials

(2001) CULTURALLY AND LINGUISTICALLY APPROPRIATE SERVICES EARLY CHILDHOOD RESEARCH INSTITUTE, UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN, CHAMPAIGN, IL. These guidelines are intended to help service providers and individuals involved in personnel preparation determine the congruence between the beliefs, values, and practices of the individuals in their community and current recommended practices related to early childhood/special education/ and cultural and linguistic competence. The content is specific to translated materials and can be adapted to meet local needs. Full text available at www.clas.uiuc.edu/review/index.html

Selecting Culturally and Linguistically Appropriate Materials: Suggestions for Service Providers

(1999) SANTOS, R. M., AND REESE, D. This brief article, appropriate for early care and education providers as well as others who serve young children and their families, discusses the need for culturally and linguistically appropriate materials for families with young children, the challenges of finding and choosing materials, and what to look for when assessing the appropriateness of particular materials. Full text available at http://ecap.crc.uiuc.edu/ eecearchive/digests/1999/santos99.html ERIC Digest, *ERIC Clearinghouse on Elementary*

and Early Childhood Education, University of Illinois, Campaign, IL.

B. Translated Materials

WEBSITES

Alta Vista's Babel Fish Translation http://world.altavista.com

There are many free, on-line translation services with multi-lingual capacity for translating limited amounts of text from one language to another. This particular on-line translation tool was most frequently included as a link to specific cultural and linguistic sites. While this tool may provide useful and allow for economic translation of text, caution must be exercised in understanding the limitations of this tool. Direct electronic translation may not capture the nuances and dialectic details of any given language. Consider using this tool with additional 'read and review' strategies by a native speaking professional or volunteer. For a list of additional on-line translation tools go to Free Online Translation Services at www.word2.com/freead.html

Centers for Disease Control (CDC) in Spanish/CDC en Español

www.cdc.gov/spanish/bebe.htm

This website hosted by the Centers for Disease Control offers healthy prevention, promotion, and resources in Spanish. Specific information is also available for infants and children.

EthnoMed

http://ethnomed.org

This website from Harborview Medical Center in Seattle, WA offers information about cultural beliefs, medical issues and other related issues pertinent to the health care of recent immigrants to Seattle or the U.S. In addition to culture specific information pages, there are links to patient education materials and tips on "how-to" access culture-specific health materials.

Knowledge Path: Spanish-Language Health Resources of the Maternal and Child Health Library

www.mchlibrary.info/KnowledgePaths/ kp_spanish.html

This web page links to Spanish-language health resources for health professionals and consumers. While most of the resources cover a wide range of health topics, there is a selection in each section that focuses on topics of interest to families and professionals in the maternal and child health community.

The 24 Languages Project

http://medstat.med.utab.edu/library/refdesk/ 24lang.html

This site offers electronic access to over 200 health education brochures in 24 different languages. The project, managed by the University of Utah Health Sciences Center, is in partnership with the Utah Department of Health's Bureau of Primary Care, Rural and Ethnic Health to improve access to health materials in multiple languages.

The Office of Minority Health Resource Center

www.ombrc.gov/ombrc/publications/publications4.htm This site lists organizations and programs that provide minority health materials. The links are primarily to national or government agencies and organizations.

WorldLanguage.com

www.worldlanguage.com/Products Translation software utilities are available on the market in several formats and multiple languages. This website is one place to explore the availability of a high-tech approach to translating materials. Of course, it is also possible to shop for these items through software companies and some office supply stores. Including this resource is simply a way of offering ideas on ways that programs or service providers might build their own resources for translating materials. It does not represent an endorsement of this site or any particular software product.

Training: Provider and Personnel Preparation

OVERVIEW OF THE ISSUE

Understanding, appreciating, and adapting to the cultural and linguistic diversity of young children and their families are important skills for those who serve them and help them get ready for school. The relationship-based work with young children and families requires sensitive, reflective, and individualized care that is most likely to occur when these skills are in place. To emphasize these competencies, the National Association for the Education of Young Children (NAEYC) made two specific recommendations in their 1995 position paper, *Responding to Linguistic and Cultural Diversity—Recommendations for Effective Early Childhood Education*. These are:

- 1. Provide early childhood educators with preparation in the areas of culture, language and diversity so that they may
 - Understand and appreciate their own cultural and linguistic background;
 - Reflect on how their cultural background affects how they interact with children and families; and
 - Understand the languages and cultural background of the children and families they serve.
- 2. Recruit and support early childhood educators who are multilingual and multicultural and have an understanding of the sociocultural and economic issues relevant to diverse communities.

These recommendations are echoed in other practice guidelines in the health, education, and social services arenas in the effort toward cultural and linguistic competence across all systems that serve young children and their families (Center for Substance Abuse and Prevention, 2000; Division of Early Childhood, 2002; Head Start Bureau, 1992; and Office of Minority Health, 2001—see Annotated Resources in Section II: Planning and Implementation).

In a review of the literature by Hains, Lynch, and Winton (2000) they discuss the definitions and key terms used in preparing personnel for working with diverse populations, examine the literature across disciplines and within the fields of early childhood and early intervention/special education, and summarize key points and suggest future directions for the field. They describe two models and strategies for addressing cultural and linguistic competence listed below.

- Stage-Based Models, which involve a continuum through which individuals can progress and improve their skills in an on-going process
- Competency-Based Models, which call for systemic as well as a personal and programmatic change supported by cognitive or behavioral measures

Both models emphasize the need for personnel to understand the concept of culture and the dynamic interaction of culture between providers and families. Their framework for learning focuses on

- Self awareness and the understanding of one's own, personal cultural history;
- Developing knowledge of other cultures and ways to seek information; and
- Understanding how to individualize services within a family's own cultural context.

Ultimately, the recommendations point toward integration of cultural and linguistic diversity preparation at all levels for those individuals and systems that work with young children and families. In addition, they recommend that personnel preparation through training utilize staff development practices that incorporate five assumptions about adult learners. These assumptions first described by Malcolm S. Knowles, a leading educational theorist and adult educator, are reviewed by Margolis and Bell (1986) and listed below.

- Adults are motivated to learn.
- Adult orientation to learning is centered around life or work.
- Experience is the richest resource for adult learning.
- Adults have a deep need to be self-directed.
- Individual differences among adult learners increase with age and experience.

With these in mind, Hains et al. make the following key points:

- Use both a "top-down" and "bottom-up" approach. Strategies for enhancing individual competence must take place in concert with efforts to modify institutions and programs.
- Build collegial support. Pairing colleagues for mutual sharing and growth, such as coaching and mentoring, helps to support continued learning and implementation of new skills.
- Establish a common vision shared across all stakeholders and build steps in learning and skill development that will support that vision.
- Engage participants in experiential activities. Active learning, based on adult learning theory, is most effective in changing practices.
- Include procedures for ongoing support, feedback, and monitoring to encourage continuous improvement.

Critical Questions for Communities



- What are the cultural and linguistic competencies for providers and organizations?
- Who is the audience and what is their level of knowledge?
- What is the goal of the personnel preparation?
- What essential content of the training will support cultural and linguistic competence?
- How does one review training materials to be sure they support cultural and linguistic competence and meet the training goal?
- How can personnel preparation be supported over time after the training?
- How does one measure the impact of training?

Key Strategies for Families, Providers, and Administrators

What families can do:

- Be a resource for guiding the important cultural messages that must be conveyed in any training activity relevant to their culture.
- Assist in planning and designing training so that it is relevant to families who may participate.
- Participate as co-trainer's to share cultural perspective and bring the learning experience to life.

What providers can do:

- Complete a self-assessment to determine one's knowledge, skill, and practice level.
- Seek and participate in personnel preparation and training opportunities.
- Be active learners in training and share personal experiences and insights.

• Practice new skills and pursue additional ways to learn about diverse communities and individual children and families.

What administrators can do:

- Support and offer training opportunities as pre-service, in-service, or conference.
- Partner with community agencies to share training costs and opportunities.
- Encourage "cross-training" to link community services in a common effort toward cultural and linguistic competence.
- Consider follow-up staff support, facilitation or technical assistance to reinforce learning.

PROMISING PRACTICE

Broward County, Florida

Child Find, Early Intervention and culturally/linguistically competent staff, services, and materials.

COMMUNITIES CAN! COMMUNITIES OF EXCELLENCE, 2000

Broward County, with a population of more than 1.5 million, includes thirty cities located at the center of an urban megalopolis along the southeast Florida coast. One-quarter of Broward's residents are now foreign born; more than two-thirds of these immigrants are from Latin America; and more than 225,000 foreign citizens are included in this culturally diverse population. As one of the fastest growing counties in the nation, Broward's residents are from 189 countries and speak 80 different languages. In the past decade, the school-aged population grew by 58%; more than 17% of Broward's population is aged 5—17 years. The school-aged population has a higher proportion of Black and Hispanic persons than the population as a whole.

Child Find is the single point of entry for children suspected as having a developmental delay. The Early Intervention Program within the Children's Diagnostic & Treatment Center, Inc. (CDTC) provides children with chronic illnesses and disabilities access to high quality social services, medical care, educational interventions and emergency assistance within a medical home environment. For more than twenty years, greater than 70% of CDTC's clients have been ethnically and culturally diverse, predominately economically disadvantaged, minorities.

CDTC is committed to providing culturally and linguistically competent health care services. This is accomplished, in part, by providing a diverse client base with a similarly diverse professional and paraprofessional staff of health care providers. Because cultural differences between providers and patients affect the provider/patient relationship, CDTC has implemented strategies to recruit, train, retain and promote staff, at all levels of the organization, representative of the demographic characteristics of its clients and to engage consumers in planning services. Materials and referral information are available in English, Spanish and Creole and the Center employs many multi-lingual staff. The availability of linguistically competent materials makes services more understandable and accessible for the great diversity of families who reside throughout the County. For more information, contact Ellen Schrot (954)-728-1090 or ESchrot@NBHD.org

Promoting Cultural and Linguistic Competency Self-Assessment Checklist for Personnel Providing Primary Health Care Services

This checklist is intended to heighten the awareness and sensitivity of personnel to the importance of cultural diversity, cultural competence and linguistic competence in early intervention and early childhood settings. It provides concrete examples of the kinds of beliefs, attitudes, values, and practices which foster cultural and linguistic competence at the individual practitioner level.

Directions: Please select A, B, or C for each item listed below.

- A = Things I do frequently
- B = Things I do occasionally
- C = Things I do rarely or never

Physical Environment, Materials and Resources

- I display pictures, posters, artwork and other décor that reflect the cultures and ethnic backgrounds of clients served by my program or agency.
- I ensure that magazines, brochures, and other printed materials in reception areas are of interest to and reflect the different cultures of individuals and families served by my program or agency.
- When using videos, films or other media resources for health education, treatment or other interventions, I ensure that they reflect the cultures and ethnic background of individuals and families served by my program or agency.
- I ensure that printed information disseminated by my agency or program takes into account the average literacy levels of individuals and families receiving services.

Communication Styles

When interacting with individuals and families who have limited English proficiency I always keep in mind that:

- _____ limitations in English proficiency is in no way a reflection of their level of intellectual functioning.
- their limited ability to speak the language of the dominant culture has no bearing on their ability to communicate effectively in their language of origin.
 - _____ they may or may not be literate in their language of origin or English.
- I use bilingual-bicultural staff and/or personnel and volunteers skilled or certified in the provision of medical interpretation during treatment, interventions, meetings or other events for individuals and families who need or prefer this level of assistance.
- For individuals and families who speak languages or dialects other than English, I attempt to learn and use key words in their language so that I am better able to communicate with them during assessment, treatment or other interventions.

Promoting Cultural and Linguistic Competency Self-Assessment Checklist Continued

- I attempt to determine any familial colloquialisms used by individuals or families that may impact on assessment, treatment or other interventions.
- When possible, I ensure that all notices and communiqués to individuals and families are written in their language of origin.
- I understand that it may be necessary to use alternatives to written communications for some individuals and families, as word of mouth may be a preferred method of receiving information.

Values and Attitudes

- I avoid imposing values which may conflict or be inconsistent with those of cultures or ethnic groups other than my own.
- _____ I screen books, movies, and other media resources for negative cultural, ethnic, or racial stereotypes before sharing them with individuals and families served by my program or agency.
- I intervene in an appropriate manner when I observe other staff or clients within my program or agency engaging in behaviors which show cultural insensitivity, racial biases and prejudice.
- I recognize and accept that individuals from culturally diverse backgrounds may desire varying degrees of acculturation into the dominant culture.
- ____ I understand and accept that family is defined differently by different cultures (e.g., extended family members, fictive kin, godparents).
- _____ I accept and respect that male-female roles may vary significantly among different cultures and ethic groups (e.g., who makes major decisions for the family).
- I understand that age and life cycle factors must be considered in interactions with individuals and families (e.g., high value placed on the decision of elders, the role of eldest male or female in families, or roles and expectation of children within the family).
- Even though my professional or moral viewpoints may differ, I accept individuals and families as the ultimate decision makers for services and supports impacting their lives.
- ____ I recognize that the meaning or value of medical treatment and health education may vary greatly among cultures.
- I accept that religion and other beliefs may influence how individuals and families respond to illnesses, disease, and death.
- I understand that the perception of health, wellness and preventive health services have different meanings to different cultural or ethnic groups.

Promoting Cultural and Linguistic Competency Self-Assessment Checklist Continued

- I recognize and accept that folk and religious beliefs may influence an individual's or family's reaction and approach to a child born with a disability, or later diagnosed with a disability, genetic disorder, or special health care needs.
- _____ I understand that grief and bereavement are influenced by culture.
- I seek information from individuals, families or other key community informants that will assist in service adaptation to respond to the needs and preferences of culturally and ethnically diverse groups served by my program or agency.
- _____ Before visiting or providing services in the home setting, I seek information on acceptable behaviors, courtesies, customs, and expectations that are unique to the culturally and ethnically diverse groups served by my program or agency.
- I keep abreast of the major health concerns and issues for ethnically and racially diverse client populations residing in the geographic locale served by my program or agency.
- I am aware of the socio-economic and environmental risk factors that contribute to health disparities and/or major health problems of culturally, ethnically and racially diverse populations served by my program or agency.
- I am well versed in the most current and proven practices, treatments and interventions for major health problems among ethnically and racially diverse groups within the geographic locale served by my agency or program.
- I avail myself to professional development and training to enhance my knowledge and skills in the provision of services and supports to culturally, ethnically, racially and linguistically diverse groups.
- I advocate for the review of my program's or agency's mission statement, goals, policies, and procedures to ensure that they incorporate principles and practices that promote cultural and linguistic competence.

There is no answer key with correct responses. However, if you frequently responded "C", you may not necessarily demonstrate practices that promote a culturally diverse and culturally competent learning environment for children and families within your classroom, program or agency.

Tawara D. Goode, Georgetown University Center for Child and Human Development—Adapted from Promoting Cultural and Linguistic Competence and Cultural Diversity in Early Intervention and Early Childhood Settings and Promoting Cultural Competence and Cultural Diversity for Personnel Providing Services and Supports to Children with Special Health Care Needs and their Families—(June,1989; revised 1993; revised 1996; 1997; 1999; 2000; and 2002). Full text available at http://gucchd.georgetown.edu/nccc. **PROVIDER & PERSONNEL PREPARATION**

A Planner's Guide...Infusing Principles, Content and Themes Related to Cultural and Linguistic Competence into Meetings and Conferences

This planner's guide was developed by the National Center for Cultural Competence (NCCC). It is designed to assist meeting and conference planners infuse principles, content and themes related to cultural and linguistic competence. The Health Resources and Services Administrations (HRSA) has embarked on a national campaign with a goal of attaining "one hundred percent access and zero disparities" among the nation's most vulnerable populations. As health care systems strive to achieve this goal, there is a need for ongoing education and skill building that will enable policy makers, administrators and providers to effectively utilize cultural and linguistic competence as a key tool. This planner's guide is a collaborative effort of HRSA's Bureau of Primary Health Care and Maternal and Child Health Bureau.

The guide also reflects one of the NCCC's principle values—that learning occurs in many different ways and in many different settings. Each individual places value on and has preferences for how he or she receives, processes and uses information. Meeting and conference planners can ensure greater participant engagement by:

- integrating innovative approaches which honor diverse opportunities for learning and information exchange, and
- highlighting the cultural heritage and traditions of a venue or geographic area.

The incorporation of these strategies demonstrates to meeting and conference participants that their diverse interests and needs are valued and respected.

Cultural and linguistic competence is often compartmentalized as meeting and conference planners may not see its relevance for a given health care topic. No matter what the overall topic or goal, principles of cultural and linguistic competence can be infused throughout all sessions. This guide is designed to help planners effectively convey a message, meet the interests and learning needs of the proposed audience, and integrate principles, content and themes related to cultural and linguistic competence in meetings and conferences.

Planning the Content

- □ Convene a planning committee whose membership represents diverse perspectives and backgrounds from the organization planning the meeting, the intended audience, and especially consumers and families.
- □ Determine if the sponsoring organization endorses a definition or philosophy on cultural competency. If not, the planning committee should decide on a definition of cultural competence that will be used for the meeting or conference. This should be shared in advance with presenters and in the conference materials for participants. (See Resource Section/Topic Area—Definitions and Underlying Principles).

A Planner's Guide... Continued

- □ Identify the intended audience for the meeting or conference and gauge their level of knowledge and skills related to cultural or linguistic competence. Considerations may include:
 - how cultural and linguistic competence relates to the roles of the audience members (e.g., policy makers, administrators, service providers, researchers, academicians, consumers and family members and advocates).
 - the educational and literacy levels of the audience.
 - the ways in which the culture of audience members may influence their preference for participation in various meeting formats (e.g., listening v. speaking; formal v. informal; and culturally defined age and gender roles which may dictate appropriate spokespeople for specific groups and communities).
- □ Determine the goal(s) for infusing culturally or linguistically competent content into meetings and conferences, which may include:
 - raising awareness of cultural and linguistic competence.
 - increasing understanding and knowledge of cultural and linguistic competence related to the delivery of health care services.
 - developing skill sets that apply knowledge of cultural and linguistic competence to health disparities, health care access and utilization, consumer and provider satisfaction and participatory research methodologies.
- □ Determine strategies for integrating principles, content and themes related to cultural or linguistic competence that may include:
 - plenary sessions that can raise the awareness of the entire meeting or conference audience.
 - individual sessions, panel presentations, interest groups and round table discussions to increase knowledge and understanding of meeting or conference participants.
 - formats that allow for extensive time frames to develop skills sets including premeeting or conference workshops, special meeting or conference tracks, or entire meetings or conferences.
- □ Plan meeting or conference activities that promote peer technical assistance, self-directed and interactive learning experiences, and opportunities for casual exchange. This strategy can be utilized effectively within a cultural context. (See Example in Text Box on page 4.)
- □ Choose speakers with expertise in the particular topic to be addressed who are culturally and ethnically diverse. Consumers and family members bring unique perspectives and expertise and can fulfill essential roles as speakers in meeting and conferences.
- □ Develop guidelines for speakers that assist them in addressing issues of culture within the content and context of their presentation, which may include:
 - providing the definition of cultural competence to be used for the meeting. Speakers who use a different definition should explicitly say so during their presentation.
 - requesting that speakers consider how culture relates to their topic.
 - requesting speakers who use case studies, scenarios and vignettes to provide examples that reflect diverse cultural perspectives.

A Planner's Guide... Continued

- insuring that graphics and pictures used in handouts, visual aids and displays reflect culturally and ethnically diverse groups.
- providing guidance to speakers on language and literacy levels that are appropriate for the audience.
- requesting that statistics, demographic data or trends presented include information about racially, ethnically and linguistically diverse groups when appropriate. (See Resource Section/Topic Area—Data and Demographics).

Planning the Logistics

- □ Select dates and times for meetings that do not conflict with cultural or religious holidays and events.
- □ Select meeting or conference facilities that are accessible. Ask participants for individual accessibility needs that will insure their full participation in meetings or conferences. This may include but is not limited to: the use of personal assistants, special dietary requirements or preferences, sign-language interpretation services or listening devices, closed caption, large print or Braille materials, transportation assistance and child or dependent care.
- □ Consider the economic impact of attending meetings or conferences for some participants. Scholarships or stipends may need to be provided to cover lost wages or to purchase meals. Direct billing for transportation and lodging can minimize out-of-pocket expenses. Conference fees may need to be waived for some participants.
- □ Insure that resources are allocated for the translation of all conference-related materials based on the needs of the audience. Speakers will need to submit their materials in time for translation. Set deadlines accordingly.
- □ Insure that resources are dedicated to the provision of interpretation services based on the needs of participants. The following examples are provided.
 - Consider fiscal and logistical issues related to the following: individual, small or large group interpretation, simultaneous or consecutive interpretation, simultaneous isolation booths and wireless head sets, or separate sessions presented in languages other than English.
 - Room size and seating arrangement need to be carefully planned. Announce at the beginning of the session that interpretation services are being provided so that speakers and participants are not distracted and annoyed by what they perceive as sideline conversations.
 - Provide instructions or briefings to speakers when simultaneous or consecutive interpretation services are utilized in their sessions (e.g., pacing of speech and articulating clearly).
 - Plan and allow for sufficient time for presentations that are interpreted.

GUIDES, TIP SHEETS, AND CHECKLISTS

A Planner's Guide... Continued

- □ Determine the extent to which participants will require the use of a cultural brokerinterpreter in order to participate fully in the meeting or conference. Cultural brokers help participants to understand meeting or conference dynamics such as terminology, process, roles and responsibilities.
- □ Consider the influence on the overall meeting or conference climate of the site selection, decor, menu and entertainment.

Continued

EVALUATION QUESTIONS

The NCCC has used an array of evaluation questions for meetings, conferences and workshops. The following are examples of questions that use open-ended and Likert formats.

These questions lend themselves to a Likert format.

How did we do?

- the quality of foreign interpretation services
- the usefulness of printed materials (including literacy and translation)
- the content considered culturally and ethnically diverse perspectives
- depictions of diverse racial, ethnic and cultural groups were accurate and free of stereotypes
- an atmosphere of trust and respect was established that encouraged participants to openly express their views
- extent to which accommodations and supports promoted full meeting or conference participation (e.g., supports such as scholarships, stipends, pre-paid transportation and hotel expenses, child or dependent care, or specific disability related accommodations)

These open-ended questions have been well received by audiences and provided insight for future training and technical assistance activities.

I gained knowledge about....

I think what I will remember most was....

The information presented was useful to me in my position because....

The information presented was easy to understand because.... or was difficult to understand because....

I am still confused about....

My attitude has changed about....

I can benefit from additional training at the basic, intermediate or advanced level because....

A Planner's Guide... Continued

- Plan multiple strategies to evaluate the degree to which the meeting or conference infused principles, content and themes related to cultural and linguistic competence. This may include using:
 - bulletin boards, easels and post-it notes
 - small group debriefing of participants
 - daily debriefing of conference speakers when feasible
 - formal and informal evaluations
 - follow-up surveys and evaluations via telephone, correspondence or e-mail

□ Consider using evaluation forms that record staff position, discipline and agency or community affiliation. Data and results can be grouped and analyzed to identify:

- response trends among different segments of the audience
- specific training needs for policy makers, administrators, service providers and consumers
- participants who require basic, intermediate or advanced level training (See Textbox below)

Goode, T., Sockalingam, S., Bronheim, S., Brown, M., & Jones, W. (2000). Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child and Human Development. Full text available at http://gucchd.georgetown.edu/nccc

ANNOTATED RESOURCES

BOOKS AND PRINT

A Place to Begin

(1999) Pulido-Tobiassen, D., and Gonzalez-Mena, J.

This resource binder offers rich information, anecdotes, exercises and tools, and handouts for parents and staff that can assist child care providers health professionals, social services staff, and parents to become more reflective and sensitive to the impact of culture on caring for young children. These materials can be used for parent and staff development and handouts can be available in English, Spanish, Vietnamese, and Chinese.

California Tomorrow, 1904 Franklin Street, Suite 300, Oakland, CA 94612, (510) 496-0220 or online at www.californiatomorrow.org. (\$24.00)

Looking In, Looking Out—Redefining Child Care and Early Education in a Diverse Society

(1996) Chang, H., Muckelroy, A., and Pulido-Tobiassen, D.

This book explores the role childcare plays in supporting the well-being of young children and families of diverse racial, cultural, and linguistic backgrounds. It offers principles and strategies that every program can implement. Although not a training curriculum for provider and personal preparation, the text raises and addresses childcare workforce, staffing, and program implementation issues that have implications and offer guidance for this type of preparation.

California Tomorrow, 1904 Franklin Street, Suite 300, Oakland, CA 94612, (510) 496-0220 or online at www.californiatomorrow.org. (\$26.95)

Transforming Curriculum, Empowering Faculty: Deepening Teachers' Understanding of Race, Class, Culture, and Language

(1999) CHANG, H., OLSEN EDWARDS, J., ALVARADO, C., PULIDO-TOBIASSEN, D. WITH LOPEZ MORGAN, C. This book describes an innovative professional development effort known as the "Early Childhood Curriculum Leadership Institute: A Focus on Race, Class, Culture, and Language." As a resource, it offers an in-depth understanding of what it takes to engage college faculty and early childhood teachers to effectively educate their diverse students. In addition to insights into the impact of changing demographics and cultural and linguistic diversity on community colleges and early childhood education, the text describes guiding principles for effective training about equity and diversity, strategies for implementing these principles, and ways to replicate this professional development exercise in other communities.

California Tomorrow, 1904 Franklin Street, Suite 300, Oakland, CA 94612, (510) 496-0220 or online at www.californiatomorrow.org.(\$15.95)

Understanding and Negotiating Cultural Differences Concerning Early Developmental Competence: The Six Raisin Solution

(1999 Dec./2000 Jan.) Carlson, V. J., and Harwood, R. L.

This article within the full issue of the Bulletin of ZERO TO THREE describes a staff development model designed to help practitioners who work with infants, young children and their families to build more collaborative and effective crosscultural relationships.

Bulletin of ZERO TO THREE, 3. ZERO TO THREE, National Center for Infants, Toddlers, and Families, 2000 M Street, NW, Suite 200, Washington, DC 20035-3307, (202) 638-1144. Customer Service: 1-800-899-4301 or order online at www.zerotothree.org. (\$10.00 for issue)

ON-LINE RESOURCES

A Planner's Guide...Infusing Principles, Content and Themes Related to Cultural and Linguistic Competence into Meetings and Conferences.

GOODE T., SOCKALINGHAM, S., BRONHEIM, S., BROWN, M. AND JONES, W.

This guide is designed to assist meeting and conference planners infuse principles, content and themes related to cultural and linguistic competence. It offers definitions, principles, checklists for planning content and logistics,

evaluation questions, and resources for more information. Full text available at

http://gucchd.georgetown.edu/nccc

National Center for Cultural Competence, Georgetown University Child Development Center

CLAS Technical Report #3: Moving Towards Cross-Cultural Competence in Lifelong Personnel Development: A Review of the Literature

(2000) HAINS, A., LYNCH, E., AND WINTON, P. This technical report examines the extent to which the effective practices, identified by the Division for Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC), are represented in the delivery of early intervention services to families and young children (from birth to age 5) who come from diverse cultural and linguistic groups. This report includes a review of the literature, annotated bibliography, and a list of available resources from the CLAS Website most relevant to cross-cultural competence and personnel development at the program and higher education levels. Full text available at http://clas.uiuc.edu/techreport/tech3.html Culturally and Linguistically Appropriate Services Early Childhood Research Institute, University of Illinois at Urbana-Champaign, Champaign, IL.

Cultural Competence Self-Assessment Questionnaire: A Manual for Users (1995) MASON, J. L.

Although designed for use in child and adolescent mental health systems, this instrument has been applied in other human services disciplines to identify the organization's cultural competence training needs. Using two versions of the questionnaire—one for direct service providers and the other for administrative staff—organizations can identify training needs in the areas of (a) improving service delivery to culturally diverse populations; (b) identifying cross-cultural strengths within the organization, system or network of professionals; and (c) focusing on training topics for providers of services. Full text available at www.rtc.pdx.edu/PDF/ pbCultCompSelfAssessQuest.pdf

Research and Training Center on Family Support and Children's Mental Health, Portland State University, Portland, OR.

Promoting Cultural & Linguistic Competence: Self-Assessment Checklist for Personnel Providing Services and Supports in Early Intervention and Early Childhood Settings (2002) GOODE, T. This checklist is intended to heighten the awareness and sensitivity of personnel to the importance of cultural and linguistic competence in health and human service settings. There are several checklists focused on specific types of service providers including the one for early interventionists and early childhood providers. Full text available at http://gucchd.georgetown.edu/nccc National Center for Cultural Competence, Georgetown University Center for Child and Human Development

Review Guidelines for Material Selection: Personnel Preparation

(2001) Culturally and Linguistically Appropriate Services Early Childhood Research Institute, University of Illinois at Urbana-Champaign, Champaign, IL

These guidelines are intended to help service providers and individuals involved in personnel preparation determine the congruence between the beliefs, values, and practices of the individuals in their community and current recommended practices related to early childhood, special education, and cultural and linguistic competence. The content is specific to personnel preparation and can be adapted to meet local needs. Full text available at www.clas.uiuc.edu/review/index.html

Walking the Walk: A Guide to Diversity Resources for Trainers

(2001) Catlett, C., Winton, P., Parrish, R., and White, C.

This booklet is an annotated listing of high quality resources including videotapes, books, curricula, and other materials that can be used to assist in growing a more diverse and better prepared workforce to serve infants, toddlers, children and families who represent culturally and linguistically diverse communities. All items have been reviewed to be sure that they are culturally and linguistically sensitive and to the extent possible, free from bias or prejudice. Can be ordered or full text available at www.fpg.unc.edu/~walkingthewalk/pdfs/ RG10-DWTW.pdf

Frank Porter Graham Child Development Institute, Chapel Hill, NC, (919) 966-4221. (\$6.00)

WEBSITES

Child Development Media

www.childdevmedia.com

Child Development Media offers wide range of resources, including videos books, curricula, and training materials for the early childhood community. The site highlights early intervention, early education, child development, child care special needs, parent education, and professional education. The collection of materials includes items available in Spanish.

TRAINING AND TECHNICAL ASSISTANCE

Bridging Cultures: Teacher Education Module

(2003) Rothstein-Fisch, C.

This training module helps pre-service and inservice teachers be more successful in working with students and families from immigrant cultures. As a starting point for understanding differences between home and school cultures, the module offers a framework for teachers to engage in strategies that improve home-school communication and parent involvement. Materials are designed for use in one or two class sessions in a teacher education course. Related texts are Bridging Culture between Home and School: A Guide for Teachers and Bridging Cultures in Our Schools: New Approaches that Work, both available from WestEd.

WestEd Center for Child and Family Studies and the California Department of Education, CDE Press, Sales Office, P.O. Box 271, Sacramento, CA 95812-0271, 1-800-995-4099. (\$39.95)

Diversity

MAGNA SYSTEMS, INC. AND GONZALEZ-MENA, J. Available from Child Development Media, 5632 Van Nuys Blvd., Suite 286, Van Nuys, CA 91401, 1-800-405-8942 or order online at www.childdevmedia.com. (\$90 each or \$330 for the series of four videos.) This series offers a new way to help people in childcare integrate culturally responsive caregiver with developmentally appropriate practices. Suspending judgment about right and wrong, the goal is to show diverse perspectives and to help open up communications and create powerful new connections with colleagues, parents, and with the children themselves. The series includes:

Diversity, Independence, Individuality (30 minutes)

What constitutes good practice? "It depends..." Focusing on diverse reactions to scenes of children learning to be independent, this video shows how valuing independence and individuality define teaching approaches as well as feeding, toileting, and napping practices. Examples are not necessarily how "things should be done," but were chosen for their potential to stimulate open discussion about important caregiving issues.

Diversity: Contrasting Perspectives (30 minutes)

Child caring days go more smoothly and parent relations improve when staff can explore contrasting perspectives and respect those contrasts. Designed to spark dialogue, this video depicts variations on themes of independence, interdependence, and individuality in the delicate issues involved in day-to-day caregiving. What we believe about the best learning environment depends on our experience and our understanding of what children need. For some, early independence is a primary value. For others, interdependence—helping others and being helped—matters more.

Diversity: Diversity and Communication (30 minutes)

Role-playing conflicts between parents and early childhood professionals prepare teachers for today's diverse world. Highlighting communication blocks and pointing out ways of creating connection, this video shows sample areas of disagreement (mostly around neatness/messiness and toileting) and shows people learning to understand and respect diversity.

Diversity: Diversity and Conflict Management (30 minutes)

Going more deeply into

conflict/communications issues, we learn here a practical process for conflict management and resolution. Conflict about discipline, children's privacy, and self-feeding is roleplayed. Subtle power plays can be seen. The only "how to" video of the series, this video lays out a process or structure for ways to open up communications between parents, teachers, and caregivers and to discover mutual understanding and respect. The conflict management process shown is called RERUN (Reflect, Explain, Reason, Understand, Negotiate).

Multicultural Early Childhood Team Training (MECTT): Infusing Cultural Competence in Early Childhood Programs

(1996) Flynn, N., Thorp, E., White Evans, K., and Takemoto, C.

MECTT is a comprehensive training curriculum that prepares family/professional teams to improve services to divers families of young children with special needs. The training notebook includes Participant materials and a Trainer's Guide. Both sections are organized to make the planning and delivery of training as easy as possible. The compilation of twelve training modules contains objectives, teaching activities, evaluation and assignment sheets, a glossary, and readings. The training modules are as follows: The Basics of Cultural Competence, Crosscutting Practices, Family find, Communication and Partnerships, Child Development at Home and School, Family Centered Assessment Practices, Inclusive Services, the Individualized Family Service Plan and Education Program, Home Visits, Facilitating Transition, Program Change for Cultural Competence, and Developing an Action Plan. The training materials can be used for a variety of needs, audiences, and settings. On-site training and technical assistance support available through the MECTT team. George Mason University's Kellar Institute for Human disAbilities and the Parent Educational Advocacy Training Center (PEATC). Available from George Mason University, Mail Stop 1F2, Kellar Institute for Human disAbilities,

4400 University Drive, Fairfax, VA 22030-4444, (703) 993-3670. (\$150 per notebook)

Program for Infant/Toddler Caregivers Module IV: Culture, Family, and Providers (1998) Program for INFANT/Toddler

CAREGIVERS (PITC)

One in a series of four training modules produced by WestEd PITC, Module IV includes: The curriculum Infant/Toddler Caregiving: A Guide to Culturally Sensitive Care (\$12.50), a Trainer's Guide: Module IV: Culture, Family, and Providers (\$20.00), and Video: Essential Connections: Ten Keys to Culturally Sensitive Child Care (\$65.00). Articles in the curriculum guide focus on development of a child's development in the context of culture, cultural diversity, the development of cultural sensitivity, and support to a child's full participation in his or her home culture. The video supports these messages through recommending and describing ten strategies to strengthen children's connections with their family and their home culture and is available in English, Cantonese, and Spanish. Audiences would include: professional developers, social service agencies, community-based organizations, and parents.

WestEd Center for Child and Family Studies and the California Department of Education, CDE Press, Sales Office, P.O. Box 271, Sacramento, CA 95812-0271, 1-800-995-4099.

Project CRAFT: Culturally Responsive and Family Focused Training

PRODUCED BY CHEN, D., BREKKEN, L., AND CHAN, S. This program explores the subtleties of working with culturally diverse children and families. The tape examines, in depth, stereotypes and the media, family values, relationship building, communication styles and language acquisition. Families from various backgrounds and the early childhood professionals who work with them share their experiences and feelings about cultural differences, living with a child with disabilities, and negotiating the special education system. Suggestions for improving service delivery and multicultural family support are included. The accompanying booklet with topical headers, scenarios, key points, and handout offers questions and activities to facilitate group discussions. Available from Child Development Media, 5632 Van Nuys Blvd., Suite 286, Van Nuys, CA 91401, 1-800-405-8942 or order online at www.childdevmedia.com. (60-minute video and booklet, \$75.00)

Bibliography

America's children: Key national indictors of well-being. (2001). Retrieved August 11, 2003, from the Federal Interagency Forum on Child and Family Statistics Web site: www.childstats.gov

Banks, J. (1993). Multicultural education: Development, dimensions, and challenges. *Phi Delta Kappan*, 75(1), 22-28.

Banks, J. (1993). Multicultural education for young children: Racial and ethnic attitudes and their modification. In B. Spodek (Ed.), *Handbook of Research on Education of Young Children*. New York: Macmillan.

Carlson, V. J., & Harwood, R. L. (1999, December/2000, January). Understanding and negotiating cultural differences concerning early developmental competence: The six-raisin solution. *Bulletin of ZERO TO THREE, 20*(3), 19-24.

Caspe, J. (2003). *Family literacy: A review of programs and critical perspectives*. Retrieved August 16, 2003, from Harvard Graduate School of Education, Harvard Family Research Project Web site: www.hfrp.org

Chang H., & Pulido, D. (1994, October/November). The critical importance of cultural and linguistic continuity for infants and toddlers. *Bulletin of ZERO TO THREE*, *15*(2), 13-17.

Coltrane, B. (2003). Working with young English language learners: Some considerations. Washington, DC: U.S. Department of Education, National Library of Education, Office of Educational Research and Improvement. Retrieved June 23, 2003, from www.cal.org/resources/digest/0301coltrane.html

Cross, T., Bazron, B., Dennis, K., & Isaacs, M. (1989). Towards a culturally competent system of care: A monograph on effective services for minority children who are severely disturbed, Volume I. Washington, DC: Georgetown University Child Development Center, CASSP Technical Assistance Center.

Derman-Sparks, L., & the A.B.C. Task Force. (1989). Anti-bias curriculum: Tools for empowering young children. Washington, DC: National Association for the Education of Young Children.

Gomez, R. (1991). *Teaching with a multicultural perspective*. Washington, DC: U.S. Department of Education, ERIC EECE Clearinghouse on Elementary and Early Childhood Education. Retrieved June 23, 2003, from http://ecap.crc.uiuc.edu/eecearchive/digests/1991/gomez91.html

Goode, T., & Jones, W. (2002). *Definition of linguistic competence*. Washington, DC: Georgetown University Center for Child and Human Development, National Center for Cultural Competence.

Goode, T. (1997, revised 2000). *Definitions*. Washington, DC: Georgetown University Child Development Center, Center for Child Health and Mental Health Policy, University Affiliated Program.

Goode, T. (2001). Policy brief 4: Engaging communities to realize the vision of one hundred percent access and zero health disparities: A culturally competent approach. Washington, DC: Georgetown University Child Development Center, National Center for Cultural Competence.

Goodnow, J. J. (1996). Acceptable ignorance, negotiable disagreement: Alternative views of learning. In D. R. Olson & N. Torrance (Eds.), *The handbook of education and human development: New models of learning, teaching, and schooling* (pp. 355-367). Oxford, UK: Blackwell Publishers.

Hains, A., Lynch, E., & Winton, P. (2000). Moving towards cross-cultural competence in lifelong personnel development: A review of the literature (CLAS Tech. Rep. No. 3). Champaign, IL: University of Illinois at Urbana-Champaign, Culturally and Linguistically Appropriate Services Early Childhood Research Institute. Retrieved July 29, 2003, from http://clas.uiuc.edu/techreport/tech3.html

Harkness, S., & Super C. M. (1992). Parental ethnotheories in action. In I. E. Sigel, A. V. McGillicuddy-DeLisi, & J. Goodnow (Eds.), *Parental belief systems: The psychological consequences for children*. Hillsdale, NJ: Erlbaum.

Henderson, A. (1995). Family and student achievement. PTA Today, 20(4), 12-14.

Henderson, A., & Mapp, K. (2002). A new wave of evidence—The impact of school, family, and community connections on student achievement. Retrieved September 9, 2003, from the Southwest Educational Development Laboratory, National Center for Family and Community Connections with Schools Web site: www.sedl.org/connections/resources/evidence.pdf

Higgins, J. (2003). Multicultural children's literature: Creating and applying an evaluation tool in response to the needs of urban educators. Retrieved July 30, 2003, from New Horizons for Learning Web site: www.newhorizons.org/strategies/multicultural/higgins.htm

Hohensee, J., & Derman-Sparks, L. (1992). *Implementing an anti-bias curriculum in early childhood*. Retrieved June 23, 2003, from the ERIC EECE Clearinghouse on Elementary and Early Childhood Education, U.S. Department of Education Web site: http://ecap.crc.uiuc.edu/eecearchive/digests/1992/hohens92.html

Kindler, A. L. (2002). Survey of the states' limited English proficient students and available educational programs and services: 2000-2001 summary report. Washington, DC: U.S. Department of Education, Office of English Language Acquisition, Language Enhancement and Academic Achievement for Limited English Proficient Students. Retrieved August 11, 2003, from www.ncela.gwu.edu/policy/states/reports/seareports/0001/sea0001.pdf

Lieberman, A. (1995). Concerns of immigrant families. In *Infant toddler caregiving: A guide to culturally sensitive care.* San Francisco, CA: California Department of Education, WestEd.

Lynch, E. W., & Hanson, M. J. (1998). Developing cross-cultural competence—A guide for working with children and their families (2nd ed.). Baltimore, MD: Paul H. Brookes Publishing Company.

Magrab, P. (1999). The meaning of community. In R. Roberts & P. Magrab (Eds.), Where children live: Solutions for serving young children and their families. Stamford, CT: Ablex Publishing Corporation.

Margolis, F., & Bell, C. (1986). *Instructing for Results*. University Associates Inc. Minneapolis, MN: Lakewood Publications.

McLauglin, B. (1995). Fostering second language development in young children: Principles and practices (Educational Practice Report 14). Washington, DC: U.S. Department of Education, Office of Educational Research and Improvement, National Center for Research on Cultural Diversity and Second Language Learning. Retrieved May 23, 2003, from www.ncela.gwu.edu/pubs/ncrcdsll/epr14.htm

Menkart, D. (1993). Multicultural education: Strategies for linguistically diverse schools and classrooms. National Center for Bilingual Education: Program Information Guide Series, Number 16. Retrieved June 19, 2003, from www.ncela.gwu.edu/pubs/pigs/pig16.htm

National Association for the Education of Young Children. (1995). *NAEYC position statement: Responding to linguistic and cultural diversity.* Retrieved September 15, 2003, from the NAEYC Web site: www.naeyc.org

National Center for Family Literacy. (n.d.). *Family literacy—A solution*. Retrieved August 26, 2003, from www.famlit.org/ncfl

National Education Goals Panel. (1997). Special early childhood report 1997. Washington, DC: Author.

National Research Council and Institute of Medicine, Board on Children and Families, Commission on Behavioral and Social Sciences and Education, D. Phillips & N. Crowell (Eds.). (1994). *Cultural diversity and early education: Report of a workshop*. Washington, DC: National Academy Press. Retrieved May 23, 2003, from www.nap.edu/readingroom/books/earlyed

National Research Council and Institute of Medicine, Board on Children, Youth, and Families, Commission on Behavioral and Social Sciences and Education, J. P. Shonkoff & D. A. Phillips (Eds.). (2000). *From neurons to neighborhoods: The science of early childhood development*. Washington, DC: National Academy Press.

North Central Regional Educational Laboratory. (1998). Critical issue: Meeting the diverse needs of young children. Retrieved June 2, 2003, from www.ncrel.org/sdrs/areas/issues/students/earlycld/ea400.htm

Pulido-Tobiassen, D., & Gonzalez-Mena, J. (1999). A place to begin: Working with parents on issues of diversity. Oakland, CA: California Tomorrow.

Randall-David, E. (1989). *Strategies for working with culturally diverse communities and clients*. Association for the Care of Children's Health. Washington DC: Office of Maternal and Child Health.

Reebye, P., Ross, S., Jamieson, K., & Clark, J. (1999). *Sharing attachment practices across cultures: Learning from immigrants and refugees.* Toronto, CA: St. Joseph's Women's Health Center, Parkdale Parents' Primary Prevention Project. Retrieved September 15, 2003, from www.attachmentacrosscultures.org

Reese, D. (1996, November). Multicultural parents and families: How you can be involved in your child's education. *Parent News*. Retrieved June 23, 2003, from National Parent Information Network Web site: http://npin.org/pnews/1996/pnewn96/pnewn96j.html (no longer available).

Regional Educational Laboratory Network. (2000). *Continuity in early childhood: A framework for home, school, and community linkages.* Regional Educational Laboratories' Early Childhood Collaborative Network. C. Ahern, D. Nailey, & C. Cabson (Eds.). Washington, DC: U.S. Department of Education, U.S. Department of Health and Human Services and the Office of Educational Research and Improvement, Administration on Children, Youth, and Families.

Regional Research Institute for Human Services. (2002). *Cultural competency and early childhood mental health* (Literature Review Workgroup Report). Portland, OR: Portland State University, Early Childhood Mental Health Best Practices Project. Retrieved July 24, 2003, from Portland State University, Resource and Training Center on Family Support and Children's Mental Health Web site: www.rtc.pdx.edu/PDF/pbEarlyChildhoodCultComp.pdf

Rogoff, B. (1990). Apprenticeship in thinking: Cognitive development in social context. New York: Oxford.

Rossi, S., & Rossi, P. (1990). Of human bonding. New York: Basic Books.

Schulze, P., Harwood, R., Goebel, M., & Schubert, A. (1999). *Cultural influences on mothers' developmental expectations for their children*. Poster presented at the Biennial Meeting of the Society for Research in Child Development, Albuquerque, NM.

Seattle Public Schools. (2003). *Standards for instruction in multicultural settings*. Retrieved August 27, 2003, from the Seattle Public Schools Web site: www.seattleschools.org/area/acastan/stan/socstud/ISMCS.xml

Selecting multicultural picture books. (2002, Spring). ERIC/ECCE Newsletter, 14(1).

Slentz, K. (1997). Evaluation and assessment in early childhood special education: Children who are culturally and linguistically diverse. Seattle Public Schools, Special Education, Office of Superintendent of Public Instruction. Retrieved June 19, 2003, from the Seattle Public Schools Web site: www.kl2.wa.us/SpecialEd/pubdocs/CLD.pdf

Smallwood, B. (2002, November). Thematic literature and curriculum for English language learners in early childhood education. *ERIC Digest*. Retrieved July 30, 2003, from www.cal.org/resources/digest/0208smallwood.html

Snow, C., Burns, M., & Griffin, P. (1999). *Language and literacy environments in preschools*. Campaign, IL: ERIC EECE Clearinghouse on Elementary and Early Childhood Education. Retrieved May 23, 2003, from www.ericfacility.net/ericdigests/ed426818.html

Stevenson, H., & Lee, S.-Y. (1990). Contexts of achievement: A study of American, Chinese, and Japanese children. *Monographs of the Society for Research in Child Development*, 55(1-2, Serial No. 221), 1-106.

Swick, K., Boutte, G., & van Scoy, I. (1995). *Family involvement in early multicultural learning*. Campaign, IL: ERIC EECE Clearinghouse on Elementary and Early Childhood Education. Retrieved May 23, 2003, from www.ericfacility.net/ericdigests/ed380240.html

U.S. Department of Education. (1997). Simple things you can do to help a child read well and independently by the end of the third grade. Retrieved August 24, 2003, from www.ed.gov/pubs/SimpleThings

U.S. Department of Health and Human Services. (2001). *Mental health: Culture, race, and ethnicity—A supplement to mental health: A report of the surgeon general.* Rockville, MD: U.S. Department of Health and Human Services, Public Health Service, Office of the Surgeon General.

Wong Fillmore, L. (1991). When learning a second language means losing the first. *Early Childhood Research Quarterly*, 6(3), 323-346.

Zaslow, M., Calkins, J., & Halle, T. (2000, December). Part I: Defining and assessing school readiness—Building on the foundation of NEGP work in Background for community-level work on school readiness: A review of definitions, assessments, and investment strategies. *Child Trends*.

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