

Attachment Across Cultures



"The presence of parents paying attention to their child makes a child happy. She feels secure that we are there, we are there for her, we love her."

—Program Participant, Hamilton, ON

Acknowledgements

First and foremost I would like to thank the parents and families with young children who inspired this project and those who participated in it at many levels - as interview participants, subjects of photographs, translators, and reviewers of project materials. They have provided us with the information that we are disseminating and I hope that we have done justice to their challenging and remarkable lives.

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On a personal note, I would like to thank my family and friends for their loving support through all the ups and downs - especially to Rehana Jade Mawani, my wonderful niece, for providing me with my inspiration for this project. And to Zohrab and Annabel for bringing her into the world, at just the right time.

Farah N. Mawani
Project Coordinator



Project Philosophy

As members of the National Advisory Panel for this project we share the following views and principles.

- We acknowledge that children all over the world do not develop in isolation. Children need connection and responsive relationships in order to develop a strong sense of self, security and identity. We know that a strong source of this stability comes from the initial attachment that children have to their mothers and other primary caregivers. We also know that this has an impact throughout an individual's lifetime.
- We work from the premise that, since the first influx of Europeans, Canada has been a country of immigrants, and that all who are not First Nations, are or have descended from immigrants. While the aftermath of colonization has distinct impacts on the attachment practices of First Nations peoples, this was beyond the scope and mandate of this project. Within the context of immigrant and immigrant descent groups, we have felt an obligation to work toward a mutual understanding and exchange between those who are recent immigrants, and those who are descendants of earlier immigrants.
- We acknowledge and validate attachment practices used by women and families across Canada who come from diverse backgrounds. We pay particular attention to those techniques that have proved to be critical in the healthy development and attachment of children in their first five years of life and that allow them to develop to their full potential.
- We acknowledge that whether by choice or in order to survive migrating to a new country is one of the most stressful experiences that people may endure. In addition, many women and families have to struggle to understand and adapt to their new living conditions. Their new country also needs to adjust to them. Where this is less than ideal, a continuum of discrimination and racism can add to parents' stress and ability to adapt. This has a definite impact on the way they relate to those around them and particularly to infants and young children. When parents are exhausted, stressed or over-burdened by having to survive on a daily basis, children may end up feeling inadequate and rejected. Furthermore, they may perceive the world and themselves as negative and hopeless. Meaningful support and understanding are key to overcoming these feelings.
- We are aware that family conflict, violence and other trauma experienced by the child during her or his first five years of life may increase the child's sense of insecurity, anxiety and inadequacy. Although not exclusive to immigrant and refugee mothers and families, this is an area that requires particular attention on the part of those who are providing support services for them. These mothers and families have a right to receive accurate information and timely support.
- We acknowledge that worldwide, the issues of parenting and child rearing continue to be considered primarily the responsibility of women. This work, most often in addition to other forms of paid or unpaid work, remains undervalued and socially invisible worldwide. We welcome and validate practices that promote change in the status quo toward a shared responsibility for child rearing and the advancement of women.
- We believe that as service providers we all have an important role in validating and supporting a community's capacity to raise healthy children and active citizens. Further, we can only accomplish this in a climate of mutual learning and mutual respect between those who provide service and those who receive it.



How Do I Use This Toolkit

This toolkit is directed to all those interested in exploring and validating cross-cultural attachment beliefs, values and practices, as well as the impact of migration and resettlement on these beliefs, values and practices. It is specifically targeted to health and social service providers across Canada. The toolkit is accompanied by a project web-site, www.attachmentcrosscultures.org, and a project literature review and final report which are available on the web-site. The toolkit, web-site, literature review and final report are also available in French.

The toolkit contains practical information and resources to assist community, health and social service agencies across Canada in understanding, promoting and maintaining effective cross-cultural attachment practices¹ among program participants, individually, and collectively. It also generates a better understanding of the impact that migration and resettlement in a new country may have on the development of young children. Finally, and perhaps most importantly, it provides some specific ideas to generate discussion and sharing of experiences among program participants from all over the world.

The toolkit is divided into the following sections, with the first section providing an introduction to the project and the toolkit, the next three sections corresponding to the three objectives of the project, and the last including a list of additional resources:

- I. Attachment Across Cultures
- II. Beliefs, Values, and Practices
- III. Impact of Migration
- IV. Maintaining Effective Practices
- V. Culturally Responsive Resources



The **Cover Pages** of the toolkit are meant to be used as tools. Please be creative and use them in whatever way best suits your needs. Here are some ideas:

1. Create a display on Cross-Cultural Attachment.
You can add other materials from the toolkit to enhance the display, or add relevant materials from your organization. You can include lists of services and programs that you offer, photographs of your clients interacting with their children, quotes from your clients, and lists of resources that you have.
2. Initiate discussions with parents individually or in groups.
Ask parents questions based on the photographs and quotes on the cover pages. Here are some suggestions for questions that you might ask.

~

¹ We use the terms 'effective cross-cultural attachment practices' and 'effective attachment practices' to represent those practices that parents who we interviewed described as promoting positive and enduring relationships between themselves and their children. These practices may originate from any part of the world, and may be affected and adapted by migration, resettlement, and the acculturation process that is part of them.



Beliefs, Values and Practices

How do you see your role in feeding your child(ren)?

How do you show love to your child(ren)?

How do you comfort your child(ren)?

Impact of Migration

What does home mean to you?

How has your move to Canada affected the way you show love to and respond to your child?

Maintaining Effective Practices

Do you feel that your parenting practices are respected in Canada?

What barriers do you face?

What support do you need?

What could we do to offer more support?

3. Put the cover pages up on a bulletin board with questions in different languages. Ask parents to pin up photos demonstrating their responses or provide paper and markers for them to write responses and pin them up. Some questions along with their translations into multiple languages have been provided in the toolkit.

The first few pages of **Sections II-IV** describe the **project findings** based on interviews with parents and service providers for each objective. Quotations from interviews are included throughout the text to support the findings. The remainder of each section includes more information on what parents and service providers defined as important in the form of fact sheets. Concrete information on program implications of the project findings, including specific suggestions for program activities are contained in **Section IV**.

There is one **handout for parents** included in **Section I**, entitled 'What is Attachment?'. It is a two-page document, written in plain language for you to photocopy and distribute to your clients. The handout is available in several languages on the project web-site. We encourage you to translate it into additional languages, if necessary. We also encourage you to adapt the fact sheets provided throughout the toolkit into plain language handouts that can also be translated into multiple languages.

Section V of the toolkit, **Culturally Responsive Resources**, is a bibliography of print, audio-visual, and internet resources, as well as organizations that can offer various types of support related to issues addressed in the toolkit.



Overview

This project developed out of a growing recognition of the need to inform and educate community-based agencies across Canada on the value of supporting and promoting cross-cultural attachment practices in their everyday programming and responsiveness to families with young children. It also acknowledges the fact that families and children now living in Canada require additional support and understanding in preserving, adapting, and sharing their effective attachment practices.

What is Attachment?²



Attachment is the deep emotional bond formed between children and one or more adults, usually a parent or caregiver. This attachment provides a sense of security to children and allows them to explore their environment, returning to the adult during periods of distress. Development of this emotional bond or attachment involves parents providing love, nurturing, trust, safety, and respect to their children, and sensitively responding to their children's needs. The effects of early attachment have been shown to last a lifetime.



The project was an exploratory research project, conducted as a qualitative study of parents with children aged 0-5 years across Canada. In addition, the project aimed to assist organizations across Canada in promoting and maintaining positive cross-cultural attachment practices among program participants, by creating practical resources for them.

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² This definition was chosen by the National Advisory Panel, to act as the working definition for the project. It is a combination of definitions from different sources which represents what the National Advisory Panel felt was most important.



Why is the project important?

Attachment is the neurological basis for emotional and intellectual development for life. It is also linked to health and well being at all stages of development. Although, the attachment relationship is universal, the way in which it is expressed by mothers³, families⁴, and children varies in different parts of the world. There is an increasing number and diversity of immigrants and refugees coming to Canada from countries where attachment practices may or may not differ from those which are dominant in Canadian health and social service milieus. An awareness of similarities and openness to differences provides the dominant culture with the opportunity to learn from cross-cultural best practices in order to improve overall programming and service delivery. Understanding the beliefs and values on which different practices are based, enables the provision of support to immigrant and refugee families for their effective attachment practices. In addition, support can help to minimize the negative impact of migration and resettlement, particularly for families of young children.

The project aims to:

- acknowledge and validate parent-child attachment beliefs, values and practices used by women and families coming from diverse backgrounds and countries abroad.
- identify the impact of migration and resettlement on mothers' and families' maintenance of effective attachment practices.
- enhance the knowledge and understanding of cross-cultural attachment beliefs, values and practices and the impact of migration and resettlement, within community-based agencies.



The Objectives of the project are:

1. to identify, support and validate similarities and differences in attachment beliefs, values and practices used by immigrants and refugees to promote attachment of their children between the ages of 0 and 5 years.
2. to identify the impact of migration and resettlement on attachment beliefs, values and practices of immigrant and refugee families from diverse backgrounds.
3. to identify specific strategies used to maintain effective practices for ensuring positive attachment of children in diverse ethno-specific communities.

⑥

³ The word 'mother' will be used instead of 'parent' throughout most of this document to reflect the fact that although recruitment for interviews targeted mothers and fathers, our sample consisted of 95% mothers. CAPC and CPNP programs currently target primarily mothers because the primary responsibility for parenting most often falls on their shoulders. We would also like to recognize the fact that women continue to assume the major responsibility for the care of children, elderly parents and other dependents.

⁴ The word 'family' will be used throughout this document to recognize the important role of immediate and extended family in attachment, described by parents who were interviewed for this project.



Who is guiding the Project?

The Project, "Sharing Attachment Practices Across Cultures: Learning from Immigrants and Refugees" was a national project funded by Health Canada's National Projects Fund. It was led by the St. Joseph's Women's Health Centre (WHC) in Toronto, and by the project it hosts, the Parkdale Parents' Primary Prevention Project (PPPPP), one of over 800 CAPC and CPNP projects across Canada. The project also benefited from the direction of a National Advisory Panel made up of representatives of each region across Canada.

What was the process of the project?

- The WHC team commissioned a literature review on attachment practices across cultures, which was conducted through the Social Planning and Research Council of British Columbia (SPARC).
- In-depth interviews and focus group discussions were conducted with parents and service providers in Vancouver, Calgary, Edmonton, the Waterloo region, Hamilton, Toronto, Montreal, Halifax and Fredericton.

The project collected information from:

1. in-depth individual interviews and focus group discussions with 133 immigrant and refugee parents (126 mothers and 7 fathers) from 50 countries around the world.
2. in-depth individual interviews and focus group discussions with 20 service providers
3. 50 responses to a call for resources sent out to service providers across Canada.



- The interviews were taped and transcribed. The transcripts were analyzed using the software QSR NUD.IST.
- The major themes that came out of the analysis, along with responses to the resource call, were used to develop the practical resources created by the project for the use of community, health and social service agencies across the country.

What were the findings of the project?

This is a brief summary of the findings of the project, corresponding to the three project objectives, which serve as a preview to the report, toolkit, and web-site produced by the project.



- There are similarities as well as differences in attachment beliefs, values and practices amongst mothers from different countries of origin. The similarities reinforce the notion that the infant-caregiver attachment relationship and mothers' desire for securely attached children is universal. The differences in beliefs and values are important to understand because they influence mothers' attachment practices and perceptions of child development.
- When families migrate to Canada, their experiences of loss of home, family and community, trauma, culture shock, and the process of acculturation, have a large impact on mothers and children and thus provide challenges to their attachment relationships. At the same time, mothers and families tend to focus their energy into creating a better future for their children, and in doing so, maintain effective attachment practices.
- Agencies can help immigrant and refugee mothers and families to create a 'better' future for their children by offering support to them in overcoming the great challenges in promoting attachment within a different context from that in which they were raised. Agencies can improve their overall service delivery by learning from and building on the strengths apparent in a group that is upholding strong values, maintaining positive practices, and incorporating new ideas in promoting attachment with their children.

Conclusions

As mothers, immigrants and refugees to Canada face many of the same challenges as other mothers, but they face additional challenges in an environment and context very different from the one in which they themselves were parented in. It is clear that many mothers show incredible resilience in promoting secure attachment with their children against many odds.

Community-based agencies and all the families they serve can learn from this resilience, as well as from the cross-cultural best practices in promoting secure attachment, which are maintained by immigrant and refugee mothers, families, and communities.

What resources are being developed based on the project findings?

- A poster series has been designed to validate what parents are already doing and to provide information on the meaning and significance of attachment for their children's current and future well-being.
- This print toolkit and a web-site (www.attachmentcrosscultures.org) have been developed, containing concrete resources for the use of service providers in community, health and social service agencies, in supporting parents to maintain effective attachment practices.

We hope that these materials will be used to initiate further discussion on the issues that we have introduced, both amongst service providers and amongst parents, families and communities themselves. We all need to continue to share attachment practices and our experiences with the factors that influence them, in order to learn from each other. The lessons we learn need to be applied to overall programming and service delivery, to benefit all the parents we serve.



CAPC, CPNP, and NPF

The Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP) are Health Canada funded programs that support a range of community-based programs and services for pregnant women and children living in conditions of risk.

What is the Community Action Program for Children (CAPC)?



The Community Action Program for Children (CAPC) is a program that provides long term funding to community groups to establish and deliver services that respond to the developmental needs of children from birth to six years of age who are living in conditions of risk.

The specific target groups include:

- children living in low-income families
- children living in teenage-parent families
- children experiencing developmental delays,
- children with social, emotional or behavioral problems
- abused and neglected children
- people who have, or are likely to have, at risk young children

CAPC projects provide parents with the support, information and skills they need to raise their children. There are 474 CAPC projects across Canada delivering a total of 1,890 programs. Each week, over 69,000 parents and children participate in CAPC programs.



What is the Canada Prenatal Nutrition Program (CPNP)?

The Canada Prenatal Nutrition Program (CPNP) is a program that assists communities to develop and enhance programs for at-risk pregnant women in order to improve birth outcomes.

The specific target groups include:

- pregnant adolescents
- youth at risk of becoming pregnant
- pregnant women who abuse alcohol or other substances
- pregnant women living in violent situations
- off-reserve aboriginals and Inuit
- refugees
- pregnant women living in isolation or not having access to services



The program provides the resources for community-based groups to offer comprehensive prenatal programs including food supplementation, nutrition counselling, support, education, referral and counselling on lifestyle issues, such as alcohol abuse, stress and family violence. There are 277 CPNP projects in over 680 communities across Canada reaching more than 26,000 women.

What is the National Projects Fund (NPF)?



The CAPC/CPNP National Projects Fund (NPF) was created to provide financial assistance to initiatives that support the objectives of the CAPC and CPNP programs and directly benefit CAPC and CPNP projects across Canada. The NPF objectives are:

- to support and strengthen CAPC/CPNP projects through training on specific issues, resource development and information sharing and dissemination;
- to encourage and stimulate the development of a national network of community-based children's programs; and
- to share the knowledge base from CAPC and CPNP learning among CAPC and CPNP projects and with communities (including other children's services, researchers, educators and policy makers).

What is the Women's Health Centre?

The St. Joseph's Women's Health Centre (WHC) is one of four women's health centres funded by the Ontario Ministry of Health since 1989. The WHC provides healthcare in response to the changing and diverse needs of the community, addressing the broad determinants of health. The WHC provides a spectrum of non-medical services: counselling, groups, practical support, public awareness raising and advocacy, health education activities, presentations, and free childcare. Services are offered in several languages, including French, Tamil, Punjabi, Hindi, Portuguese, Spanish, Polish, Russian, and English, by a diverse group of women with knowledge and multiple skills in providing health care, emotional support, health promotion, counselling, and the enhancement of women's health.

The WHC model is based on research that indicates that the reason some people are healthier than others is closely linked to socio-economic factors. Women are central to this approach to health improvement because they are the primary consumers of health care services and because they are in a unique position to influence the health of others as our society's primary caregivers. The WHC model assists clients to make better sense of their 'symptoms' in the context of an anti-oppression framework, in order to gain long-term control over the direction of their lives.



Over 7,000 women and their children used the centre in 1999/2000. Approximately 50% of the existing client base is made up of immigrant and refugee women and women of colour. The point of entry for women accessing WHC services varies. Some women come to the WHC for health information, settlement issues, skill-building workshops, parenting assistance and practical support while living in poverty. Others seek support and clinical services for lives ruptured by violence, such as childhood sexual abuse and emotional abuse and neglect, adult relationship assault, political persecution, torture, and rape. Some women request short-term counselling for stresses related to having a new baby, and post-partum depression. Many are seeking support and assistance with issues related to migration and resettlement. Women also enter the WHC through the Parkdale Parents' Primary Prevention Project (see detailed description on following page). All are multi-stressed. Most are parents. Women across WHC programs are living in poverty. Some pay up to 80% of their incomes on rent, leaving them at high risk for permanent or cyclical homelessness.

For more information, please contact:

St. Joseph's Women's Health Centre
30 The Queensway
Toronto, ON M6R 1B5
Tel: (416) 530-6850
Fax: (416) 530-6629



What is the Parkdale Parents' Primary Prevention Project?

The Parkdale Parents' Primary Prevention Project (PPPPP) was conceived in 1991, as a pilot project to work towards reaching and providing for the distinct needs of multi-stressed pregnant women and families with young children living in the community of Parkdale. Together in partnership, St. Joseph's Women's Health Centre, The Toronto Department of Public Health, Creating Together Parent-Child Resource Centre, The Daily Bread Food Bank and Parkdale Focus Mom's Support Program developed comprehensive health and social support programs recognizing the distinct community and individual needs within the context of their cultural, linguistic and racial diversity.

The program's goal is to increase participants' access to resources, including peers and a multi-disciplinary support team. The design and implementation of comprehensive services address the broad determinants of health for both children and their families. These programs include, Prenatal Nutrition and Support Drop-in, Mother-Baby Drop-in, Parent Relief, Parent Education Workshops and Information Sessions, Child Stimulation and School Readiness Programs, Community Development Activities and Short-term Child Care so that parents can access individual counselling, health care and social support services.



Working from an ecological perspective, the programs create an environment where pregnant women and new parents receive social and emotional support, together with practical information and educational opportunities in order to make and access healthier lifestyle choices and conditions. The programs also address the larger scope of what affects a family's healthy functioning. Flexibility is most essential, as most program participants report that they are struggling with multiple stressors in their lives. Staff begin where the parents and families are at, respond to the concerns that they identify and work together to address the interconnectedness of the issues facing the participant.

For women who have historically had barriers to accessing traditional services, ongoing access to a multi-disciplinary team of professional staff and volunteers ensures continuity of service, as well as referrals to appropriate health and social services, thereby helping them avoid 'falling through the cracks'. By facilitating and encouraging mutual aid and support amongst participants, women have strengthened their own networks and have begun to build a more mutually supportive community.

It is through on-going assessment, communication and evaluation that the project continues to build upon community capacity. The project's advisory panel, composed of program participants, program and partner agency staff, act as facilitators in maintaining a strong grass-roots commitment. The community must know that participants' views and opinions are valued and acted upon. This process takes time and requires a commitment from all those involved.


For more information, please contact:

Parkdale Parents' Primary Prevention Project
St. Joseph's Women's Health Centre
30 The Queensway
Toronto, ON M6R 1B5
T: (416) 530-6318 F: (416) 530-6629
Email: pppppwhc@web.net





National Advisory Panel Members

The following is a list of the members of the National Advisory Panel for the project, including brief personal descriptions in their own words and descriptions of the organizations where they work. Their participation was vital in accomplishing the goals of the project. Their thorough understanding of the topic, tremendous personal and professional experience, commitment and enthusiasm guided the development of the research and resources. Their commitment to bringing the value of cross-cultural attachment practices to the forefront is reflected in the final products of this project.

 Soodie Ansari
*Families Branching Out Coalition,
 Frog Hollow Neighbourhood House, Vancouver, BC*

Soodie is originally from Iran and immigrated to Canada after spending a number of years living in San Francisco. As a result of her experience, she has an in-depth personal understanding of the challenges and positive aspects of the migration experience. She had a particular interest in this project having completed her Masters in Child Development with an emphasis on attachment styles in 5 and 6 year olds.

Soodie Ansari was the Central CAPC Coordinator for the Families Branching Out Coalition in North East Vancouver. The Coalition is made up of 4 agencies (Frog Hollow Neighbourhood House - host agency, Collingwood Neighbourhood House, Kiwassa Neighbourhood House, and Thunderbird Community Centre) which provide programs and services for families with children birth to 6 years that live in conditions of risk. Soodie was also the Family Programs Coordinator at Frog Hollow Neighbourhood House, where she oversaw the Family Programs. Frog Hollow Neighbourhood House is a community services organization. The agency's purpose is to assist and empower the residents of their community to improve the quality of their lives through social programs and services. Frog Hollow's programs and services respect and value cultural and other differences among the residents of their community and encourage and rely upon volunteer support. 

 Pamela Kasir
*Families Branching Out Coalition,
 Frog Hollow Neighbourhood House, Vancouver, BC*

Pamela Kasir replaced Soodie Ansari on the National Advisory Panel towards the end of the project. She gave an enormous amount of energy and enthusiasm to the dissemination component of the project, contributing to its success.



☞ Amanda Dale
Women's Health Centre (WHC)

Amanda Dale brings to her role as manager of the St. Joseph's Women's Health Centre nearly 20 years experience in women's services. In this capacity, she performed all financial as well as overall project management duties. She was part of the project advisory team, and participated in the National Advisory Panel. She brought to the table a keen interest in cross cultural issues as well as qualitative research design and methods. ☞

☞ Elaine Eskow
Calgary Immigrant Aid Society, Calgary, AB

Elaine Eskow is a social worker who has been interested in cultural diversity issues for many years. She was involved with the multicultural organizational change initiative in Calgary which was spear-headed by the United Way, is currently part of a team developing a web-site to prepare newcomers for human service careers, and is part of a Steering Committee guiding the immigrant services and system evaluation within Calgary.

Elaine Eskow is a member of the Board of Directors of the Calgary Immigrant Aid Society (CIAS). The Mosaic Centre, one of the services of CIAS, provides preventive and interventive services for new Canadian families who require support in accessing medical, social, mental health and early education resources provided in Calgary. A wide variety of programs have been developed to address the physical, social, emotional, psychological and cognitive development of young immigrant and refugee children. Holistic programming for parents and caregivers is also provided, including a drop-in resource centre, pre-school, family literacy program, home visits, family support counselling, parenting workshops, celebrations and special events. ☞

☞ Jo-Anne Henderson-White
Metropolitan Immigrant Settlement Association, Halifax, NS

Jo-Anne Henderson-White is currently completing her Master's in Community Social Work. She is a newcomer to Canada originally from the Caribbean. She is interested in theatre, poetry, short stories and other awareness raising art forms.

Jo-Anne Henderson-White is a Community Worker at the Metropolitan Immigrant Settlement Association (MISA). Her responsibilities include: coordinating a capacity building project, which includes providing training for leaders within ethnic communities to become involved members of community boards, commissions and committees at the community municipal and provincial levels; conducting research regarding immigration policies and the worldwide refugee situation; providing public education to increase awareness of immigrant issues and the community's responsibility regarding immigrant settlement and integration. MISA is a community organization, established in 1980, that welcomes newcomers and recognizes their essential role in Canada. MISA provides special services to help newcomers in their efforts to participate fully in Canadian life. ☞



 Hiteshini Jugessur
South Asian Women's Community Centre
(Centre communautaire des femmes Sud Asiatique), Montreal, QC


Hiteshini Jugessur was born in Mauritius of a Mauritian father and an Indian mother. She moved to Ethiopia in 1983, subsequently lived in England, and now resides in Montreal. Outside of her work, she has been involved with the 'Teesri Dunya' ('Third World') Theatre Group in Montreal, that has used theatre to educate and create awareness about the different socio-political situations faced by South Asians in their country of origin as well as in Canada.

Hiteshini Jugessur is a Community Outreach Worker at the South Asian Women's Community Centre. The South Asian Women's Community Centre was first started in July, 1981 by a group of 9 women from India and Pakistan under the name South Asian Community Centre (Centre Communautaire Sud Asiatique). The organization started because these women recognized that immigrant women from visible and ethnic minorities experienced great handicaps in integrating into the Canadian way of life. In addition, the socio-cultural background of South Asian women was a contributing factor in the difficulties they faced. In some respects these problems were unique to South Asian women because their cultural traditions kept them more isolated than many other immigrant groups. The core objective of the organization is to help South Asian women develop their potential to the fullest, to raise their social and community awareness, and to facilitate their access to mainstream life in this country.

 Joanne King
Community Resource Centre (Killaloe) Inc., Killaloe, ON

Joanne's maternal grandparents came to Canada from Lebanon. Her parenting choices, made in the 1970's, were very "non-mainstream" and included sharing the family bed, baby-led weaning, and carrying her daughter and later her son on her front and back. This combination of experiences has resulted in a strong dedication to promote both positive attachment practices and equity issues enabling her to bring this commitment to the National Project.


Joanne King is the Executive Director of the Community Resource Centre (Killaloe) Inc. The Community Resource Centre (Killaloe) Inc., is a non-profit, charitable, community based centre operating out of the Village of Killaloe, in rural Renfrew County, Ontario. The CRC, along with its many community partners, offers a variety of CAPC and CPNP activities, including: a mobile children's resource centre and toy lending program (known as "the Toy Bus"), Kids Corp Family Resource Program in the Town of Renfrew, drop-in play group programs, programs for young parents, prenatal programs (some specialized for teens), parenting education programs, healthy child development programs, a second hand clothing store, food bank, employment counselling, children's mental health counselling, a community table and garden project, computer and internet access and information and referral.

Joanne also served as a liaison for the project to the Ontario Coalition of CAPC/CPNP projects. The Coalition provides a network for collective action, learning and resource sharing among Ontario projects, organizing an annual conference and semi-annual newsletter among other activities. 




 Elise Lavigne
Health Canada

Elise is from a "famille québécoise", and is married, with no children of her own, although she does volunteer work with children. She believes strongly in the respect of and the strong value of cultural diversity. When faced with cultural difference, if everyone could simply live by "It's not better, it's not worse, it's simply different", she believes strongly that discriminatory practices would be significantly reduced.


Elise Lavigne was the Health Canada Program Officer responsible for the management of CAPC/CPNP National Projects Fund and as such part of her role was to ensure successful initiation and completion of the projects. In addition, her role was to assess CAPC/CPNP projects needs in order to establish funding priorities for the Fund. When CAPC/CPNP groups were consulted, an underlying need was expressed to provide support for increased cultural diversity among program participants. For this project, it was Elise's responsibility to acknowledge and present the project proposal as responding to the both the Attachment funding priority and to the need for support for increased cultural diversity in programs across Canada 

 Gaby Vieira
Health Canada

Gaby Vieira replaced Elise Lavigne in her position at Health Canada and on the National Advisory Panel towards the end of the project. She offered a lot of enthusiasm for and commitment to the project. 


 Farah N. Mawani
Women's Health Centre

Farah N. Mawani was born in Nairobi, Kenya, while all her great grandparents were born in India. She immigrated to Canada at the age of four and had the opportunity to return to Kenya several times as she grew up, filling an intense need she felt to regain some of what she had lost in her migration to Canada. The history of migration in her family, along with her personal experience, fed her passion for and insight into the project.


Farah was the Project Coordinator for Sharing Attachment Practices Across Cultures: Learning from Immigrants and Refugees. She carried the primary responsibility for the project. This involved coordinating and chairing all meetings of the National Advisory Panel, coordinating travel to and interviews in all regions, conducting interviews with parents and service providers, analyzing the interview data, collecting resources, taking photographs, leading the design of all project materials, writing the project materials, presenting on the project at several conferences, and coordinating and conducting workshops based on the project materials. 



 Maureen McDonald
Parkdale Parents' Primary Prevention Project

Maureen McDonald is the Project Coordinator for the Parkdale Parents' Primary Prevention Project. Please see the description of the project in this section of the toolkit. Maureen was involved in writing the proposal for this project and also acted as a supervisor to the Project Coordinator. 

 Alejandra Priego
Women's Health Centre

Alejandra Priego is the Spanish-speaking Health Promoter at the Women's Health Centre. Her experience as an immigrant woman and mother of two has guided her groundbreaking inspiration, visioning, knowledge and critical thinking from the initial proposal writing to her input into the practical resources developed out of this project. 

Attachment

The majority of this overview of attachment is based on workshop materials developed and used by Crisci, Kussin and Mayer, Consultation, Counselling and Training⁵. Where other sources have been used, the references are noted.

What is Attachment?



Attachment is the deep emotional bond formed between children and one or more adults, usually a parent or caregiver. This attachment provides a sense of security to children and allows them to explore their environment, returning to the adult during periods of distress. Development of this emotional bond or attachment involves parents providing love, nurturing, trust, safety, and respect to their children, and sensitively responding to their children's needs. The effects of early attachment have been shown to last a lifetime.

- Attachment is a deep and lasting connection that develops between a child and specific caregiver



⁵ For more information on Crisci, Kussin and Mayer, Consultation, Counselling and Training, please consult Section V of the toolkit (Culturally Responsive Resources).



(mother, family member, or community member) in the early years of life, particularly between the ages of 0 and 5 years.

- Attachment is a mutual relationship between a child and caregiver. Children instinctively reach out to a caregiver for security and protection; caregivers instinctively protect and nurture children.
- The mutual responsiveness of the attachment relationship, where caregivers respond to children's needs, and children respond to caregivers' care, creates the secure base for early development.
- Attachment influences early brain development, which has an impact on a child's lifelong abilities to regulate thinking, feelings and behaviour.

What are attachment behaviours?

Attachment behaviours are those behaviours that children use to seek response and maintain closeness to their caregivers. They include crying, grasping, clinging, reaching, crawling, smiling, and vocalizing. These behaviours promote the physical safety and survival of children⁶.

What are attachment practices?

Attachment practices are those practices that caregivers use to develop a deep and lasting connection with their child by responding to their children's attachment behaviours.

What is Secure Attachment?

Secure attachment occurs when children have caregivers who:

- are available
- are in tune with their needs
- affectionate
- demonstrate pleasure in their interaction with their children
- are able to comfort their stressed children

How does a securely attached infant or child behave?

Secure children:

- want to be close to their caregiver
- keep in physical contact with their caregiver

⁶

⁶ Harwood, RL, Miller, JG and Irizarry, NL. 1995 *Culture and Attachment: Perceptions of the Child In Context*. New York, NY: The Guilford Press.



- continue to interact with their caregiver
- may try to engage their caregiver from a distance if they do not seek closeness and physical contact
- settle down quickly when the caregiver is present and are able to go back to exploring

What is insecure attachment?

Insecure attachment occurs when caregivers are not available, are not in tune with the needs of their child, are not affectionate, are unable to demonstrate pleasure in their interaction with their children, or are unable to comfort their stressed children. Insecure attachment takes on different forms depending on the extent to which primary caregivers neglect to respond to their children.

Anxious/Ambivalent attachments occur when primary caregivers are inconsistent and unpredictable. They are responsive to their infant's needs sometimes and non-responsive at other times. This results in children who long for closeness but do not trust that their caregiver will be available. As a result, the children become extremely distressed when separated from their attachment figures but are not easily comforted when their attachment figure returns. The children are anxious about leaving their attachment figure to explore their environment, and thus do not develop independence.

Avoidant attachments occur when caregivers are rejecting and unavailable. They do not respond to their child's needs at all or respond in indifferent and hostile ways. This results in children who deny their own needs and avoid interaction with their caregivers. The children may seem independent but this is based on the belief that they have to be because they cannot depend on their caregivers.

Disorganized/disoriented attachments occur when caregivers are abusive or severely neglecting. This results in children who display both avoidant and ambivalent attachment styles. They are hyper-vigilant to abuse at times, while freezing and becoming disoriented at other times. They either reject their attachment figures or try to please them, sometimes alternating between the two behaviours.

What are the phases of attachment?

Attachment occurs primarily over 3 phases:

1. Undiscriminating Responses (0-3 months)

The newborn infant is a mass of poorly organized neurological responses. The brain's function at this time is to organize and control physiological states and behaviour. The infant communicates its need for responses from an external figure by such behaviour as sucking, grasping, crying and other autonomic responses. The caregiver can help the infant's brain regulate the body by responding to these



biological messages in comforting and appropriate ways. In fact, it is critical to the survival of the infant that the caregiver be perceptive of the signals and provide for the biological needs. This mutual interaction in the beginning of life forms the basis of attachment.

2. Discriminating Behaviour (3-6 months)

The infant begins to focus on preferred caretakers, typically the mother. The interaction between the infant and mother becomes more lasting so that each learns about the other. The mother becomes more attuned to the infant's needs and more in touch with the baby's responses. The baby learns some mastery over its biological needs and its production of signals to caregivers in its environment. Attachment feelings increase as the infant associates its needs being met by the availability of the caregiver.

3. Formation of Secure Base (6-24 months)

The infant has both a need for closeness and proximity to a preferred caregiver and the growing need for autonomy. The baby has learned to signal its needs to the preferred caregiver, who responds appropriately and sensitively. As the infant develops the ability to crawl, it will begin to explore its environment but use the caregiver as its safe base. The infant needs to know its primary caregiver is available to provide security and protection in order for it to move away. Infants also display clear preferential behaviour. They will protest fiercely if separated from their caregiver. Prolonged separations have detrimental effects at this early stage.

Toddlers have a greater need to explore their environments and become more autonomous. At the same time, they have limited self-control and need their caregiver to set limits and provide guidance. This interaction of testing and exploring by the infant and providing limits and safety by the parent is the establishment of self-control, social learning and morality in the child.

How does attachment influence later development/behaviour?

As children and their preferred caregivers interact over time the child internalizes the relationship between himself and the caregiver and develops an internal working model. The internal working model includes the child's perceptions about him/herself and expectations of the attachment figure. It affects how the child interprets events, stores information in memory and perceives social situations. Internal working models act as templates in the brain for future relationships.

The internal working models that correspond with the different types of attachment are as follows:

Secure Attachments

- Caregivers are trustworthy and reliable.
- I am worthwhile and lovable.
- My world is safe and offers pleasure.
- I deserve to have my needs met.



Ambivalent Attachments

- Caregivers are unpredictable. They may be nurturing and protective or hostile and rejecting.
- I never know what to expect and am always anxious and angry.
- I cannot leave and become autonomous. I may miss a nurturing time.
- If I can figure out how to get my parent in a giving mood I will be nurtured and protected.

Avoidant Attachments

- Caregivers are rejecting and punitive.
- I have to be vigilant to protect myself.
- If I deny my needs for nurturing and closeness, I will not be hurt and rejected.
- If I comply with the needs and demands of my caregiver I will not be punished and rejected.
- If I deny my needs and take care of my caregiver, I will be loved.

Disorganized Attachments

- Caregivers are severely neglecting and physically or sexually abusive.
- I do not know how to get my needs met at any time and feel hopeless. I have to protect myself but do not know how to do this.
- I have to be either very clever to develop strategies for protection or remove myself from reality.

How do internal working models impact
on a child's relationships throughout his/her life?

Internal working models operate as core belief systems about the world. These belief systems are rigid, fixed and operate outside of conscious awareness. Internal working models are projected onto all relationships, including those with teachers, child workers, therapists, foster parents, adoptive parents, siblings and peers. Because the models operate outside of conscious awareness, modifying them is very difficult.



Cross-cultural Attachment



What is culture?

- Culture is such a broadly used term, that it is difficult to define clearly.

For the purposes of this project:

Culture is a framework of beliefs and values shared by a group, that influences the perception and interpretation of experiences by individuals within that group, as well as their goals for action and their actions themselves. These frameworks are constantly changing and being revised.



- The fact that people are often unaware of the beliefs and values that guide them makes culture a very powerful influence on behaviour.
- Cultural frameworks can influence individuals' perception and interpretation of experiences in different ways, so not all members of one particular cultural group will necessarily behave in exactly the same way under the same circumstances.
- Understanding the cultural frameworks that guide people's behaviour gives us the opportunity to understand behaviour rather than to judge it based on our own cultural framework.
- It is important to recognize that there are challenges to the dominant cultural practices from within each cultural group. As a result of these challenges and changing circumstances, cultures evolve over time.

Why look at attachment practices across cultures?

- Parents' attachment beliefs, values, and practices differ around the world.

Although the attachment relationship is universal, parents' attachment beliefs, values, and practices differ around the world. There is an increasing number and increasing diversity of immigrants and refugees coming to Canada from countries where attachment practices may differ from those which are dominant in Canadian health and social service milieus. When serving immigrant and refugee families it is important to consider whether the variation in their attachment relationships, is based on differing beliefs and values related to parenting, as well as different goals for each stage of a child's development.



It is also important to remember that there are always variations in people's understanding and interpretation of beliefs and values espoused by their cultural group as well as the extent to which they follow those beliefs and values. Parents need to be asked about their beliefs, values and personal experiences in order to get an understanding of their behaviour and most effectively promote best practices in attachment.

- A cross-cultural understanding of attachment can influence how we assess parent-child interaction and child development.

Our assessments need to be non-biased in order to accurately understand what is happening within a family and how it is influencing child development. This will help us to know when support and/or intervention is necessary, and how best to support families.

- We can support families in reducing the impact of migration and resettlement in Canada through strengthening their effective practices and in helping them to acquire new ones.
- We can learn something from different positive practices that can be applied in our overall programming and service delivery.

Immigrant and refugee families come to Canada bringing with them a wealth of experience, knowledge and skills regarding child-rearing practices, that in many cases have been traditionally passed down from generation to generation. Many of these practices are positive attachment practices that appear less commonly in Western culture. It is important not only to acknowledge and validate these positive practices but to learn from them and apply them in overall programming and service delivery to support families. Advocating a range of cross-cultural best practices can only benefit children and families.

One of the greatest contributions to date of cross-cultural studies on attachment is the understanding that in both Western and non-Western cultures, children have relationships with several attachment figures, rather than just one. Since social networks have such a large role in children's growth and development, they must be considered in our assessment of attachment relationships.

How does culture influence attachment?

- Culture influences the value that mothers, families and communities place on children, as well as the value that mothers, families and communities place on the role of being caregivers.

In many cultural communities, children are highly valued as is the role of caregivers. As a result, there are many similarities in attachment practices across cultures.

- Parents' beliefs and values regarding child development, and the roles of parents, influence the choices they make about raising children within the constraints of their culture.

There may be cultural differences in the long-term goals that mothers, families, and communities have for their children's development. These cultural differences influence their expectations at every stage of their children's development. Cultural differences also influence the attitudes and behaviours of caregivers, thus affecting how they raise and relate to their children.



- Children may display different attachment behaviours according to what is considered culturally appropriate within a particular community.

Although, there is a strong intuitive component to attachment relationships, children learn to behave in a way that gets them what they need. Children may use different behaviours to signal distress, according to what they have learned gives them the response they need. Infants may also demonstrate secure attachment in different ways depending on the expectations placed on them and the understanding of secure attachment within a particular cultural group.

- Parents may use different attachment practices to build relationships with and respond to their children.

Despite the intuitive and universal component of attachment relationships, mothers and families interact with and respond to their children in different ways according to their beliefs and values and what is expected in their cultural environment. Many of these practices have been passed down for generations because they result in positive attachment relationships between children and their mothers and families, and because they adequately respond to children's needs.

Why look at attachment in immigrant and refugee families?

- To enable us to provide better support to immigrant and refugee families and all families.

When we understand the similarities and differences in perceptions of attachment and in resulting attachment behaviour exhibited by infants and attachment practices used by mothers and families, we can better support immigrant and refugee families to minimize the negative impact of migration and resettlement. We can also learn from immigrant and refugee families in order to provide better support to all families.

- To create a better understanding among health and social service providers which will inform their intervention strategies in situations of alleged child neglect/abuse.

At times, positive attachment practices that are different from generally accepted Western attachment practices (eg. carrying infants in slings), are misunderstood as signs of neglect or even abuse. While never leaving a child at risk, health and social service providers need to carefully consider the behaviour they see as well as its context. In some instances, the impact of racism and a sense of having to 'prove' themselves, in addition to the stress of migration and resettlement, can influence newcomer parents to be extra strict in disciplining children. Assessments of allegations of child neglect or abuse always need to take cultural factors into consideration in order to most effectively intervene.

- To recognize and validate attachment practices used by immigrants and refugees.

Immigrant and refugee mothers/families need to be asked for their perceptions of optimal parent-child interaction and relationships, and subsequent child development. They also need to be asked for their perceptions of their strengths, the challenges facing them, and their need for support. The best way to improve support and services for immigrant and refugee families, as well as to learn from their experience, is to ask them for their perspectives.



Immigrant and refugee families are usually told what they are doing wrong and what they need to change, rather than what they are doing right and should continue. The positive attachment practices used by immigrant and refugee parents need to be shared, validated, encouraged, and learned from in order to improve overall program and service delivery in community-based agencies.

- The impact of migration and resettlement on attachment needs to be considered in order to provide adequate support to immigrant and refugee families.

The challenges associated with migration and resettlement often require additional support for immigrant and refugee families. The fact that parents are so preoccupied with whom and what they have left behind in their migration to Canada, along with the need to survive in their new environment, influences the extent to which they are able to respond to the children with them. At the same time, children are stressed by the extensive changes they are experiencing in their environment and turn to their parents in time of distress, only to find that they are less able to respond. This results in insecure attachment, which can have a negative impact on child development.

- We can learn from the resilience of immigrant and refugee families.

Often immigrant and refugee parents and children display remarkable resilience in the face of great challenges to their attachment relationships. Effective strategies for maintaining effective attachment behaviours and practices in the face of challenges can be learned by parents and children facing other types of challenges to their attachment relationships, and in life in general.



Section II

Similarities and Differences in Attachment Beliefs, Values, and Practices

The results of our research support our anecdotal program observation to indicate that there are similarities as well as differences in attachment beliefs, values, and practices amongst parents from different countries of origin. The discovery of similarities is not surprising as it is well accepted in attachment literature that the infant-caregiver attachment relationship, including children's need for responsive parents, and parents' desire for securely attached children, is universal. The specific attachment behaviours used by children to get the responses they need, and the attachment practices used by parents to promote secure attachment vary across cultures.

In order to understand the similarities and differences in attachment beliefs, values, and practices, it is important to consider: a. Factors that influence attachment beliefs, values and practices; b. Attachment beliefs and values; and c. Best practices with respect to attachment.

A Factors that Influence Attachment Beliefs, Values, and Practices

In every country there is a diversity of cultural groups and within each cultural group, there is further differentiation. Even in countries where certain cultural groups are predominant, there may not be a consistent and uniform pattern of parenting or attachment. This diversity within each cultural group can be explained by the various factors that influence attachment beliefs, values and practices.

Parents who took part in the research identified a number of factors that influence attachment beliefs, values, and practices. We describe these below, and offer some preliminary observations on their program implications.



Parental Intuition

There is a component to parenting that many parents from different countries expressed as being instinctive. This component of parenting does not involve consulting other people, whether family or professionals, or literature.



This instinct is part of a definition of attachment offered in theoretical literature:

Attachment a reciprocal relationship between an infant and caregiver. Infants **instinctively** reach out to a caregiver for security and protection; caregivers **instinctively** protect and nurture infants. This mutual responsiveness is what creates the secure base for early development..¹



Parenting practices that are solely based on instinct, however, are not always reliable nor particularly open to change. In addition to following their instinct, parents spoke of learning parenting practices from a variety of other sources.

¹

Crisci, Kussin, and Mayer, Consultation, Counselling, and Training. 1999. Workshop Materials.



Learned Parenting Practices

Learned Parenting Practices refer to parenting practices that are learned informally or formally. Many parenting practices are learned **informally** through experience, family, friends, and community. Parents interviewed talked about informal learning as being the main method of learning about parenting in their countries of origin. Interviewees talked about learning from family, especially their parents. Many of them learned from experience at a young age, looking after younger siblings, cousins, nieces, and nephews, and then turned to family for advice when they began to have their own children.

Women who become new mothers after arriving in Canada express a feeling of being lost in terms of how to care for themselves and for their babies, because they do not have the same extent of opportunity to learn from the experience of their mothers, family and community members. They therefore have little confidence about their ability to parent. Mothers who arrive in Canada with children may have more confidence because they have been able to learn from their mothers, families, and communities, as well as from their own experience, prior to coming to Canada. Many mothers, whether their children are born in Canada or in their countries of origin, consciously or unconsciously mimic what they learn as children from their mothers, families and communities.

"I learned from my parents. I am teaching them what I saw my parents doing. I learned from my mum how to carry my child with a sling and sing to her." (Program Participant, Vancouver, BC)

Many mothers expressed a preference for this style of learning, that values experience over formal education, and the passing down of information verbally rather than in written format.

In the absence of traditional family support and support structures, mothers learn a lot from informally sharing their experiences with each other. Service providers consulted have discovered that peer support, including the provision of informal gathering places for mothers, is a particularly powerful format for learning. At the same time, some mothers recognize the limitations of informal learning. They recognize that although they may have children, they do not necessarily have responses for everything that might arise.

Formal learning is the learning that takes place in school, classes, from professionals, or from reading. Parents interviewed referred to formal learning as the main type of learning they experience in Canada. Many of them turn to formal learning because of the lack of informal support they have in Canada. For some of them, this style is not appropriate because of the extent of their experience, along with the difference in their experience or simply because the style of learning is foreign to them. They are used to seeking support on an ad-hoc basis from family and friends, whose knowledge is based on personal experience.

"The average parenting program is presented in English, is patronizing, and geared towards the middle-class mainstream Canadian population. It doesn't work for example for a woman from Sudan with six kids. She has a lot of experience." (Service Provider, Halifax, NS)



But most immigrant and refugee mothers do need some support to replace the support they have lost through migrating to Canada, as well as to help them adjust to life as parents in Canada. Some mothers talked about learning how to care for and build relationships with their children from programs hosted by community-based agencies, and the crucial role agencies play as a replacement for families that are not there to support them.

*"...we have no relatives and no cousins here...and the agency gives us lots of help and lots of confidence to take care of our babies...this is very helpful for us and gives our babies a better future. When they grow up, they will know more things and they will feel more comfortable to stay in Canada. The children and the mothers too."
(Program Participant, Toronto, ON)*



Mothers talked about enjoying learning about parenting by reading in their country of origin, as well as in Canada. They like to have written information in the form of pamphlets, brochures or handouts, to refer to at a later date, so that they do not forget anything. Parents pointed out to us that the availability of information in their first language is particularly helpful.

Parents' Own Attachment History

Women who seek out services are almost always doing so in order to make changes in their lives. This is perhaps especially true in the area of parenting. While some mothers who participated in the research had very positive loving parents themselves whom they tried to emulate in raising their children, others talked about the challenges of leaving behind family histories of poor parenting.

*"Care and love...the best example was my father - he represented something great for me. I said, he must come from a very great culture and country to be kind and loving and understanding, and he gave me confidence. So I loved him. I love him very much. Because he gave me love, he gave me care, he gave me attention."
(Program Participant, Halifax, NS)*

Some of the mothers interviewed were abandoned by their parents and raised by grandparents and other relatives. Others were neglected and/or abused by their parents. Some referred to their parents practising excessive discipline and others to their parents not having any time for them. They



also talked of their parents not showing affection to them, being overprotective of them, and not being involved in their school activities.

"What my parents did was not a model to be followed. Everything that my parents did was not good for me. For example, insulting me, abusing me emotionally and physically, and giving me low self-esteem." (Program Participant, Edmonton, AB)

Many of those mothers expressed the desire to avoid parenting in the same way as their parents did, a way that they recognized had been detrimental to them, despite the inherent challenges in doing so.

"It's an ongoing battle to fight that negativity. You try to be positive with your kids but it's hard because it's in you. You're fighting with what you grew up with." (Program Participant, Montreal, QC)

Some mothers recognize the deeply ingrained negative patterns that affect the development of secure attachment with their children. They also recognize the progress they have made in overcoming these negative patterns. They emphasized the importance they placed on being there for their children, and showing their children affection, because they missed that themselves.

"When I was a child, I knew that my parents loved us, but they never showed us, never hugged us, never said, 'I love you'. You need to show that love to your children – pay attention to them, listen to them, give them a hug, tell them that you care about them." (Program Participant, Edmonton, AB)

Accepted Cultural and Societal Parenting Norms

Attachment practices are also influenced by what is considered acceptable in the environment in which parents and children live. Another way to understand this is that there is a dominant culture that is seldom questioned, based on who occupies positions of power in institutional and cultural life. People generally feel some extent of pressure, whether it is explicit or implicit, to conform to the dominant cultural norms.

For example, carrying babies in cloth slings is a common practice in many countries so it is comfortable for women to do so. Breastfeeding in public is also widely practised in many countries around the world, so women don't think twice about doing it. In Canada, however, those practices are not as common, so mothers talked of feeling uncomfortable, or being made to feel uncomfortable, carrying their babies in cloth slings, or breastfeeding in public.



"If I see that she is not happy, I put her on my back. At home I can do that. On the street here, the police stopped me. I explained that we do this in my country. She didn't want to understand me. At home it's normal." (Program Participant, Hamilton, ON)

Some mothers feel so strongly about the benefits of their cultural attachment practices that they continue to use them despite the fact that they are in an environment that does not support them.

"I was advised to stop breastfeeding at only 5 months old here because it is inconvenient to breastfeed on the bus and subway. I don't care about that. Back home, I did it until my children were 2 years old. Maybe people here feel embarrassed, but I don't." (Program Participant, Toronto, ON)

Religion

Spiritual practice is strongly interwoven with most cultures of the world. While not every person understands the sacred in exactly the same way, and significant numbers of people around the world remain agnostic, many parents who participated in our research spoke of the important role spirituality and religion played in their parenting practices. Mothers talked specifically about keeping their culture alive by teaching their children their religious traditions.

"I want her to retain her culture and also to integrate somewhat into Canadian culture. I want her to keep my culture alive. Religion is very important to me." (Program Participant, Edmonton, AB)

Some mothers talked about the stress of living in a country as a religious minority, particularly if there was religious conflict in the country. They referred either to their experience in their country of origin, in a country they lived in en route to Canada, or within Canada. The stress they experience is related to a rejection of, or lack of support for their beliefs, values and practices in the larger society in which they live. For example, parents from the former Yugoslavia talked about the difficulty of staying in a country in the midst of ethnic conflict, largely based on religious differences, when their own families and communities had been of mixed ethnicity and religion.

Some Muslim parents, from various countries in Africa and Asia, talked about their religion dictating that they do not eat pork, consume drugs or alcohol, swear, fight, and for some of them, that they dress in a certain way. They try to transmit these values to their children. They find all of these things difficult to enforce, however, when their children are surrounded by peers who do not necessarily follow the same rules. Some mothers become more strict in order to ensure that cultural traditions are kept alive. Other mothers become more lenient about how their children dress because they do not want their children to be left out or singled out and harassed.



Low German speaking Mennonites from Mexico who were interviewed, talked about the intense conflict they felt. The way they speak of their particular situation exemplifies a dilemma facing many parents whom we serve in our agencies. They have been separated from mainstream culture both in Mexico and here in Canada. The consequences of not following religious dictates are high for them. They risk excommunication if they go against them. So, for most of them, their goals for their children involve wanting them to be good people, people who have a moral life and are not disobedient to their family, community, or church. At the same time, their children want to dress and do things like the majority of the children at their schools. And some mothers want them to have that freedom, in order for them to be comfortable and to be accepted in the wider community. They express the experience of a clash of cultures and their struggle to be both flexible and protective of aspects of their culture.

"I let them dress differently, much differently. Some people [in our community] here don't let them dress differently. Clothes won't do anything to your soul. If I knew what dress to wear to go to heaven, I would always want to wear that. They go to public school and they want to be dressed like others. I tell them, 'Your legs don't have to freeze - you can wear pants.' The way that people dress up doesn't mean anything to me. I would just like my kids to be warm. I had to go to school barefoot and walk on ice." (Program Participant, Waterloo, ON).

A Muslim father from Algeria talked about his important role in teaching his religion to his children, and guiding them to follow the right path. He mentioned that the teachings of the Prophet Muhammad regarding parent-child relationships are divided into seven- year periods.

"From birth to 7 years, parents are there only to play with their children. From 7-14 years of age, parents have to focus on teaching their children. From 14-21, parents are supposed to become friends with their children, and then after 21, parents should let children fly by themselves." (Program Participant, Hamilton, ON)

A Muslim mother from Somalia talked about the emphasis of Islam on the parent-child connection.

"My religion is Muslim – the religion says that the parent-child connection is very important." (Program Participant, Vancouver, BC)

Parents from many countries in Latin America, Asia, Africa, and Europe talked about the importance of the church in providing support to them and their children. Some referred to the support offered to them by the church in their countries of origin. Others talked of the support they get from their church in Canada. For some of them, their church gives them a sense of community within which they can be together as family, and through which they can access practical learning opportunities for their children.



While spiritual practice was felt to be core to a sense of community, the transmission of culture and a source of practical and moral guidance in childrearing, mothers from various countries talked about the challenge of going to various places of worship because of the changes in their lifestyle in Canada. Many of them no longer have time to attend services and some of them do not have access to places of worship for their particular religious following.

Understanding these fundamental shifts in priority, which are forced on those who are new to Canada, helps us to design more compassionate programs that give women space to share across cultures the religious practices they had in relation to their children prior to migration.

Generational Change

Along with the fact that there is diversity within cultural groups, it is important to recognize that all cultures are dynamic. Beliefs, values, and practices are not uniform or stagnant. There is always an influx of new ideas into any culture. And there is generational change in all cultures due to global changes in society and family environment. In addition, changes may accelerate in a new country when people are exposed to many new and different ideas, while the new country itself benefits from new ideas and opportunity for change.

"Things are changing even in our countries...If you were with your parents and some visitors, you sat quietly, we didn't get involved in a conversation. Now we actually encourage our children to become involved in a conversation as a part of the group they are in...I think we spend more time with the kids and encourage them to be more confident and to learn." (Program Participant, Edmonton, AB)

Mothers talked about the need to question traditions, rather than just accept them. Many mothers talked about keeping some traditional practices and adding new positive ones while living in Canada. During the process of migration and resettlement, as parents leave behind what is familiar to them and adjust to their new environment, they are forced to reflect on and evaluate the beliefs, values and practices they hold, as well as the new ones that they are exposed to. This enables them to decide what beliefs, values, and practices to hold onto, what to give up, and what to adopt.

Some parents talked specifically about keeping old practices and adopting new ones with the primary intention of benefiting their children.

"I take whatever is good for them – religion, tradition - along with the new things I've learned. Whatever is good, I take." (Program Participant, Hamilton, ON)

Some mothers recognize that although they may be adding new practices to the way they parent their children, they do not have the same amount of time as their mothers did to give their children love and attention.



It is important that as cross-cultural learning takes place in our agencies, we not fall into the trap of reducing all difference to a stereotyped idea of a given culture. All cultural groups are subject to social change, political movements, and upheaval. All cultural groups are also stratified along lines of class, race, and gender that make one individual experience and define her/his culture very differently from another.

B Attachment Beliefs and Values

Although from a wide variety of countries of origin, and cultural groups, parents identified the common themes of respect, independence/interdependence, and freedom as being central to parenting.

Respect

Many interviewees brought up the issue of respect. Some felt that such respect was more valued - a more significant part of relationships between children and their parents, extended family, and community - in their countries of origin. This reflects the absence of the role of extended family and community in raising children in post World War II Central Europe and North America.

"Because you know in our country...it's not one person that really teaches you, it's the whole village. It's the whole village, everybody. You know, it involves everybody." (Program Participant, Montreal, QC)

Children are expected to respect community members and to listen to their advice, regardless of whether or not they are their parents or relatives. Mothers talked about the difference in Canada, where if an adult instructs a child that is not their own to do or not to do something, with the child's best interests in mind, the child will just respond, "Don't tell me what to do. You're not my mother." Most parents interviewed see this as disrespect, as well as the child not benefiting from community parenting.

Some service providers who are immigrant parents themselves feel that one of the good things about Canada is that children are encouraged to have their own opinions, something that is sometimes mistaken for disrespect in their communities.

"One of the good things in Canada is that kids are encouraged to be independent, kids are allowed to talk back to parents. They are allowed to have their own opinion, choice. Many parents confuse talking back with disobedience. It is good to obey with understand-



ing, not because of control. For children, having choice and being allowed to communicate is very important. A child talking back is not necessarily being rude, but just giving his/her opinion." (Service Provider, Edmonton, AB)

The concern that mothers expressed regarding the respect shown to them by their children may also be related to the shift in power dynamic within a family when children are the only ones who speak English fluently, and therefore act as the family 'gatekeepers' of information.

"There is a role reversal. Children speak English and their parents don't. Children have control over family dynamics because they have the information." (Service Provider, Vancouver, BC)

Respect was seen as something that must flow both ways in the parenting relationship.

"Love is very important in the family. You have to work together and if you have problems, to have meetings. I think children and parents are equal. Not like control. You control me and I control you. Just equal and friends. Friendship is also important." (Program Participant, Edmonton, AB)

Some mothers talked of teaching their children the importance of respect for all people, using this as a jumping off point for helping their children understand equality in society and respect for human rights.

"I teach my children to respect somebody whatever, how the person is. Small, big, or rich or poor...A human being is a human being." (Program Participant, Hamilton, ON)

"It's a better chance for them to have a good, well-recognized education and also when they grow to have their democratic rights. Because humans are respected here in Canada. Their rights. If you are a child, if you are a man or a woman, you belong to whatever ethnic group, you belong to whatever colour. So this is a dreamland which we hope will work out for our children." (Program Participant, Halifax, NS)

Other mothers expressed the regret that the same respect and rights that they struggled to teach their children are sometimes not afforded them as newcomer parents in Canada.



"Somehow I find the Western World doesn't respect our ways of parenting...and we have brains too. I believe that they should respect our culture and we should respect their culture...We should get respect from Social Services. When they have to come in, they should respect our culture...When you are loving parents and you are doing what is right, even though it's not the Canadian way, I think it should be respected." (Program Participant, Edmonton, AB)

Independence/Interdependence

The value placed on community parenting in many countries outside of North America is based on a fundamental difference in perspective regarding the importance of independence. Some parents interviewed feel that there is too much of a focus on independence in Canada, especially for young children. In Canada, most children sleep on their own from the time of birth, attend daycare soon after, and are encouraged to feed themselves and dress themselves from a very young age. In many other countries families often encourage their children to be dependent on them, to teach them the value of the interdependence of family and community members.

"Latin American parents want to protect their children and for them to be dependent on them. Canadian parents want their kids to be independent. My children suffer because of the different ways. In Canada, people stay alone. I emphasize to my son that he's not alone. I am there for him." (Program Participant, Vancouver, BC)

This difference in perspective on the independence of children causes anxiety and confusion, and parents reminded us that each child has their own path and needs to do what s/he is ready for, rather than merely to fulfil the expectations that parents and society impose on them.

"My oldest is two and a half so I don't think that he's old enough to do what he's expected to do here...but here I find that people are trying to do everything. You have to be toilet trained by three, you have to go to bed alone...It might work for some children, but I don't want that for my kids. I want them to be able to do what they want within reasonable limits." (Program Participant, Fredericton, NB)

Mothers talked of their fear of the future impact of the emphasis on independence in Canada. They are worried about their children leaving home at what they consider a very young age. In many countries outside of North America, children do not leave home until they are married, because family members are thought of as interdependent. And this interdependence is considered a prerequisite for health.



"...in our country, family bonding is very strong because most of the time we live together or at least close by, different houses, visiting every house... We don't feel like when you're 17 years old, you're on your own. We don't feel that way. [You're] not on your own. We feel like you have family - father, mother, sister, brother, grandfather, grandmother, those things, cousins." (Program Participant, Toronto, ON)

Many parents felt that there was not as much value placed on the relationship of children to their family and community in Canada as in their countries of origin. In their countries of origin, family, extended family, and community play a critical role in child development. Each person is thought to have something different and important to teach children. And the bond between a child and each member of the family and community is considered to be critical to the child's development.

This extended family role is particularly important when learning cultural values and practices is considered to be an important part of child development. Children are taught values important to their families and communities and are given an understanding of where they come from and where they belong.

Freedom

Many parents brought up the differences in the degree of freedom for parents and children between Canada and their countries of origin. Parents from different countries expressed varying perspectives of these differences.

Some parents feel that there is too much freedom for children in Canada. They feel that in Canada, children leave home at a very young age to live on their own, and they are groomed to do so, from an even younger age. In many other countries, children don't leave home until they are married, and while they are at home, they don't have as much freedom to make decisions for themselves.

"[In Canada] your teenagers also they are free. If you restrict them, they can walk out of the house and rent their own house. In our culture, a child, whether he is an adult, even if he stays until 25 years, 30 years, if he is not married, he will stay with his parents. Only when he gets married, he leaves the house. But here, if you are unfair with your 16 year old child, if he is feeling threatened, he will leave and go outside... I don't like it. I want to have full control of my kids." (Program Participant, Halifax, NS)

Giving less freedom to their children, is often connected to mothers' own feelings of freedom.



"Sometimes I feel like I am totally overprotecting them. Sometimes I need a little bit of freedom you know to do my own thing and to relax. Sometimes I want to be alone." (Program Participant, Toronto, ON)

Other parents feel that there is less freedom for both children and parents in Canada than in their countries of origin. In Canada, children do not have the freedom to go outside to play unattended, and parents don't have the freedom of time to themselves while other family members, or neighbours look after their children.

"There is more freedom there because of the weather and my family. The weather is better so children have the freedom to play outside. And I would have more time to myself because of family support." (Program Participant, Toronto, ON)

Some mothers feel that there is more freedom in Canada – parents have the freedom to parent in the way that they feel is best, and children are given the freedom to learn and develop rather than simply being told what to do and what not to do.

"In Canada this is very good. . . you let the kids develop, be free. But in our own country, mothers just tell the kid 'Just listen to me. . . I ask you to do this so you have to do this. No you cannot say no. Just do what I ask you to do.' " (Program Participant, Toronto, ON)

Other mothers referred specifically to the greater freedom for women and children in Canada than in their countries of origin.

"Canada is much better for me. It is better for the future of my kids. There is freedom for women here and for children." (Program Participant, Vancouver, BC)

Freedom of expression was also mentioned as an important part of feeling at home in Canada.

"To me home is happiness, roots, warmth, comfort and security and mostly. . . freedom of expression." (Program Participant, Fredericton, NB)



■ Best Practices with Respect to Attachment²

Because attachment involves the establishment of a deep and enduring connection between a child and the child's mother, family, or community member in the early years of life, it profoundly influences every component of a child's development.

Attachment practices are those practices that parents use to develop a deep and lasting connection with their child, and to respond to their infant's attachment behaviours.

Best practices in promoting secure attachment between children and their mothers, family or community members, include practices that encourage the emotional, cognitive, motor, language, and social development of children aged 0-5. When children are securely attached, they can devote their resources and energy to healthy development.

Most parents choose to raise their children according to the long-term development goals they have for them, balancing what they view as culturally appropriate with what is both possible and seen as appropriate in the environment they live in. It is particularly challenging for parents when what they have learned is culturally appropriate comes into conflict with what is considered culturally appropriate in the environment they live in. This is why the emphasis on cross-cultural best practices is so important in programming. It gives all parents, regardless of their cultural backgrounds, some guidance on what practices to continue and which to change in order to promote the healthy development of their children.

The use of particular practices to build relationships with and to respond to children's needs is based on parental beliefs and values, and the factors that influence these beliefs and values. As discussed in the previous section, parental beliefs, values and practices are influenced by parental intuition, learned parenting practices, parents' own attachment history, accepted cultural and societal parenting norms, socioeconomic status, religion, and generational change.

There are a wide variety of attachment practices that encourage the development of children aged 0-5. Some practices that differ from the North American norm can be especially beneficial to children's development, and should be considered as examples to be promoted to all parents. It is important to promote 'best practices' used by parents and families from around the world, in order to broaden attachment practices and parenting knowledge amongst all the parents we serve.

It is difficult to separate best practices into distinct categories because many have multiple benefits addressing different types of development and different stages of development.

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² Best practices with respect to attachment are those that promote secure attachment of children.



For the purposes of this toolkit, we have chosen categories based on the way parents described their strategies for promoting secure attachment, as well as what we thought would be most useful to service providers. The categories are as follows: feeding practices, carrying practices, sleeping practices, touch and showing affection, reading and singing practices, listening practices, playing practices, and teaching practices.



Feeding Practices

The role of caregivers, particularly mothers, in feeding their children was talked about frequently. Mothers talked about the importance of their role in breast feeding their children, as well as in preparing food for and feeding their older children. Breast feeding children, feeding solid food to infants, feeding children healthy food, and preparing older children's favourite foods, were described as ways of showing love to them, and caring for their physical and emotional needs.



"And even when he was small, even though I was working, I breast-fed him. With all my children. Even though I was working... a regular job, eight hours, when I came back, the first thing I did, I just breast-fed my kids. So, because we brought them to life, we have to be responsible for them." (Program Participant, Halifax, NS)

The word 'feed' was also used to describe other aspects of parents' roles in raising children: feeding children with knowledge, feeding children with love, feeding children materially, and feeding children spiritually.

"You can feed a child materially, give him whatever, give him a good life, a better life, a secure life, whatever. You're filling up the outside. But the spiritual life... it's a must. It's either I am, or I am not." (Program Participant, Fredericton, NB)



The importance of extended family support in feeding children in all these ways was stressed by many parents. Many of them talked about the presence of such support in their countries of origin, and the lack of such support in Canada, because of their separation from their families. Many mothers talked specifically about the postpartum support offered by extended family and the community, in their countries of origin.

"...me, my mother, my other brother, and then my brother who's now a father, and his wife, and her whole family, her two sisters, her mother, her father, so really a lot of people. And even though there were so many of us, there was enough to do. You know, when the baby is newborn and the mother has to be feeding her every hour." (Program Participant, Toronto, ON)



Parents emphasized the need for support from other people with experience.

"I got advice on breastfeeding from my mom, or maybe a friend. Of course someone that has had kids. Because they have already gone through that, so they would know." (Program Participant, Toronto, ON)

A mother from Somalia talked about the importance to her of feeding her children with her hand. She feels that they eat better when she does that. It makes sense that it is easier to be responsive to a child's needs with more physical contact with the child – this contact results in increased attentiveness to the child. The woman recognizes that at school, her children have to feed themselves, so she teaches them both ways. She also emphasized the importance of the whole family eating together on the floor or at the table. Feeding and eating time is a time to build family relationships.

"She's growing with my hand feeding her. She eats well when I feed her, not when she eats herself. When I put my son in a highchair, and put food in front of him, he doesn't eat. I don't know if he's had enough. In my lap, when I feed him with my hand, he eats well. I feel like he's eaten well, eaten enough." (Program Participant, Vancouver, BC)



Carrying Practices

One of the effective attachment practices that mothers from different countries talked about during interviews is carrying and holding their children, particularly their babies and infants. One couple who were interviewed talked about carrying and holding their 4 month old baby in their arms while walking and talking to him, as a way to calm and soothe him.

Other participants, primarily from countries in East and West Africa, talked about carrying babies and infants in slings on their backs as a general practice that is responsible for attachment. There is an understanding amongst these mothers of the potential for physical closeness to promote emotional closeness. The practice is often combined with singing.

"When you are a small kid, maybe they sing for you, most of the time they just carry you around. They carry you around...just sing for you and carry you around. Like in my country, they have a special way of carrying you around...on the back. So, maybe that's what made kids more close...they are close all the time with their mom."
(Program Participant, Toronto, ON)

There is also recognition of the importance of carrying children in promoting secure attachment by responding to a child's distress. Some mothers described carrying children in slings as a specific practice used to soothe infants.

"When my two month old is crying, I hold him on my back and sing to him in my language. I do this while I'm cooking and doing other things. He knows and he's quiet." (Program Participant, Vancouver, BC)

Sleeping Practices

Mothers who were interviewed talked about attachment practices connected to sleep.

Some talked about specific activities they do with their children, focussing their attention on them, before they go to sleep.

"Before sleeping, I read them stories, speak with them, play with them." (Program Participant, Calgary, AB)

Many also talked about sleeping with their children, as one effective attachment practice that they have retained in resettling in Canada. Some specifically talked about the positive feelings associated with sleeping with their young children, and the resulting positive effect on their relationships with their children.



"My 2 month old and 4 year old sleep with my husband and me. Having a child sleeping with you is a nice, gentle, good feeling. Here kids and parents sleep separately. There is no problem with my 2 little ones sleeping with me, and it promotes the relationship between a child and parent." (Program Participant, Vancouver, BC)

Mothers interviewed for the project show a clear and thoughtful understanding of the relationship between early attachment and sleep and nighttime routines. Their sense of difference from the mainstream in this regard is focused on the choice of sleeping in the same bed as their young children. This area of cultural practice can become loaded with anxiety and misunderstanding across cultural difference. Promoting understanding and non-judgmental sharing may free up some room for all program participants to benefit from a variety of practices.

Touch and Showing Affection

Touch was mentioned by many parents as an important attachment practice for them. Some talked of the importance of touch in the families they grew up in.

"I grew up with lots of touch in my family – you always hug, you always kiss, you're always in contact, physical contact, all the time." (Program Participant, Fredericton, NB)

Some mothers talked about the lack of verbal or physical affection in their upbringing.

"When I was a child, I knew that my parents loved us, but they never showed us, never hugged us, never said 'I love you.'... You need to show that you love your children." (Program Participant, Edmonton, AB)

Some mothers were only shown love by one parent.

"My mother was strong, she gave her life for us but didn't show us love. My father was expressive... What I show my kids comes from my father. The love he gave me is born again." (Program Participant, Calgary, AB)

Whether or not they grew up being with touch and physical affection in their family, many of them talked about the importance of touch in their relationships with their children.



"Hugging and kissing my child many times a day makes me happy." (Program Participant, Calgary, AB)

Some talked about learning in Canada about the importance of demonstrating and expressing affection,

"I learned from Canadians to hug and kiss them and say 'I love you'. That is the only way to let them know, understand that I love them. They hug, kiss me back and say 'I love you too.' " (Program Participant, Vancouver, BC)

Others talked about feeling that physical affection is not as accepted in Canada as in their countries of origin.

"In my country, children are held – you go to them and soothe them. I was told here to leave them. It tore me apart." (Program Participant, Fredericton, NB)

Some parents spoke specifically about learning about the importance of and the techniques of infant massage in their countries of origin, and then practicing infant massage with their infants in Canada.

"I learned from my mother about the importance of massaging my baby once a day until he is one month old. So, I am massaging him every day." (Program Participant, Toronto, ON)

One mother talked about using massage as a way of responding to her children when they are sick.

"When they are sick I hug and massage them. I never say 'You have to take this medicine and sleep.' They feel it. I do it because it's my responsibility as parent. I feel the connection." (Program Participant, Vancouver, BC)

Nearly all the parents we spoke to recognized the need for safe and soothing touch to be a building block in their child's development. This was also true for parents who have not experienced safe touch themselves – those who were either abused as children or who did not experience touch at all. A significant number of mothers spoke of a tradition of infant massage, an attachment practice which has a long history in many countries, and which is only beginning to be promoted as a best practice in North America.



Reading and Singing

Most of the mothers who were interviewed mentioned reading as an important attachment practice. One mother talked of initiating this practice during pregnancy.

"I started reading to him when he was in my tummy." (Program Participant, Toronto, ON)

Some mothers talked of encouraging their children to read in order to soothe them when they are upset.



"Even when he's upset, I just tell him to read a book and he's happy." (Program Participant, Toronto, ON)

Many mothers who were interviewed stressed the importance of reading and singing to their children in their family's mother tongue in order to pass on their cultural identity to their children, to teach them cultural values, as well as to teach them language skills.

"So I spend time with them evenings, and I'm teaching them their language. They have to speak it at home. We have cassettes, songs in their language and all these things. And we listen to all those things so the kids do not forget their language too." (Program Participant, Halifax, NS)



"So, because we brought them to life, we have to be responsible for them. Everything. We have to give them love, attention. Discipline also. And the language... because it's very good to be bilingual. And also to understand me. Because learning the language is learning the culture. So if I don't teach him, after ten years he'll say 'Mum, what are you saying? What are you doing?!' No. He has to be a copy of me. Of what we are." (Program Participant, Halifax, NS)

These practices become especially important for parents who want to retain aspects of their culture, and pass on their cultural identity to their children in an environment different from the one in which they were raised. Many mothers have developed innovative strategies to encourage their children to use their mother tongue.

"We try to speak Chinese with them at home. And I'm not worried about them picking up English. They will pick up English... when they start school, have friends... But I'm worried about them losing the Chinese language. They can understand but they are too shy to speak because they know they have an English accent... So I have to encourage them to speak. I try to use a better way, or to make it interesting because they don't get to use Chinese here, especially in Halifax... And I try to give them some Chinese movie, Chinese book. I tell them the beginning of a story and they have to read a book in Chinese to know the ending. This will encourage them to read the book by themselves, if they want to know the ending of the story. I can't just force them to do exercises like in school because I don't want them to lose interest." (Program Participant, Halifax, NS)

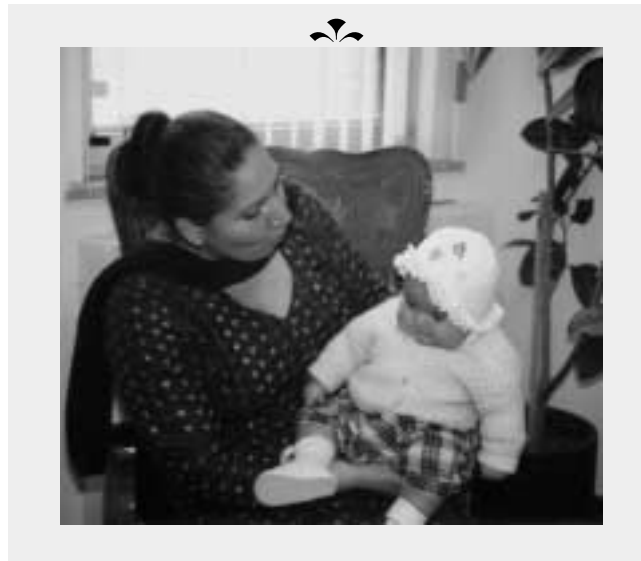
In addition to promoting the learning of their first language and culture, mothers talked of the importance of telling stories that reflect their families' experiences in migration and resettlement. Telling such stories promotes children's attachment with their extended family, who are part of their lives, whether or not they are able to see them on a regular basis.

"But a lot of time still I spend with my children. Like my daughter, everyday I tell her, I show her the pictures, this is my father, my sister, they live in Africa. They speak French, they speak Swahili. You must know because when you go there, you must speak to my father. He doesn't know English. Sometimes I call my father and she talks to him back in Swahili, great. And she asks me 'Mum, when will we go to see your Daddy? I'd like to see your sister.'" (Program Participant, Halifax, NS)



Mothers also sing songs in their first languages that reflect their families' values, particularly the importance of their children's relationships with their extended family. Mothers often sing specific songs intended for children, and songs for specific purposes (e.g. soothing their children, putting their children to sleep, playing with their children).

"I sing songs from home, play cassettes from home. I sing in Ewe, my dialect. I would like her to understand my dialect. I read books from my country to her, stories in Ewe. I sing songs from church, from our culture, that are especially for children. Some are from



family celebrations such as weddings. If she cries, I sing a special song. 'I am with you, don't cry. Your father is coming, don't cry. You have grandparents in Togo, don't cry. You have aunts and uncles in Togo, don't cry...'" (Program Participant, Hamilton, ON)

Listening

Many mothers talked of the importance of listening to their children in order to develop relationships with them, and to demonstrate their love for them. Some mothers referred specifically to the importance of active listening.

"I make sure that I actively listen. Communication is key." (Program Participant, Montreal, QC)

Some mothers mentioned the particular importance of listening to their children when they have problems.

"I listen to them, to their grievances, to their feelings." (Program Participant, Calgary, AB)



For some mothers, the importance of listening to their children is highlighted by their children's efforts to communicate their need for attention.

"My daughter, she always says, 'Look at me. Look at me.' Today, it was so funny – she was talking to me, and I said, 'Mm-hmm'. And she said: 'Mummy, please talk to me.' I said, 'Okay. What do you want me to say?' But they need that attention from you. They say 'You're not listening to me, are you?' "
(Program Participant, Edmonton, AB)



"I'm going to add I think from my own experience love and care and also to listen to your child. Because I have older children...and one time I was fighting with my eldest son and he told me, 'You are an excellent mother but sometimes you don't listen to me.' And he put the blame on me. So you have to be careful. Sometimes you are in a rush to go to the office or something...he's fighting with his brother and you think 'okay, okay'...and you rush to your office. And then he tells me 'Mum you didn't listen to me and that was hurting me.' But to listen to your child, giving him time, is very important." (Program Participant, Halifax, NS)

Some mothers talked about listening as a component of spending quality time with their children, and thus promoting secure attachment.

"I think being with them is one of the – it is not only being with them because sometimes it's not the time, it's the quality of the time you spend with them and living for them, you know. I'm trying to do what I have to do; going places for the children, doing things before they get home, because I want to take the time to ask them, when they come home from school, 'How was your day? Did you have any problems?' and listen to them, and discuss with them, you know, if something is wrong. Guide them..., and because I understand them they are very attached to me." (Program Participant, Toronto, ON)



Mothers from a variety of backgrounds spoke clearly of listening as a cornerstone of building a relationship with their children, and were equally clear that a stressed and hurried lifestyle is not supportive of their desire to listen well to their children.

Playing Practices

Many mothers identified playing as one of the attachment practices they use.

"I play with them – whatever they want to do." (Program Participant, Calgary, AB)

Mothers use the word 'play' to refer to many different activities.

"I spend time with them drawing, painting, reading, playing with dolls, coffee cups, balloons, and balls." (Program Participant, Calgary, AB)

The most important aspect of playing with their children is the quality time they spend with them, and the attention they give to them.

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"We do crafts, play games together, watch TV together, go to the park together. I make sure that in every day I have my quality time to do one-on-one or one-on-three with them, and I am not in the kitchen, and they are behind me playing on the table, and actually I am doing nothing." (Program Participant, Edmonton, AB)



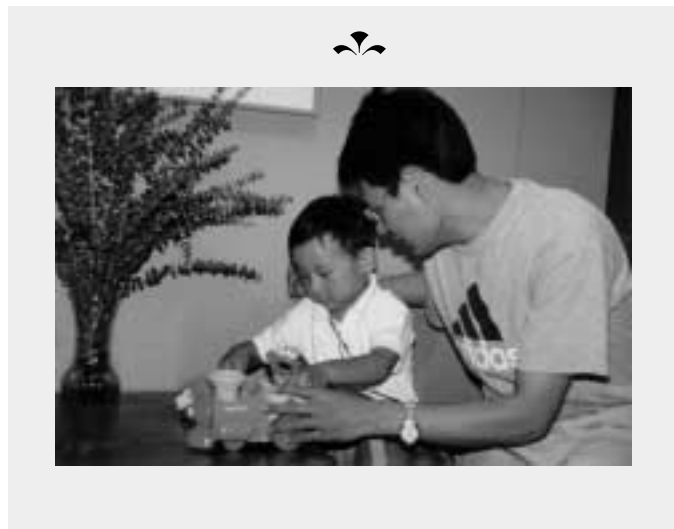
Some mothers talk specifically of sacrificing the need to do housework, in order to spend quality time with their children.



"Your children will never remember how clean your house is, but they will remember how much you played with them." (Program Participant, Edmonton, AB)

Others recognize the importance of parents playing with children because of their families' migration experience, which often entails the loss of family, especially the separation from or limited interaction with one parent. In addition, children often do not have the opportunity to play with other children in the same way they would in their countries of origin³. Mothers fill the empty space within their children by playing with them.

Mothers described the challenge of fulfilling the role of playmate both because of other responsibilities and because they are not accustomed to it. It is a role that they have not learned from their own experience or from the environment they grew up in. It is a role that may not be accepted within their cultural community.



"Trying to act younger is considered a bad thing there. When I came here, I didn't know that I was supposed to play with him. He was one and a half years old and he wanted me to sing to him. The speech therapist asked me, 'Do you read to him?' I said, 'No. It was never done to me.' There, children play with other children. Here, I was the only one who could play with him. It was so embarrassing for me to act like a child. I saw other parents here playing with kids in park, and seeing that he didn't have friends and thought that he was alone was so painful for me, that I started to play with him. But in the beginning it was very hard for me to act like a child. That is a huge difference between there and here." (Program Participant, Halifax, NS)

Other mothers did learn the importance of their role as playmate from experience.

"From birth to seven years, parents' role is only to play with their children. I sit and play with them and they love it." (Program Participant, Hamilton, ON)



Mothers talked about taking advantage of the space, activities, and resources of drop-in-centres.

*"When they were small I was in drop-in centres every day with them, every day, because I was living in a one bedroom apartment. I didn't have space for them over there...so I was with the kids in drop-in centres every day, and they have some beautiful activities in there. So I was doing crafts with them. I was playing with them in the summer. They planned so many activities too, so we were on the beach together, and not only with my kids, they were always with different kids too. That is important for them to grow and develop."
(Program Participant, Toronto, ON)*

Working-class mothers, whether before or after immigration, struggle to practise what they know to be good attachment behaviours due to lack of time and resources. Some have to overcome multi-generational stresses of this nature, while for others passing down their own experiences of play time between parents and children simply requires access to resources.

Teaching Practices

Teaching is another attachment practice that was talked about by many mothers. The important role of teachers in children's lives, was emphasized by most parents.

*"I tell them that they should always respect parents and teachers. They show us the way."
(Program Participant, Toronto, ON)*

Many mothers recognized the importance of starting to teach their children when they are young.

*"If you start when they are little, as they are right now, it's going to be easier for you. Because like myself, I teach my daughter. She's only three and a half, but she understands. They understand..."
(Program Participant, Edmonton, AB)*

The fathers interviewed also identified teaching as one of their parenting roles, although some didn't recognize that they could have this role even with very young children.

*"I help them to study and learn. My wife helps them in learning, looks after them. She's really busy with them, especially the baby."
(Program Participant, Hamilton, ON)*

Some mothers talked about teaching their children specific skills to prepare them for school.



"I'm teaching my son to write before starting Kindergarten in September." (Program Participant, Vancouver, BC)

Parents often place additional importance on their role as teachers because their children will be starting school in a new country, and often in a new language.

"I'm teaching my daughter English. I push her to study English. Teaching her English is very important because mainstream society here speaks English, and all courses in school are taught in English. English is the first step. I am not a good father because I can't make my daughter learn English. I wish someone would help me but no one will." (Program Participant, Vancouver, BC)

Some mothers see their teaching role in broader terms. They teach their children their first language, their culture, and their family history (see section Reading and Singing for more information).

"If you start talking to them in your own language, it's a way of teaching them that there is another home." (Program Participant, Edmonton, AB)

"Well, I teach her about my country, everything, and if she has homework, I need to help... I teach her about Canadian culture, my culture, the differences. We talk about that. I explain to her. I talk to her in my language. We watch videos from my country." (Program Participant, Halifax, NS)

Many mothers stress the importance of teaching their children ethics, morals, and values, especially when they feel that their values are not supported in the mainstream Canadian culture that their children are exposed to. For some, this involves teaching their children how to communicate with other people.

"I teach him my ethics... When guests come, how to receive them. When he greets people. Don't say 'hi' and just go in. No. I want them to say it politely, nicely, and to be involved with the people. To offer them something. Even if I'm not at home. I tell them 'Did you offer them juice? Did you ask them to sit?' Because this is my culture. They can't say to them, 'My mother's not here,' and just close the door. I don't like this culture. I don't know how Canadians do it. But I want them to be positive, to be the way I am. So I feel the mothers have all the burden to teach the kids all the ethics..." (Program Participant, Halifax, NS)



Fathers also see this as an important role for them, because of the cultural importance placed on 'manners'.

"I guide them to follow the right path. In our culture there is a proverb, 'The nations are the manners. If the manners are gone, the nation is gone.' " (Program Participant, Hamilton, ON)

Some mothers teach their children to be good people, to focus on their education and careers, and to be good parents.

"I want them to be good people, like I guess any other parent would want. I want them to be good people, by teaching them what is right and wrong...I tell them that it is also very important for them to study and have a career, not to be dependent on someone. Just go to school, study, get a career...I want them to have a good future, to have their own families and be happy. And to be good parents also." (Program Participant, Toronto, ON)

Some mothers focus on teaching their children to be independent (See section Independence/Interdependence for more information). Others teach their children how to best fulfill their roles within their communities.

"I teach them when they are growing up how they can live in the community and help people." (Program Participant, Edmonton, AB)

One mother talked of teaching her children about the importance of parent-child attachment.

"I teach them the connection between parents and children." (Program Participant, Vancouver, BC)

Some mothers talked of teaching their children the value of openness to other cultures.

"Well I don't...I'm not teaching them to be...I don't know, picky about other cultures. Just to accept people not because of what they see from the outside but what they're like inside. Not the culture, not the country, not...whatever. I don't want them to be like that. To say, 'Oh we don't like these people because they're from such culture. I don't like that because we haven't raised them that way.'" (Program Participant, Toronto, ON)



Many mothers expressed difficulty in fulfilling their role as teacher of language, values, religion, and cultural traditions – a role that they are used to sharing with other family and community members, in their countries of origin.

"...sometimes I'm very 'dictative' to them. And I don't like that. But I find myself...it's worse in Canada because I have to instruct them about everything. About values and religion and culture and language. It's too much. I have to be a teacher the whole day." (Program Participant, Halifax, NS)

Some mothers teach their children what their parents, family and community members taught them.

"We teach them the way that we have been taught." (Program Participant, Waterloo, ON)

Other mothers make an effort to focus more on teaching than their parents did.

"My mother had 6 children. She didn't have the time to teach us. I just have one child. I take the time to teach him." (Program Participant, Vancouver, BC)

Some mothers described the struggle involved in teaching some values that differ from mainstream Canadian culture.

"So how can I teach my children this is not our culture. It's very hard. And I don't know how we can solve this problem." (Program Participant, Edmonton, AB)

Some mothers specifically use resources from their countries of origin as one strategy of teaching their children in the way that they were taught.

"I teach my kids at home from books I brought from India." (Calgary, AB)

Many mothers talk of the importance of teaching their children both their traditions as well as what they need to be accepted in mainstream Canadian society.

"I teach them both ways – I tell them, 'When you are at home, I feed you. When you go to school, you feed yourself.'" (Program Participant, Vancouver, BC)

They talked of the importance of passing on their knowledge and experience – a combination of that learned in their country of origin and that learned in Canada.



"You have to teach them responsibility. You've got to teach them by example from what you learned as a child and how you grew up as well as what you have learned since you came to Canada..."
(Program Participant, Edmonton, AB)

One couple play a role reversal game to teach and encourage their children.

"We tell them 'Ok we are students, you are the teacher.' We tell them, 'You are very able. You have a lot of information. You are very smart. You are an expert, very intelligent. You are the teacher.'"
(Program Participant, Toronto, ON)

As this last parent points out, teaching and learning are continuously exchanged roles in the parent-child relationship. Parents who are struggling to be teachers of a culture no longer dominant in their child's world have greater pressures on them to impart things few other structures around them reinforce. Children who are growing up in a culture new to their parents are often the teachers of this new world's values and customs to their families. This universal attachment behaviour has different challenges and formats due specifically to the experience of migration and resettlement.



Breastfeeding and Attachment

Much of the literature that promotes breastfeeding, focuses on the physical benefits of breast feeding, particularly the transfer of nutrients and immunity, but breastfeeding also has a critical role in attachment, early brain development and healthy child development overall. The recently cited role of breastfeeding as a protective factor against Sudden Infant Death Syndrome (SIDS), may be because breast-feeding involves increased interactivity and attentiveness to children both during the day and night.

The hormones oxytocin and prolactin, present in breastfeeding mothers, have an opiate effect on mothers and infants. Oxytocin is required for attachment in animals and in humans it also plays a role in building attachment¹.

Breastfeeding is not only for feeding a child. It can also calm, soothe, relax, and demonstrate love for child².



Breastfeeding is an attachment practice – an important practice that parents can use to develop a deep and lasting connection with their child and to respond to their child's needs. It is one way for a mother to nurture an infant by responding to his/her attachment behaviours. It promotes secure attachment because while breastfeeding, a mother is available, in tune with the needs of her child, showing affection, demonstrating pleasure in the interaction, and comforting her child.

- Breastfeeding is important during the '**Undiscriminating Responses**' phase of attachment, that typically lasts from 0-3 months. It is during this phase that the infant's brain is trying to organize and control physiological states and behaviour. The attachment figure can help the infant's brain to regulate the body by responding to these messages in comforting and appropriate ways³, such as breastfeeding, when the infant communicates hunger.
- Breastfeeding is also important during the '**Discriminating Behaviour**' phase of attachment, which lasts from 3-6 months, when the infant begins to associate the meeting of its needs with the availability of the attachment figure.
- During the '**Formation of Secure Base**' phase, which lasts from 6-24 months, the infant has usually identified a preferred caregiver, whom the infant needs to respond appropriately and sensitively to the needs s/he expresses. The need for closeness and proximity to attachment figures still exists, while at the same time the infant has a growing need for autonomy. So, breastfeeding can still play an important role in this phase of attachment.

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¹ Small, M.F. 1998. *Our Babies, Ourselves: How Biology and Culture Shape the Way We Parent*. New York, NY: Anchor Books.

² Granju, K.A. and Kennedy, B. 1999. *Attachment Parenting*. New York: Pocket Books;

³ Crisci, Kussin, and Mayer, Consultation, Counselling and Training. 1999. Workshop notes.



Breastfeeding, Culture, and Attachment

In countries all over the world women adapt their feeding practices to their own circumstances and environment. Women adapt to their infant's needs, and infants adapt to their mothers' availability. It is important to note that in every culture, there are circumstances where a mother cannot breastfeed, and also, mothers who choose not to breastfeed for multiple reasons .

Cultural tradition influences:

- Initiation of breastfeeding

Initiation and continuation of breastfeeding is influenced by a complex interplay of culture, social support, and socioeconomic status⁵. In most countries, where breastfeeding is widely practised, a mother begins to breastfeed right after birth. Until recently, this was discouraged in Western hospitals by separating mothers from their newborns soon after birth for long periods. This practise had a very negative effect on successful breastfeeding as the infant's sucking reflex is strongest within the first 30 minutes after birth. It is instinctually and biologically triggered and if interrupted during the critical 30-minute period, the whole process of breastfeeding and its associated attachment benefits, can be disrupted⁶.

For many cultural groups in Canada, breastfeeding is widely practised in their countries of origin, but when they come to Canada, they often change from breastfeeding to bottle-feeding. The perception of immigrant and refugee women is largely that formula feeding is the dominant and preferred form of infant feeding in Canada⁷. Even those who want to continue breastfeeding may find it difficult with the lack of family support, the lack of support for breastfeeding in the workplace, and the lack of acceptance of breastfeeding in public. There are also immigrant and refugee women who feel so strongly about the benefits of breastfeeding that they insist on it and find ways to incorporate it into their lives despite the lack of support in the workplace and in society as a whole.



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⁵ Agnew T, Gilmore J, and Sullivan P. 1997. *A Multicultural Perspective of Breastfeeding in Canada*. Minister of Public Works and Government Services Canada.

⁶ Small, M.F. 1998.

⁷ Agnew T, Gilmore J, and Sullivan P. 1997.



- Frequency of breastfeeding

Long intervals between timed feedings, a lack of night feeding, and supplementation of mother's milk with other species' milk or artificial milk, is a recent pattern practised primarily in the West. In many non-Western countries, mothers feed on cue (in short intervals all day and night), and do not supplement their milk with any other type of milk⁸. This difference is based on different beliefs regarding a child's needs. In the West it is generally believed that children need to learn to be independent almost from the time of birth. In non-Western countries it is generally believed that children are naturally dependent in their early years; that children need responsive relationships with family members.

- Duration and termination of breastfeeding

Cross-cultural data shows that it is only in the West that infants are weaned before one year of age. For 99 percent of human history, breast milk was the primary or sole food until two years of age, and nursing continued for several more years⁹. This difference between Western and non-Western countries is also based on the difference in belief regarding infants' need to learn independence versus their need for responsive relationships.

In all cultures, weaning involves the introduction of solid food, and the gradual or abrupt cessation of mother's milk. The timing of weaning is influenced by cultural factors. Most non-Western cultures believe that children need to be breast-fed until they are at least one year old. Weaning before this time is usually based on other factors. Some cultures have a taboo against nursing during pregnancy. So, if a mother becomes pregnant again, she will stop nursing. Some cultures have a taboo against sex during nursing, so a mother may wean her child to enable her to resume sexual relations¹⁰.

In the West, early weaning is encouraged because it is seen as a sign of infant development - it is culturally frowned upon for a walking toddler to be breastfed. Early weaning also enables a woman to return to work earlier in an environment where there is limited support for breastfeeding in the workplace.

- Acceptability of breastfeeding in public

In North America and Western Europe, breastfeeding in public is not generally accepted.

Even if women are determined to breastfeed, they are often uncomfortable exposing their breasts in public because breasts are culturally associated with sex. In many other countries, breasts are seen as functional, so it is not immodest for them to be uncovered. It is very natural to breastfeed in public and women are very comfortable doing so. Some cultures may have a taboo against women breastfeeding in the company of men.

- Family and community support for breastfeeding

Many cultures (Africa, South Asia, Latin America) have a 30-40 day postpartum rest periods for new mothers, where family (immediate and extended) as well as community members step in to help the mother with other household tasks so that she can focus on feeding and caring for the new baby.

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Small, M.F. 1998.

9 Ibid

10 Ibid



Culture also influences other factors, which in turn affect breastfeeding:

- How often a child will be held or carried and how a child will be carried

In North America, and Europe, many people believe that children can be spoiled by being carried too much. In many countries outside of North America, mothers and other family members carry children in some form of sling for much of the day. This enables mothers to respond quickly to a child's cues that s/he needs to be fed.

- How a child and mother will be clothed

In North America, women's clothing is usually not very conducive to breastfeeding. In many countries outside of North America, mothers are dressed in loose fitting clothes that are easily adjusted to allow breastfeeding to take place.

- How a family will sleep (together or apart).

In many countries outside of North America, children sleep with their parents, in the same bed, or at least in the same room. This enables mothers to breastfeed numerous times during the night, in response to her child's cues.



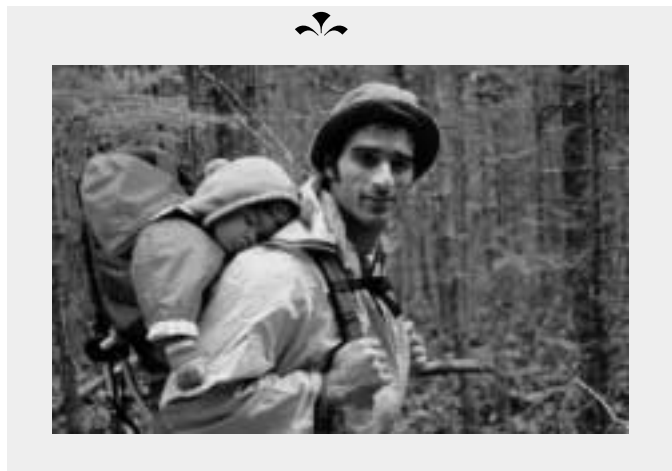
Carrying, Culture and Attachment¹¹

Mothers/families all over the world carry their babies in different ways - in their arms, in cloth slings on their fronts, backs, or sides, in commercially available versions of slings, front packs, and back packs. In many countries, babies and infants spend most of each day being carried by their mother, or a family member, or even an older sister who could be as young as 5 or 6 years old herself. Canada is among the countries where children have the least physical contact with their parents and other caregivers.

Carrying children has an important role in promoting attachment. The close physical contact between mothers, other caregivers, and children provides a sense of security to children. It enables mothers and other caregivers to quickly respond to their children's needs. Carrying children is also an effective way of soothing them when they are distressed.

Benefits of Carrying Children:

- Allows mothers, and other caregivers to continue to do daily activities while promoting secure attachment
- Enables mothers and other caregivers to be responsive to child in distress
- Enables mothers to breastfeed easily
- Organizes and regulates child
- Reduces crying and colic
- Stimulates the development of the baby's nervous system
- Promotes language and social development
- Promotes cognitive development (carried babies are more involved – able to observe what is going on around them while mother carries out daily activities)
- Protects the baby from over-stimulation
- Encourages a tired baby to wind down and go to sleep
- Allows parents to more easily spend time with their older children



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¹¹ This fact sheet is based on: Granju, KA, and Kennedy, B. 1999. *Attachment Parenting*. New York: Pocket Books; and Sears, W, and Sears, M. 1993. *The Baby Book: Everything You Need to Know About Your Baby — From Birth to Age Two*. New York: Little, Brown & Co.



Touch, Culture and Attachment¹²

Touch is an important way to promote secure parent-child attachment, that is used all over the world. Touch involves the focus of a parent on a child, which directly communicates love, caring, and respect. Touching, holding, hugging, and kissing children enhances children's development while promoting secure attachment.

Infant Massage is one way of expressing love, caring, and respect through touch that has been shown to have many benefits to parent-child attachment and children's development. Infant massage is a touch that mothers and other caregivers do with their infants, not to their infants. It is an interaction that involves gentle strokes and caresses over the infants' skin.



A Brief History of Infant Massage

Therapeutic Massage has been used in Eastern cultures as far back as 3000 BC and Infant Massage has been practised by mothers in Asia, Eastern Europe, Africa, and (Latin America) for centuries.



Vimala Schneider McClure founded the Association of Infant Massage following her stay in India, 1973. Whilst there she worked in an orphanage and was exposed to the daily practice of massaging taking place from youngest to the oldest inhabitants. When she fell ill the women of the village helped massage her back to health. On her departure from the country she noticed a young woman sitting by the side of the road in a shantytown, lovingly massaging her infant on her lap. Spurred on by this vivid memory she decided that she would bring the techniques of infant massage back to America. She wrote the book *Infant Massage - A Handbook for Loving Parents* and combined the massage routine she had witnessed in India together with Swedish massage, Chinese reflexology and Yoga. This massage routine is being taught to parents and caregivers internationally in countries such as Sweden, Australia, New Zealand, Great Britain, Germany and Canada.

Benefits of Infant Massage to Parents/Caregivers:

- Promotes secure attachment
- Promotes relaxation

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¹² This fact sheet has been adapted from information provided by Janet Alred, BC Representative for the Canadian Chapter of the International Association for Infant Massage.



- Promotes communication with child, both verbal and non-verbal
- Enhances positive parenting skills
- Increases confidence in parenting
- Provides pleasure and enjoyment
- Provides an opportunity to connect and share quality time
- Increases production of prolactin, the nurturing hormone
- Promotes understanding of how to touch and respond to baby in nurturing ways
- Has positive effects on other relationships, including partner and children
- Group classes provide the opportunity for mutual support from other parents/caregivers
- Provides an opportunity for fathers to promote secure attachment with their child

Benefits of Infant Massage for all Infants:

- Promotes secure attachment
- Improves circulation, digestion and organization
- Reduces muscular tension
- Enhances awareness of being loved, accepted and safe
- Reduces fussiness
- Helps infant learn to relax
- Promotes feelings of being respected and responded to
- Improves sleep
- Increases sense of well-being
- Strengthens the development of gastro-intestinal and respiratory tracts
- Reduces the symptoms of colic and gastro-intestinal tract distress

Benefits of Infant Massage for Infants with Special Needs (in addition to the above):

- Helps relax tight muscles
- Helps stimulate muscle tone for hypotonic babies
- Increases infant's ability to maintain a functional alert state
- Helps babies learn to accept and tolerate positive touch (especially for babies who have been hospitalized)
- Increases infant's ability to gain weight
- Helps infant sleep longer and deeper
- Helps decrease gas, constipation and gastro-intestinal tract distress
- Helps regulate tactile hyper or hypo sensitivity
- Improves eye contact and socialization
- Improves circulation, decreased mottling
- Decreases fisting and shoulder reaction
- Increases incidence of hands to midline
- General relaxation



Sleeping, Culture and Attachment

How we sleep, with whom we sleep, and where we sleep is molded both by culture and custom, traditions handed down through generations. For most of human history, babies and children slept with their mothers, or with both parents. Private sleeping is rare except in more affluent societies. The majority of people around the world still live in one-room shelters where all activities conducted while they are awake or asleep, take place. In almost all cultures around the globe today, babies sleep with an adult and children sleep with parents or other siblings. It is only in industrialized Western societies that sleep has become a private affair. In 67 percent of cultures around the world, children sleep in the company of others. In none of those cultures do babies sleep in a separate place before one year of age¹³.

There are many benefits to parents and children sharing sleep, but it is important to remember that sleep sharing might not work if it is started too late, and that no one sleeping arrangement works for all families all the time¹⁴.

Benefits of sleeping with children¹⁵:

- Sharing sleep reflects an attitude of acceptance of the child. The infant trusts that his/her parents will be available during the night just as they are during the day.
- Helps the baby not resent going to sleep and not to fear staying asleep.
- Babies sleep better, mothers stay asleep better.
- Breastfeeding is easier.
- Babies thrive.
- However well-wrapped a baby may be, his/her temperature can never be maintained as satisfactorily as when s/he has skin-to-skin contact with another human being.

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¹³ Small, M.F. 1998. *Our Babies, Ourselves: How Biology and Culture Shape the Way We Parent*. New York: Anchor Books.

¹⁴ Sears, W, and Sears, M. 1993. *The Baby Book: Everything You Need to Know About Your Baby — From Birth to Age Two*. New York: Little, Brown & Co.

¹⁵ Jackson, D. 1999. *Three in a Bed*. Bloomsbury, London; Sears, W, and Sears, M. 1993. *The Baby Book: Everything You Need to Know About Your Baby — From Birth to Age Two*. New York: Little, Brown & Co.



Language Development¹⁶

"The benefits of being bilingual are great, not only in terms of job opportunities and increased cultural awareness, but in terms of social and cognitive development. Children who learn to speak more than one language learn to 'play with language.' They learn that the same thing can have different names and this early lesson in abstraction gives bilingual people the mental flexibility and openness that produces cognitive and social benefits. The ability to switch linguistic codes and eventually think in more than one language increases conceptual development. However, some researchers are very concerned that because the pressure to assimilate to the dominant culture is so great, young children are not learning the language of their own families."¹⁷

What are the advantages to learning more than one language?

Learning two (or more) languages can be beneficial to a child's overall language and learning abilities in school. For example, a child who is raised with more than one language will develop:

- a larger vocabulary
- a greater awareness of how words sound and rhyme, which helps when learning to write and spell
- an appreciation that words are inventions which can lead to a more creative use of language in talking and writing
- access to more than one culture

However, how children learn two languages is critical to making this an asset rather than a liability. Research shows that children who are strongly proficient in their first language will become strongly proficient in English. They will also do better in reading.



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¹⁶ This fact sheet is based on: Watson, C, and Cummins J. 1999. Some things to know About Children Acquiring Two Languages. *Wig Wag*. March.

¹⁷ Wastie, S. 1994. Supporting Families at Risk for Language Loss. *Interaction*. Summer.



What is the best way for children to learn their heritage language and to pick up English?

There is more than one good way for children to learn two languages. Children can learn two languages right from birth or s/he can learn the heritage language (i.e. the language spoken by the parents) at home and English at day care, preschool or kindergarten.

The decision parents make depends on the language or languages they and their extended family speak, and on how strongly they feel about maintaining their heritage language.

Some parents feel very strongly that their children learn the heritage language, while others want their children to learn mainly English. Some parents have no choice because they only speak their heritage language. Their children will learn the first language at home and learn English from peers, older siblings, day care, school, TV, music, and other people in the community.

In a family where each parent speaks a different language, children can be raised bilingual or multilingual from birth. This usually happens when one parent speaks one language to the children and another parent speaks another language to them. Sometimes, English is a third language for the children. It is important that each parent speaks a lot of his/her language and that he/she doesn't mix languages when talking to the children.

How do children learn language best?

Children learn language best:

- from people who are fluent in a language. So parents should speak the language that feels most comfortable to them. Their children will then be exposed to a richer variety of words and well-formed sentences.
- when they have a good relationship with their parents. This relationship is closer when the parent is communicating in his/her most naturally fluent language.
- when they are highly exposed to the language, that is when they are exposed to the language in all daily situations, play, books, music, and from many people in their lives (e.g. mother, father, grandparents, aunts, uncles, siblings, babysitters, etc.). If parents want to maintain their heritage language at home, they need to make a conscious effort to help their child become fluent in that language.
- when there is a language policy in the home. For example, parents may decide that one parent will speak to the children in the heritage language and the other parent will speak English. This is often called the 'one person – one language' approach. If other relatives have a big role in the family, then parents may decide to speak English to the children and let them learn the heritage language from the relatives.
- when parents don't confuse their children's language learning by mixing words from two different languages in one sentence.



How should Early Childhood staff accommodate a child who arrives at a child care centre with no English?

The child may be silent for the first six months. During the first few months of exposure to English, the child is becoming acclimatized to his/her new surroundings and taking in the sounds of the English language. Within two or three months, the child should be adjusting to the routines of the day care and making continuous progress in receptive language. The length of the silent period will vary depending on how outgoing a child is by nature.

A silent child may be easy to look after but s/he can easily get lost in the shuffle. S/he needs some one-on-one attention from an adult to help him/her learn English. You can adjust how you talk to help him/her learn more easily. Use short phrases, gestures, and other visual cues to help him/her crack the English code. S/he will also need help getting acquainted with peers and making new friends. Consider pairing him/her with a child s/he hits it off with and helping him/her play with small groups of children.

Expose him/her to lots of music. This is a wonderful, non-threatening way for a child to internalize language.

Encourage parents to continue to talk, play, sing, and read to their child in their first language. Promoting the first language at home builds a strong language base and makes it easier to learn English. Parents and teachers are often sceptical about this, but it is what the research shows.

After about one year in day care, a child, depending on their age, should be using words or short phrases to talk to staff and peers. The first words and phrases are often 'social' words like "Come play", or "My turn" because these phrases quickly help children enter into relationships.

What should you expect when a child enters school?

The optimal situation is when children arrive in kindergarten fluently conversational in their first language and at some stage in the process of learning English.

It takes three to four years to become totally fluent in social conversation and five to seven years to learn the academic language required for school. Older children who are more advanced academically will pick up the academic language faster than younger children. Older children also learn vocabulary fairly quickly. Younger children are good at picking up social conversation.

In the past, it was thought that the critical period for learning a second language was before the age of seven. That is no longer felt to be the case. Children may take several years to learn a second language after the age of seven, but will eventually catch up to their peers. One exception to this has to do with pronunciation. Teenagers learning a new language find it more difficult to lose their original accent.



Parents who want their children to be fluent in their mother tongue, should continue to promote their first language at home. Loss of this language can occur within two or three years of entering school and often has a negative effect on family cohesion. Parents are often surprised at how fast their children make the switch to English.

It is important to provide some academic work at home and/or at school in the first language. A strong conceptual foundation in the first language is a prerequisite for successful learning of English and for continued development of the first language.

When can problems arise?

Problems can arise with learning English if a child arrives at school without being fluently conversational in his/her heritage language. This can happen for a number of reasons. If parents speak to their child in a mixture of the first language and English, s/he may not achieve proficiency in either language. If parents switch to English before their child starts kindergarten, thinking that this will help prepare her, it can instead weaken the child's first language and also lead to communication problems in the family.

Some research suggests that if the first language is not maintained at home English will become dominant by grade one and the first language will be lost by grade three. Once it's gone, a language is hard to get back.

Children may also struggle academically if social conversation and academic tasks are not promoted in their first language.

How can you identify a language delay in a child with two languages?

In children who have a global developmental delay, the delay will affect their acquisition of both languages.

In non-handicapped English as a Second Language (ESL) children, a language delay can be much harder to identify and needs to be carefully assessed by a Speech Language Pathologist (SLP). The issue of whether an ESL child is just learning English slowly or whether s/he has a true language learning disability which affects both languages is hard to assess and there is no straightforward diagnostic process. There are few language tests available in other languages and they usually begin at age three.

An evaluation must take into account social and emotional factors that can affect a child's transition to a new country or into an unfamiliar childcare or school culture. During the transition, children often go through a quiet period and language may temporarily regress. It is also crucial to distinguish a true language delay, which will be present in both languages, from a difficulty learning English.

When assessing an infant or toddler who is exposed to two languages in the home, most of the information will be gathered from parent reports, possibly through an interpreter. Milestones for social interaction receptive language are similar in bilingual and monolingual children. But prior to age



three, two to three months can be added to the milestones for expressive language in children exposed to two languages.

Should a child with a language delay be raised with only one language?

There is no clear research to indicate that a child with a language delay should be exposed to only one language. This is the case even for children with a severe language delay.

Decisions need to be made on a case by case basis and families may wish to discuss their options with an SLP and other caregivers who work with their child, ideally in some form of team meeting. A language intervention plan is usually based on the child's needs to communicate for different reasons with different people. So for example, does a child need to learn English words to communicate at day care and Somali words to communicate at home or with relatives?

Ultimately, parents will help their children develop language and build closer relationships by talking to them in their most fluent and comfortable language.



Impact of Migration



"Home is the place where you have a sense of belonging. You feel comfortable there. It's the place where you belong with your family. That's the most important part. It doesn't matter where."

—Program Participant, Halifax, NS



Section III

Impact of Migration and Resettlement on Attachment Beliefs, Values, and Practices

In the first section of the toolkit we introduced the concepts of culture and attachment and the important relationship between the two. We also introduced the idea that the impact of migration and resettlement on attachment needs to be considered in order to provide adequate support to immigrant and refugee families. In the second section of the toolkit we elaborated on the relationship between culture and attachment based on our research findings and program experience. In this section, we elaborate on the impact of migration and resettlement on attachment beliefs, values, and practices, based on our research findings and program experience within the Women's Health Centre.

The impact of migration and resettlement on attachment is a complex subject to tackle because the process of migration and resettlement and thereby the emotional experience associated with it differs for each person and each family.

A Factors that Influence the Impact of Migration and Resettlement on Attachment Beliefs, Values, and Practices

The impact of migration and resettlement on attachment beliefs, values, and practices depends on a variety of factors. These may include: the reasons for migration, the age at which women and their families immigrate to Canada, whether women become new mothers in Canada and/or come to Canada with children, the level of English or French that women and families speak, and whether or not women and families have a social network in place in Canada when they arrive.

Reasons for Migration

Migration and resettlement inevitably result in the loss of a sense of home and belonging that is critical to achieving an optimal level of health and well-being. Although people who choose to come to



Canada do experience this loss along with the many challenges associated with resettlement, their experience is not usually as difficult as that of refugees who are forced to leave their countries of origin, and have no choice over their destination. Refugees come to Canada to escape natural disaster, war, and/or persecution due to their race, religion, gender, nationality, political viewpoint, sexual orientation, or membership in a particular social group. Their experiences associated with their persecution often lead to severe emotional trauma that scars them for life.

"I have chosen with no obligation, in my case, I chose to come to Canada. Of course I have relatives who are refugees. I have two cousins who were refugees. But in my case, I was not a refugee. I chose to come to Canada. So it's my new home and there is no problem about that. When I came here, I really liked the idea."
(Program Participant, Halifax, NS)

Refugees not only have different experiences but are treated differently when they arrive in Canada. Convention refugees or "government-sponsored" refugees come into Canada with the prior approval of the Canadian government. As a result they receive a number of federal benefits. Some refugees are privately sponsored by churches or other groups and receive the support they need through these private sponsors. About 50% of refugees come into Canada as refugee claimants who apply for Convention status once they have arrived in Canada. Refugee claimants do not receive the federal benefits that Convention refugees do. When they have submitted their claims, refugee claimants are eligible for legal services, social assistance, and some health services, but many of them are not aware of these benefits. In addition, they are not allowed to sponsor family members, who may be stranded in refugee camps, until they become landed immigrants, often a long drawn out process¹.

Age at Migration

Many women interviewed talked about the varying impact of migration and resettlement on attachment depending on the age at which women and their families immigrate to Canada.

Women described feeling that immigrating to Canada as adults put them at a disadvantage in learning new skills including language, understanding the new culture, and being able to adapt to the new culture. They described the adaptation process as being easier for their children, who come to Canada without as much 'cultural baggage' as they have.

"Obviously we come from different cultures and the culture is our first...the country of origin is this luggage, everything that shaped us, you know, the way we are. Unless someone comes here as a child, they can adapt more easily..." (Program Participant, Fredericton, NB)

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¹ Hill, D. 1999. *Diverse Cultures, Common Ground: A Review of Immigration Settlement Services in Toronto*. Toronto, ON: United Way of Greater Toronto.



Children's Place of birth

Other women talked of the varying impact of migration and resettlement depending on whether they came to Canada with their children, or whether they became first time mothers in Canada. Some mothers who give birth to children in Canada feel that their relationships with their children are less affected by migration and resettlement than if their children had been born in their countries of origin and migrated to Canada with them. Depending on how soon after migrating they give birth, they may not have to deal with some of the aspects of resettlement (finding housing, employment, learning a new language, etc.) while simultaneously having to care for their very young children.

"I guess the really hard one is the first year because it's getting used to it and everything. Well for me it wasn't as hard I guess as other parents who come with children. They have to learn the language and look after their children and everything. My kids were born here so I didn't have that problem with them." (Program Participant, Toronto, ON)

Once women have given birth in Canada, if they are not working outside the home, they may not feel the impact of migration and resettlement on their attachment practices because they can focus their attention on their children, including transmitting cultural values to them.

"Because my kids are young, and they were born here... [getting used to being in Canada] hasn't affected [my relationship with them]. This is a newborn one. The big one is young, and maybe if I was going to work maybe she would go to daycare or something but I don't feel like for now she's affected and I don't think things have come between me and my children, here in this country." (Program Participant, Toronto, ON)

Mothers also recognize that although they may not currently feel the impact of migration and resettlement in their relationships with their young children, they may feel that impact as their children get older, and start attending school, creating more potential for cultural conflict.

Fluency in Official Language

The impact of migration and resettlement on attachment beliefs, values and practices also depends on families' level of fluency in English or French. If they are fluent in English or French upon arrival in Canada, the process of resettlement is greatly facilitated, while if they do not speak either language well, the process is greatly complicated.



Presence of Social Network in Canada

Another critical factor is the social network that mothers and families have in place in Canada – whether or not they have other family members, friends from ‘back home’, or an established community from their country of origin in Canada. These two factors are discussed in the following section on the impact of migration and resettlement on attachment beliefs, values, and practices.

"I think, the biggest frustration is to come to a place where you have no place for yourself. What I mean by that is I moved from Ontario, where I could fit within the community. We had a bigger community, the culture was there, everything was nearby and handy. You have it at home and there is the extension outside home...so you find it within the place where you are living...When you come here, your culture...your dreams...they're just within your four walls. This is very irritating..." (Program Participant, Fredericton, NB)

b. Impact of Migration and Resettlement on Attachment Beliefs, Values, and Practices

Migration and resettlement is a process that may start long before an individual's or family's actual arrival into a new country and go far beyond the first five years of their life in that country. The emotional process of migration and resettlement is never linear. Its different stages are intertwined and are strongly determined by the factors introduced above. In addition, the ability of an individual or family to cope with new and changing circumstances makes each person's and each family's experience of migration and resettlement unique. For the sake of clarity, however, this section highlights common elements affecting all women and families who migrate and resettle in a new country in an order that most closely corresponds to the chronological order of their emotional experience.

When families migrate to Canada, they lose their homes, their families and communities, their language, and their status within their communities. In addition, they often experience trauma in their migration process, and culture shock upon arrival into Canada. All of these factors, along with the process of acculturation that they experience as they adapt to life in Canada, have a significant impact on the mental health of parents and children and thus provide challenges to their attachment relationships.

"It's very hard to adjust to a new life. When you come here you don't know the language. It's the first barrier you have, to feeling like you're in your own country, plus you don't have your family here when you come for the first time, and it's as if something was cut and you're trying to find that part, and you don't know where to start, how to start, and that makes you feel bad. It's a process but it takes lots of time." (Program Participant, Toronto, ON)

At the same time, many families show great resilience in their ability to continue to promote secure attachment of their children despite the many challenges they face. Because of all the losses they



have experienced, parents tend to focus their energy into creating a 'better' future for their children, a future where their children do not have to suffer from the same hardships they have endured. This entails evaluating their own beliefs, and values as well as the new ones they are exposed to, in an attempt to decide what is 'best' for their children and themselves. Newcomer parents often sacrifice their own needs to invest in the future of their children.

Loss of Home

The first part of the process that families go through when they migrate and resettle into a new country is the feeling of a loss of home. It is important to think of attachment in the context of whether or not parents feel at home. How a parent defines home, and whether or not a parent feels at home in the country they live in, has implications for their attachment (ability to provide love, nurturing, and security) with their children.

Many mothers equated their concept of home with a sense of belonging.

"Home is the place that you have a sense of belonging. You feel comfortable there. That's the place where you belong with your family. That's the most important part. It doesn't matter where."
(Program Participant, Halifax, NS)

The loss of one's home and feeling of belonging has a profound impact on the relationship between a parent and child. If parents do not feel supported or secure, it is difficult for them to provide their children with a sense of security. Children themselves suffer from the loss of home and then are affected by the fact that their parents are suffering, and cannot provide them with support and a sense of belonging and safety.

"I have no job, no money, no income, no friends. I'm in a totally strange world in both my working environment and living environment. Sometimes I wonder, 'What is my future? What is the road I'm going to go through after migrating here?' I don't have the language, and I have no direction. If I can master the language well, maybe I can have a clearer direction. Then there is the money stress. Finding a job is the biggest depression. I am making a new start and I have no one to help look after my children. I have to depend on myself for everything. I have no sense of security. If anything sudden happens, then what? I'm worried. In my homeland, all my friends, family, extended family would come to help. Here, I have no one. I'm worried." (Program Participant, Vancouver, BC)

Mothers recognize this and try to compensate by responding to their children's heightened need for love and support.



"There are so many things that I do. I give them a treat once in a while and tell them 'I love you'. Before I used not to tell them but now I do. They need it now. The way of living, everything has changed. Their father is no longer living with us. They need more attention, to know that someone loves them." (Program Participant, Hamilton, ON)

Many focus on ensuring that their children feel a sense of belonging in Canada, even if they themselves do not.

"We have chosen Canada to be home for our kids. We'd like them to feel they belong. When you belong, it is a very flourishing feeling." (Program Participant, Halifax, NS)

Some get their sense of belonging from knowing that their children feel at home in Canada, the country where they are growing up.

"Canada is not yet home - for me...for the children maybe. They are growing here so they are starting life here. They don't know anything else. This is their home. And for us, home is where the children are." (Program Participant, Edmonton, AB)

Many of the parents interviewed are unable to think of their countries of origin as home, because of the political and social climates they left behind.

"[We don't think of Afghanistan as home anymore]. Now the situation in Afghanistan is not good. Every day there is fighting. The living is not good. Now we're living here. We're getting upset. We think 'Why there is fighting?' Women don't have rights, good situation in Afghanistan because the government doesn't want women to go outside to work. They want women to stay home, all covered. Like dead people." (Program Participant, Toronto, ON)

Some parents no longer feel at home in their country of origin and are also unable to feel completely at home in Canada.

"I noticed a couple of times when I went back to Poland for a visit, I just had the feeling that my home is here, that Poland is not my home any more. Because so many years passed by and people there are living their different lives, but my children, my house, my work, everything...friends, new friends, who became like family



members, are here...I definitely feel that there is always a price to pay for that because I also feel different. I feel like a different sort of citizen when you know, at work, I know that I am different. And I always say that the generation of our children, the ones who were born in Canada. They will feel like home but for us it will always be this different place and this is the price we pay for that." (Program Participant, Fredericton, NB)

Parents recognize that developing a sense of belonging and feeling at home in Canada takes time.

"I think it's only with time, with the passage of time and all these years in a different place that we are able to develop some feelings of home, of this different, other country being home...The beginning is always difficult." (Program Participant, Fredericton, NB)

Loss of Family/Community

The loss of their own children, other family members, extended family, and community, and the associated isolation that mothers experience also has an impact on their attachment practices.

Sometimes separation of immediate family members occurs during the process of migration. Some family members may come first while other family members follow a few months or years later.

"I lived in Ethiopia before I came to Canada. I had a little bit of stress. I was four years in Ethiopia with my kids while my husband was here. I had economic stress." (Program Participant, Halifax, NS)

During the process of migration, families may lose members either as victims of war or political violence or may get separated from each other while fleeing.

"In my country of origin, we hid during the day and escaped at night. My grandparents, uncle and aunt were killed. Some family members were disabled..." (Program Participant, Toronto, ON)

Many mothers have had to leave children behind in the process of migration. Mothers find this very difficult because they understand the importance of their role in raising their children.

"I miss my children in India. If they're here, near me, I can give them love. It's difficult to raise my kids when they're in India. At a young age, they need their parents' support more." (Program Participant, Toronto, ON)



This separation not only affects the development of those children left behind, but also affects the parents' ability to be responsive (and thus a secure attachment figure) to those children who are with them.

"We think of Canada as home but we miss our children. We want our children here. Then we will really feel at home. Now is the time for them to be taken care of. We are counting every minute, every day to get our children. During the day, I have to stay focused on my son who is with me. I don't feel good to show him that I'm stressed out and not in a good mood. When he's sleeping, that's when everything comes up." (Program Participant, Toronto, ON)

Parents may separate from each other during the process of resettling for various reasons, including the stress of migration and resettlement on the family.

"The father of my daughter's children was deported. He was deported and she was told that he would never be able to come back. So she got together with someone else. And now he's back and they have separate lives. My daughter says immigration destroyed her life." (Program Participant, Vancouver, BC)

Even if all immediate family members come to Canada together and stay together, most of the mothers interviewed are from societies where relationships with extended family and community are valued greatly. As a result, they really feel the loss of those relationships in Canada, where emphasis is on relationships within the nuclear family.

"The family is different here. You, your husband, and your children - that's it. There, it's your grandparents, brothers, sisters, neighbours." (Program Participant, Montreal, QC)

"Canada feels like home in terms of security, but in terms of family, no. I am really completely alone here." (Program Participant, Hamilton, ON)

Cross-cultural attachment research has shown that it is possible for infants to display attachment behaviour to more than one caregiver. They can show attachment to 3 or 4 different figures, including their fathers. They can be raised in a network of attachment relationships but primarily be attached to one attachment figure (to whom they address their attachment behaviours most frequently). The most important figure is most often their mother, but other family and community members play an important role. The loss of these other relationships, due to migration can have a profound influence on a child's development.



"In my home country, neighbours took our children for a while. There were more people to shower love on a child. Here there is only the father and mother. And they are too busy. There are only the parents to show bonding to a child."
(Program Participant, Toronto, ON)



Some mothers talked of the importance of extended family in mediating the relationship between mothers and children, and the difficulty they face in trying to negotiate the multiple roles they have to fulfill as parents.

"The problem that I have is how to establish a strong relationship with my son in the relatively short time I have to spend with him. He goes to school and daycare. I pick him up at 5:30. We're both tired. It's a huge effort to connect with him. He has had to face challenges during the day without my help. We have no extended family here. When I was a child, if my mother screamed at me, I was devastated. My grandmother would mediate. She would tell my mother that she crossed the border or me that I crossed the border. We have to be stringent, consistent, authoritative and good friends to our kids because they have no one but us." (Program Participant, Halifax, NS)

The loss of immediate family, extended family, and community combined with the value placed independence over interdependence in Canada, leads to a feeling of great isolation in many mothers.

"[In my home country] we live together, not isolated and separate like here." (Program Participant, Hamilton, ON)

Many women interviewed spoke of the time of pregnancy and childbirth as a time when their feeling of isolation was heightened.

"In Zaire your family, mothers, sisters, stay with you [after you give birth]. For three to six months they don't leave you alone. Here you do everything alone, alone, alone." (Program Participant, Hamilton, ON)



Many mothers feel that there is too much pressure on them in Canada to supervise their children at all times, because other people in the community don't take responsibility and participate in "parenting" their children. They also feel sad that they have to teach their children not to trust people.

"Teaching them 'Don't talk to strangers.' For me, it's something new. Back home I didn't teach them that because there was always someone there for them. They say, 'But Mummy, that person looks nice. She's smiling.'" (Program Participant, Hamilton, ON)

Single mothers in particular feel the lack of support and isolation for themselves and their children.

"It's not easy to be a single mother here. Not having a family. Everything it's you and you alone. Also it's hard for the kids. Back home they are free. Everybody, neighbours, family members are all around them." (Program Participant, Hamilton, ON)

Loss of Language

The loss of mothers' ability to communicate within their families and communities using their mother tongue has an impact on attachment. Mothers talked about the difficulty they have in expressing themselves in English, and the frustration, loneliness, and depression they feel as a result.

"I remember when I came here, I didn't have any friends. My husband was working all day. I couldn't understand any English. The only program that I could watch was Sesame Street, because in my country they used to have it too, and when you're used to talking and communicating all the time, oh, my God, it's so hard. So I was feeling so lonely, so depressed, and I thought I would never adjust to this system over here. It was really hard." (Program Participant, Toronto, ON)

Some mothers experience this challenge in communicating with their own children, which of course affects their attachment with their children.

"My son, he gets very good marks at school, his marks are excellent. But I have a little problem with my son, in communicating. He speaks English and I speak Chinese. I want my son ...I don't want him not to know his mother tongue...My daughter is two and she is starting to talk. But she gets the two languages confused. She understands both languages but she cannot talk..." (Program Participant, Fredericton, NB)



Mothers also talked about the stress they feel about their children losing the ability to communicate with their extended family.

"Because all his little friends and...everything around him is English. He understands perfectly what I tell him in Spanish but he doesn't speak. He doesn't talk and it just breaks my heart because all my family is back in Guatemala. I don't want him to go and say 'Grandma' or something. My mother will die if that happens."
(Program Participant, Fredericton, NB)

"One day my mum came from Hong Kong and she talked with my son...and he could not understand...I cried." (Program Participant, Fredericton, NB)

Mothers talked about the challenges they face in learning English.

"When you don't practise, when you don't have the opportunity to practise, you forget. Learning English is not something that you learn from one day to another. It's something that takes lots of time."
(Program Participant, Toronto, ON)

They also talked about the struggles they face in teaching their children their mother tongue when it is not part of their life outside the home. They feel a conflict between wanting to retain their cultural identity and wanting their children to fit in to Canadian society.

"But also I will force them at home to speak their mother tongue even if it is hard, it's awful hard. I try to read with them and it makes no sense to them because they just don't learn that language academically. But also what I want for them is to fit in, not to feel outsiders, just to feel comfortable with who they are and to feel Canadian." (Program Participant, Fredericton, NB)

The loss of their ability to communicate fluently in the official language of the country they live in also acts as a barrier to women's participation in society, including employment.

"The fear I have right now is if I start working, because I never worked before here. I was all the time looking after my kids, and, like I said, giving to the community, helping people. And now that the kids are growing up and they go to school full-time, I say, okay, I have worked voluntarily for so many, I have stayed home with my kids, now it's time for me to do something, something for me, and



...see if I can work with the community, and I'm a little bit afraid because I've never done that in English before, and, I'll be forced to take that step and it's not easy. You know, it's uncomfortable." (Program Participant, Toronto, ON)

Mothers noted that language acts as more than a mode of communication for them. It is an expression of their culture and therefore an integral part of their identity.

"I think the difference between the way you see things and the way we see it, there is a difference. You see probably language as just another spoken language. I see it further. It's special when it comes to Arabic. When it comes to Arabic, it is just not speaking the language. For us, it's to pray. We are Muslims. To do your prayer, to do your whole life, you need the language... The Arabic language cannot be compared to other languages... just to go and pray, make my prayer, I have to speak Arabic, no matter where I am from. Without Arabic I can't function, I can't be." (Program Participant, Fredericton, NB)

Because language is such an integral part of identity, the language barrier they face also affects mothers' feeling of belonging in Canada.

"How can I be funny in English? I'm just wondering. How can I make a joke in English? Really, if I were to try, I would be so self-conscious. What if the whole thing falls flat. While in my own language I can say one thing and be funny, and everybody would be laughing. You know, just one thing, one stupid thing too. You know when you should be frivolous, when you should be serious. It's everything is there, planned for you, as though life is known to you. Life is not really known to you in this country... And it never will be." (Program Participant, Fredericton, NB)

Learning a new language therefore involves a lot more than just how to speak the language.

"When you are immersed within a new society... learning a language is not just speaking a language, it's learning a whole culture together." (Program Participant, Fredericton, NB)



Loss of Status

In the process of migration and resettlement, many mothers and families have lost the status they had in the society they left behind. Many of them lived more comfortably in houses with property while here they live in small apartments.

"I live in a 2 bedroom apartment here. There is not too much space. In my country, I lived in a house. Home there is different from home here. There we had lots of space, land for the children to play on. There were no apartments. To me, home is a house, not an apartment, so I don't feel at home here." (Program Participant, Toronto, ON)

Many of them have also lost the status that comes along with their qualifications and jobs – being in well-respected positions in their country of origin to doing menial work or being unemployed here (because of the language barrier and the lack of recognition of their qualifications).

"In my country, I worked as a nurse. I miss that. I can't do that here because I can't speak too much English." (Program Participant, Toronto, ON)

"Jobs are a major obstacle here, because at home the language is yours, you know the people so well, you know, what job is respectable, what job is not. And here you want anything, but that anything is not coming to you. It's just so hard really to find a job that is even appropriate to your academic training." (Program Participant, Fredericton, NB)

There is an additional loss of status within their families experienced by women who were working in their country of origin and are now dependent on their partners.

"For my husband, working is not a problem. For me, I don't do anything here. I stay at home. It's a bit difficult. Here I have to ask my husband for money." (Program Participant, Hamilton, ON)

Mothers also expressed a sense of loss of status in their social relationships.

"I miss my family and friends, my culture. Here, you stay home alone. No one visits you. There, people say 'hi' to you in the streets. Here nobody sees you." (Program Participant, Edmonton, AB)



"For me this is the exactly the same thing too. As I said earlier, I always feel different and it makes me so unhappy in a way because I know that, had I been in Poland, I would have been on the same level, on the same surface...the culture, the friends, the same experiences, the same mentality, the same sort of jobs. We just kind of move or sail, on the same wave. Whereas here, I work only part-time, three days a week, but every time I go to these two offices, I [think to] myself, 'Okay. What will happen today? How will I have to pretend or respond? Or will I understand what they say? Will he tell me another joke that I won't understand...'" (Program Participant, Fredericton, NB)

Mothers feel this loss of status even in their relationships with their children.

"No matter how much English you know, or what you do, you just stay a foreigner. Even your children are better than you. You know, your children, you see them fitting in, able to joke together, among themselves, but you laugh maybe at their jokes, you try to make a joke, they will just look at you like that, 'That is..Mom, that is stupid.' You know, you translate a joke from Arabic and you laugh at it yourself but they don't. They laugh at you when they see you laughing so hard. So, that's the situation." (Program Participant, Fredericton, NB)

Some parents express the extent of their loss upon migrating to Canada:

"We left everything. Everything." (Program Participant, Hamilton, ON)



Trauma

The innumerable losses that women and families experience when they migrate and resettle are often exacerbated by their experiences related to war, or to the violation of their rights as individuals or as a group, based on their race, religion, gender, nationality, political viewpoint, sexual orientation, or membership in a particular social group. In many cases, mothers and families coming to Canada have endured several years of trauma in their country of origin. Their families may have been separated or totally broken. Women and children may have faced torture, harassment, rape, or sexual and emotional abuse, in the hands of government officials or of groups that are in a position of power over them. Their migration is often forced and is their only chance for survival.



"With that kind of thing, war, you cannot cope. You can just suffer and then sooner or later realize that you have to go." (Program Participant, Fredericton, NB)

"Back in our countries, wherever it is, you have to surrender to the ruling government. What they say is what is life. You have to surrender...you have to flatter them; you have to please them. They can even accuse you without you [saying anything against them]. There is discrimination. It can be tribal, religious, or political. So people just escape; they just leave their countries...if they can manage. They don't want to see their children growing up in such a corrupted system." (Program Participant, Halifax, NS)

"My parents and brothers were killed in the war. I was in another country and married. I couldn't go back there. I was very disappointed. They killed my parents, everybody." (Program Participant, Edmonton, AB)

At times, mothers and families are left with the tragic choice of whether or not to leave their young children behind in order to save the rest of those fleeing.

"My son was 3 months old and was crying a lot. He was not quiet so people said, 'You should leave him.' " (Program Participant, Vancouver, BC)

The lack of support mothers and families have as they are going through traumatic experiences, because everyone around them is experiencing the same trauma, makes the experience even more difficult and often pushes them to leave.

"There, there is no real support because everyone lives in fear. That's why we left - because we couldn't continue to live in fear." (Program Participant, Toronto, ON)

It is important to remember that these traumatic experiences will ultimately permeate the future lives of those who arrive in this country in search of a safe haven and a new life without violence. The emotional and psychological effects of these experiences go well beyond the time of arrival in Canada and they manifest themselves in different ways. For example, children who were disabled due to chemical warfare in their countries of origin, are a constant reminder to their mothers of their trauma, and pose an additional challenge to their process of resettlement.



"In 1988 I left my country. The government used chemicals in the war. I was 3 months pregnant when I left. She was okay when she was born [but she began to have problems as she grew and developed and now requires full-time care]. When she was 7 months old, I was in [another country and decided to get checked]. I had an x-ray and everything was okay. In 1990, I arrived in Canada. After 3 years I was checked in the hospital and they found nothing. Then they found chemicals. With my next child, the doctor said I was okay but I still had chemicals in my body. My child doesn't talk; she can't eat by herself. I feel sad about them. I love them. But it is hard to look after two of them. I have support but I don't get what I need. I don't have time for myself." (Program Participant, Vancouver, BC)

Many mothers continue to suffer from the emotional and psychological impact of trauma when in Canada, particularly when some of their family members may still be in danger.

"Part of the stress is because my family is back there. Although the war has ended, there are guns and there is violence and there are robberies, so I'm worried about my family." (Program Participant, Toronto, ON)

All these experiences have a profound impact on the way individuals and families react to their new environment, and cope with the challenges inherent to resettlement. As parents struggle with their own emotional and psychological recovery and resettlement in Canada, they are also struggling to provide adequate social and emotional support to their children who are also suffering from these experiences. For these mothers and families, and particularly for those coming from societies where beliefs, values, and practices are very different from those encountered in Canada, the experience of culture shock further exacerbates their inability to overcome the pain and feelings of despair and distress they may have had prior to their arrival into the country.

Culture Shock

Culture shock is the name given to the physical and emotional distress that comes from being away from one's familiar environment and having one's boundaries greatly changed. It affects almost everyone who becomes involved with a new culture. This includes facing challenges to one's beliefs, values, and practices and often feeling the need to change one's practices as a result. Mothers talked about making changes to their way of thinking and behaving while living in Canada.



"The way of people living is not the same. In my home, it's easy to greet somebody whether you know them or not. But here it's different. You have to know the person. I used to greet people here, but not everybody appreciates it." (Program Participant, Hamilton, ON)

"I have to change my way of thinking, speaking, living, dressing, greeting." (Program Participant, Calgary, AB)

Mothers talked about the stress they experience as a result of not fitting in.

"The feeling of strangeness is stressful." (Program Participant, Vancouver, BC)

Mothers also talked about the need they feel to hold onto their way of thinking and expressing themselves.

"I need my family, my culture, my way of thinking, expressing things." (Program Participant, Halifax, NS)

Mothers and families have additional difficulty coping with the challenges to their beliefs, values, and practices, because they are unfamiliar with the Canadian 'system'. In addition, they do not have their familiar social support network to turn to and are not aware of the other resources available to them.

"At home you are familiar with most of the problems, and the stress, so you feel that you are not alone. If the police don't treat you nicely or if you go to the government office and they are not fair with you, you are not alone. Or at school, if the teacher shows favouritism to another child and not to yours, you are in the system. You will be able to solve all your problems because you know all the relevant matters....And also having your family, your mother or father or your relatives, and your friends with you, they can help you. They can help you to cool down if you are very nervous or mad about something." (Program Participant, Halifax, NS)

"I didn't know how to get resources. I didn't know there was a Parent Resource Centre. I didn't know there was anything. I had to look around and check." (Program Participant, Halifax, NS)



This isolation results in emotional distress and reinforces feelings of not belonging. In some cases it may imply rejection which results in a tendency of mothers and families to isolate themselves, diminishing their ability to overcome their difficulties. Culture shock has an emotional impact on parents and children and thereby on their relationships with each other.

"If they are not sensitized properly (parents and children), it is dangerous for them. Parents are more strict and kids hide things. It is a cultural shock for parents and children too. The next generation maybe will be okay." (Service Provider, Montreal, QC)

Acculturation/Adaptation

Acculturation is the process by which members of one group adopt the cultural traits of another group with whom they are in contact². Acculturation, which is a significant part of the experience of resettling into a new country, involves the process of letting go of certain beliefs, values, and practices, from one's country of origin and adopting different beliefs, values, and practices that one is exposed to in the new country. The process and extent of acculturation that families go through in a new country is affected by the many different factors outlined at the beginning of this section (reasons for migration, age at migration, children's place of birth, fluency in official language, social resources). Many of the parents interviewed referred to this process as adaptation so the terms acculturation and adaptation will be used interchangeably.

"I came here as an adult and I brought my roots here with me." (Program Participant, Toronto, ON)

"The stress, it happens for most of the newcomers, the immigrants. It's the adaptation stage until we become integrated. The adaptation, it takes time to get used to even the weather sometimes. Sometimes if you have never been to the West or have never seen snow, that's one thing. And there is a language barrier... So it could be the climate, the snow, you don't know anyone... the school system is also very new to most people. Even people coming from English speaking countries... you have to know the system. This is adaptation. It causes inconvenience for the newcomers and for mainstream Canadians... Adaptation takes time and some people get it quickly and some people take time to adapt..." (Program Participant, Halifax, NS)

"So you still need some time to acclimatize yourself and to feel you're home. So it's... a change but you can adapt if you want. Provided you have a peaceful atmosphere." (Program Participant, Halifax, NS)

Parents with young children often feel responsible for their children's process of acculturation while they are dealing with their own.

"For immigrant parents, it's too hard to raise children because you must try to keep your own culture within a different culture. And the

²

Henderson and Brown. 1987. p.155



children are so small. They don't understand when you try to tell them to do things because they are children. They don't know..."
(Program Participant, Edmonton, AB)

Mothers' and families' attachment beliefs, values and practices discussed in the previous section (freedom, respect, independence/interdependence) evolve through the process of acculturation.

Some mothers talked of the advantages to what they perceive as increased freedom for women in Canada.

"Another advantage to here is that as women we are allowed to have more choices. For example, there is no stigma to being a single parent here. A big thing for Canadians is that everyone has choices." (Program Participant, Edmonton, AB)

Some mothers talked of adapting their concept of respect when exposed to the differences in perspectives in Canada.

"In my culture there is a tendency to say 'no' too often to a child. Canadian culture gives another option so that kids don't feel so much frustration." (Program Participant, Calgary, AB)

Mothers also referred to the changes in their partners' relationships with their children.

"We do things differently here. [In our country], we didn't have the habit of reading to children, hugging children, especially fathers. In our culture, the father is the master of the family. But here they are reading to kids." (Program Participant, Vancouver, BC)

Some parents stressed the importance of adapting the value they place on independence to the Canadian context, so that their children are better prepared to succeed in Canadian society.

"I give her more independence. It is a tendency back home to protect children. Here, each person has to be independent. It's necessary to blend the cultures. It is important for her to do things for herself." (Program Participant, Montreal, QC)

Mothers and families base the changes they make to their attachment practices on the different attachment beliefs, values, and practices they are exposed to in Canada and their own experience of what is effective and what is not.



"I came here; I saw other children playing with no mothers behind them all the time and nothing happened to them. That makes me think that I can -- that influences me. And also the way I raised my older child didn't work very well. Like, now he said to me, 'You have raised me with a lot of -- afraid of many things, fears of many things.' He says to me, 'I don't like the way you have raised me.'"
(Program Participant, Vancouver, BC)

Sometimes that evolution happens more because of a combination of external and internal pressure to do what is accepted in Canada than because of an evaluation of the pros and cons of the beliefs, values, and practices that mothers and families bring with them to Canada.

"I must follow here because I live here. I follow and when some people from my country see me do that they say, 'You didn't grow up here. They didn't make you grow up.' Like that, but I must just follow. Yes, I follow mostly here. I don't remember doing something which I did over there." (Program Participant, Toronto, ON)

It is challenging for parents to keep what is really valued to them and to their cultural community, as well as to facilitate their children fitting in to Canadian society.

"We really try to make them fit in, in this society, that's the thing. Yet at the same time preserve some of the things we knew from the past." (Program Participant, Fredericton, NB)

Mothers themselves feel a conflict in their identities and find raising children in such a state of internal conflict very difficult.

"I find myself, sometimes, buried alive. I think about myself. I was brought up in Algeria. I knew everything I could handle. How about my kids? They are neither Canadian, nor Algerian...and that's very...I don't know...they have a lack of home...Last year there we had an exhibition in the Arts Centre...where one of the artists said, 'Within us, we are all homeless.' And I found that yes, in a sense, I am home. Yeah, this is my home. But am I really home? I go back there. Am I really home? ..You are a stranger between the two. You are neither there nor here. That is really dangerous.Raising children in such a 'philosophy', when you're in that kind of a state, is very difficult..."
(Program Participant, Fredericton, NB)



"...I want him to figure it out for himself, but I just don't know if that's the right approach...I am battling within myself what is the right thing to do..." (Program Participant, Fredericton, NB)

They worry about what their children are losing, while at the same time recognize what their children are gaining.

"Our children do suffer. They are losing what we had ourselves. It's very hard to give it to them..." (Program Participant, Fredericton, NB)

"But also, they are getting something that we didn't have." (Program Participant, Fredericton, NB)

Children often acculturate more quickly than their parents and thereby become the cultural brokers in the family. This changes the power dynamic within the family, making parents feel inadequate, and giving more power to children, which often ultimately results in conflict between parents and children.

"Parents want to hold onto things from their own culture and children want to be Canadian." (Service Provider, Montreal, QC)

"The most prevalent issue in dealing with parents is the generation gap, the conflict between parents and children. Everyone is trying to adapt, trying to learn the language. Children usually learn the language more quickly so there is a lot more freedom for them. They want to forget everything from back home. The dress, the language. They don't want to follow religious beliefs or rules. In addition, children are often expected to do business transactions. Parents become children, and children become parents." (Service Provider, Halifax, NS)

"Sometimes even when the parents go to hospitals or anywhere, they use their children for interpretation. So the children know 'Okay, they don't know and they can't communicate anything.' That's why we tell the parents when they go for anything important, 'Don't take your children as interpreters because it's not good for you.' " (Service Provider, Montreal, QC)



In conclusion, the process of acculturation becomes a life-long challenge for every member of a family that migrates to this country. Parents struggle to keep what is really valued to them and to their cultural community, while at the same time trying to facilitate their children's integration into Canadian society. The struggle to find a balance goes well beyond the initial years of re-settlement and adaptation to their new environment. It arises over and over throughout the different life stages mothers and families face. It ultimately re-defines and permeates almost every aspect of their lives and every decision they make in building a future in Canada.

"I try to build a network with friends from immigrant associations, multicultural organizations. I try to maintain contact with my family in Bosnia. I am trying to make him feel good about being Bosnian. I want him to feel strongly about his origin. I want him to accept the new environment where he is, but not to feel that there is anything wrong with his mother and relatives." (Program Participant, Halifax, NS)

"You have two countries. You are a person of two countries. One foot in your country of origin, and one foot in Canada. You can never really bridge that gap." (Program Participant, Fredericton, NB)



Surviving Trauma¹

If you have lived through war.

If you have been a victim of violence.

If you have lost your country, family members, friends, community...

And if you feel

- | | |
|----------------------------|--------------------------------------|
| ..hopeless | ...afraid |
| ...very sad | ...anxious |
| ...angry | ...depressed |
| ...bitter | ...unable to express emotions |
| ...mistrustful | ...forgetful |
| ...unable to sleep | ...the need to use drugs and alcohol |
| ...troubled by memories | ...very guilty |
| ...unable to eat | ...shameful |
| ...unable to think clearly | ...suicidal |
| ...confused | |

YOU ARE NOT ALONE!

These are normal feelings and emotions that may result from traumatic events, even if those events happened a long time ago.

Traumatic events include war, torture, violent personal assault (emotional, sexual, physical), being a prisoner, living in fear, being publicly shamed, losing loved ones and natural disasters (earthquakes, floods, droughts, hurricanes).

Our instinct often allows us to survive traumatic events. When we are safe and out of danger, however, many of these feelings may surface and become overwhelming. Although some of us may go on living without connecting our present suffering to past experiences, it is possible that a single event may cause an emotional breakdown. That event may be as simple as a loud noise or meeting someone in the street, or as difficult as the loss of a loved one.

Each of us is affected in different ways depending on the traumatic experience, our age, gender, life history and our ability to cope. Two feelings commonly shared by survivors of traumatic events are guilt and shame.

⑥

¹ This fact sheet for program participants has been adapted from a brochure of the same title developed by the Metropolitan Immigrant Settlement Association, Halifax, NS. For copies of the original brochure, please call (902) 423-3607.



Guilt means feeling sad because we survived when others did not, or that we have a better life than people we love.

Guilt may also come from believing that we have caused, and/or contributed to the problem.



SHAME COMES FROM FEELING POWERLESS THROUGH:

- humiliation
- losing our identity
- depending on others for our basic necessities
- not being able to defend ourselves
- not being able to speak up
- not being able to help or protect others
- feeling abandoned by our loved ones

Children show the effects of trauma in ways that adults may not understand. Signs of trauma in children can include bed-wetting, nightmares, self-destructive behavior and extreme fear of being alone.

The effects of trauma in children may be missed because...

- parents or guardians may be suffering from the effects of trauma and be unable to attend to children's needs.
- adults often think that children forget and are less aware and less affected by traumatic events.
- children sometimes hide their pain if they think it will add to the suffering of their parents or guardians.

REMEMBER: Children need special care and attention.

These are some of the ways we can help ourselves:

- Acknowledge the pain without pushing it away.
- Speak about our experience and listen to others.
- Take care of ourselves physically, emotionally and spiritually.
- Recognize the positive effects of surviving.
- Provide and receive emotional support from others who have gone through similar situations.
- Be aware of the signs of trauma in our children.
- Seek help for ourselves and/or our children, if necessary.



Culture Shock¹

Culture shock is the name given to the physical and emotional upset that comes from having our familiar environment or boundaries greatly changed. Culture shock is a serious problem that affects almost everyone who becomes involved with a new culture. For many people, culture shock is a foreign idea.

Culture shock comes from:

- *• being cut off from the cultural signs and known patterns that we could formerly depend on, especially the subtle ways we normally have of expressing feelings. We are suddenly deprived of all the familiar clues and messages that we understand instinctively.
- *• living and/or working over an extended period of time in a situation that is unclear.
- *• having our own cultural values (formerly considered positive and acceptable) brought into question.
- *• being continually put into positions in which we are expected to function with maximum skill and speed but where the rules have not been adequately explained.

The following symptoms of culture shock can greatly affect family relations, including the development of secure attachment:

- Homesickness
- Boredom
- Withdrawal
- Isolation
- Need for excessive amounts of sleep
- Feelings of helplessness
- Compulsive eating
- Compulsive drinking
- Irritability
- Anger
- Exaggerated cleanliness
- Marital stress
- Family tension and conflict
- Exaggerated cultural pride
- Stereotyping of the new country and its citizens
- Hostility towards the citizens of the new country
- Loss of ability to work effectively
- Unexplainable fits of weeping
- Physical ailments (psychosomatic illnesses)

⑥

¹ This fact sheet is an excerpt from the brochure *The Heart that Breaks is Reborn: Culture Shock*, developed by the Metropolitan Immigrant Settlement Association (MISA), Halifax, NS. It is available in multiple languages. For copies of the original brochure, please call MISA at (902) 423-3607.



Stages of Culture Shock

1. Honeymoon Period

- Everything is new, interesting and exciting
- This can be a very positive time
- It can also be a difficult time, particularly for parents - children are excited, and want to try all new things (including potentially harmful behaviours such as smoking, drinking, taking drugs) while parents want to discourage these behaviours

2. Survival Stage

- The initial excitement has passed
 - Cultural differences become enlarged, causing stress.
- * Stress can also come from not being familiar with the rules of the new culture.

3. Gradual Integration

- Living in both cultures gets easier as things in the new culture become familiar.
- People learn the language and are able to participate actively in the adopted society.
- People who integrate can often give very good support to others who are affected by culture shock based on their own experience.

Culture shock affects people differently depending on the person's gender, religious beliefs, social class, age, etc.

People who have been forced to leave their homeland (refugees) are likely to have greater difficulties integrating than those who have chosen to immigrate.

The effect of culture shock may be felt more than once, with different intensity. Although most of us adjust and are able to function in the new culture, this is a very difficult process for some people (especially older immigrants) who, in some cases, are never able to integrate.

On a positive note...

Culture shock is not a totally negative experience. Living in a new culture can be enriching. Culture shock offers a unique opportunity for learning. It demands reflection and self-examination. It forces a re-evaluation of all personal relationships. It allows for explorations of new attitudes and behaviours. It allows learning in an environment not available to culturally isolated individuals.



Maintaining Effective Practices



"Somehow I find the Western World doesn't respect our ways of parenting. When you go to the Western World, you are being forced to raise your children the way that society here is raising their own children. When you are loving parents and you are doing what is right, even though it's not the Canadian way, I think it should be respected."

—Program Participant, Edmonton, AB

Grljenje i ljubljenje الأهتمام



Section IV

Maintaining Effective Attachment Practices

In order to support and promote effective cross-cultural attachment practices in overall programming it is important to understand the barriers faced by immigrant and refugee mothers/families, and methods for addressing these barriers.

Immigrant and refugee mothers and families face many barriers to maintaining effective attachment practices. These include: a. their socioeconomic status, b. racism and discrimination, c. the lack of validation of their effective attachment practices, d. stress within their families, e. violence in intimate relationships, f. child abuse, g. lack of informal support, h. lack of awareness of formal support, i. discomfort seeking formal support.

There are many effective strategies for addressing these barriers, and providing support to immigrant and refugee families. The strategies are not mutually exclusive – they are complementary and more effective when they are applied comprehensively. Strategies developed out of the findings of this project fall into the broad categories of: a. providing a sense of home; b. outreach; c. creating inclusive environments and programs; and d. creating supportive environments and programs.

A Socioeconomic Status

Income and level of education are well known to have an impact on parental beliefs, values and practices. Often people of the same socioeconomic status from different countries have more in common than people of different socioeconomic status within the same country.

It is difficult to consider the impact of socioeconomic status of immigrants on attachment beliefs, values, and practices, because immigrants' level of education and income level do not necessarily correspond. Many of the mothers interviewed have some level of post-secondary education, yet are living below the poverty line.

Contrary to the expectation of a better life, immigrants and refugees often find that their socioeconomic status lowers dramatically when they arrive and for a number of years afterwards.

"I have been here for five years. I love here, the weather, the culture, everything. But we always think 'Maybe we should go back'. Yes, we always think about that. I think it comes with the obstacles that you find along the way. Especially if you have a profession back home. A good job and very good opportunities.



And here, when you come, you realize, 'What am I doing here?' You have to start from the bottom again. That's the hardest part. And when the children come and you have to raise them, it's even harder. Because you have to deal with the children and with the difficulties that you are experiencing in your job."

(Program Participant, Edmonton, AB)

As a consequence, mothers talked about not being able to do some of the things they wanted to do with their children, not being able to buy their children what they wanted, and not being able to spend as much quality time with their children as they wanted. They face these challenges because of the lack of money, the need to work long hours, to look for work, or to spend time being re-trained and/or learn English.

"There are many, many things that I would like to do. My children see advertisements for things, and I can't afford to do them. There are 5 kids and 2 adults in my family. Even going out to dinner is too expensive." (Program Participant, Toronto, ON)

"I have no money for what they want. I have no money for fun. Of course it affects my relationship with my children! They're not happy. They don't study, don't want to go school because kids make fun of them for using second hand clothes." (Program Participant, Vancouver, BC)

"My son needs more time than I can give him. All immigrants face the problem of lack of time. [I have to figure out] how to establish a strong relationship with my son in the relatively short time I have to spend with him." (Program Participant, Halifax, NS)

When mothers and families are poor to the extent that they have difficulty affording adequate food for their children, even such basic attachment practices as feeding their children are jeopardized. They may be unable to buy the ingredients for their children's favourite dishes, and thus can not demonstrate their love for their children by preparing their favourite dishes. Mothers try to explain their difficulties to their children and to compensate by demonstrating their love in other ways.

"We say 'We love you, but we don't have money to buy that for you.' I sing for my daughter, play with her, talk nicely to her. I tell her, 'When I study English and get a job, I will buy things for you.' I hug her and say 'I love you. I care about you but when I don't have money, please understand me.' " (Program Participant, Vancouver, BC)

They particularly regretted not being able to afford to go back to their countries of origin to see family and enable their children to develop relationships with their grandparents, uncles, aunts, and cousins. Their inability to go back to their countries of origin is often also related to their immigration status in Canada.

"All of my family is in Iraq. I miss my mother, father, and brother but can't afford to go back home to go see them." (Program Participant, Vancouver, BC)

While many mothers face challenges due to poverty, immigrant and refugee mothers are in a particularly difficult position. Their qualifications and experience are not recognized in Canada but they can-



not afford to study and get qualifications that are accepted, particularly if they are not eligible for government support because of their immigration status. The high cost of child care adds to the cost of women studying to get acceptable qualifications, especially if their partners are also in a position of needing to be re-trained before they can secure employment.

"My husband has finished his studies but he is not working. He applied for and tried to get work but he has not yet been successful. Because of the lack of relatives, of family, you can't really leave your children for childcare and go somewhere. Because of the cost of daycare, I can't go out and study and upgrade myself to work." (Program Participant, Toronto, ON)

B Racism/Discrimination

In addition to the challenges of living in poverty and the systemic discrimination inherent in the difficulty they face in obtaining jobs that match their qualifications, immigrants also discussed the more blatant discrimination and racism they face.

"Here you face racism in the workplace because you don't speak English very well, or because of your accent you don't get a job. Even though you are well qualified, maybe more than somebody else, but because you don't have the language, the perfect language, you don't get the chance. This is another way for you to struggle here." (Program Participant, Edmonton, AB)

"At the beginning, the stress I had was that I had a two year old girl, and my husband was studying, and I had to look for a job. As a new immigrant, it was very hard for me to look for a job. Even though I got my degree in Canada, ...and I speak English, they said, they will hear my accent. At that time I don't know much about the system, the Canadian system." (Program Participant, Halifax, NS)

"People here are not friendly. And one thing, you know, what you call it, racism. It happens to me often." (Program Participant, Fredericton, NB)

The racism they face also has an impact on their children. Children may see their parents, who are supposed to protect them and act as their role models, demoralized. From the parents' perspectives, it is extremely challenging to provide their children with a sense of security and self-esteem when they are being treated as less than human. Further, women interviewed clearly identified the fact that their children face racism and discrimination in school, and that when they or their children try to do something about it, they are not heard or validated.

"My son is being discriminated against in school. The teacher doesn't listen to my son. The teacher says 'It's your imagination. That doesn't exist here.' I say, 'No, that's what my child is saying. It's not my imagination.' My son fought with another child because of racist comments he made against him and the teacher kicked them out. Other children are hitting and bothering my son. I volunteer at the school so I see it. When I tell the teacher, she doesn't do



anything. My child is scared to talk to the teacher. The teacher says to him, 'You don't have to tell your mother what is happening here. You tell me.' He says, 'I'm telling my mother because you don't believe me.' The teacher tells me to leave him alone to resolve his problems. I want the teacher to listen to my child." (Program Participant, Vancouver, BC)

Parents who immigrated to Canada at a young age talked about their experiences with racism as children, and the lack of support from their own parents who may not have experienced racism as children themselves. As a result their parents often did not know how to provide them with support when they experienced racism, and they in turn did not learn strategies for providing their children with support for experiences with racism.

"Canada is home but I still feel distant. We were the second Latin family in Alberta. It was hard in school to be accepted. There were always differences. It was a racial thing. I never questioned the actions of my mum. She was really firm with us. I didn't have an attachment to society. I was more affected by what she told us. I knew we were different from them. But [it is hard not to feel] acceptance. People don't see your abilities. My mother kept her challenges in integrating to herself. It would have helped if my mother talked about it. She told us to ignore it." (Program Participant, Edmonton, AB)



Lack of Validation of Effective Attachment Practices

In addition to the challenges parents and families face due to poverty, racism, and discrimination, the lack of validation of their effective attachment practices in mainstream society can jeopardize newcomers' ability to maintain those practices. As their self-esteem is diminished, they may stop using effective attachment practices without replacing them with equivalent alternatives. This has a detrimental effect on their relationships with their children and threatens their children's secure attachment. This threat is particularly acute when children going through the process of migration and resettlement have a heightened need for their parents' responsive care.

"The approaches used in parenting programs are patronizing. They are about teaching rather than empowering us. Immigrants get instructions on how things should be without consideration of cultural factors. It is very destructive. It makes people believe they're doing something wrong and that their parents did something wrong. Newcomers are trying to accommodate giving up proven methods of bonding with their children. This creates a gap in building a relationship between parents and children. If parents don't manage to maintain a system of values within family, parents and children go their separate ways. It causes alienation. Children by their nature assimilate so they are accepted in the mainstream. They feel they are different in a way and are trying to change the patterns they find at home. This creates conflict. I myself find it very difficult." (Program Participant, Halifax, NS)



D Stress Within the Family

"Children take on stress, whatever the source of stress for parents is...The sources of stress are different for parents, but the kids are the ones who take it anyway."

"We don't have parents and relatives to send children to when we are stressed. Our kids go through the stress that we go through." (Program Participant, Fredericton, NB)

When a family migrates, a child may experience her/his own stress while at the same time their parent or caregiver is emotionally unavailable due to the stress of the process of migration and resettlement. When a child experiences too much stress or a relatively unavailable attachment figure, this can lead to an internal representation of the environment as dangerous and of the self and others as ineffective in moderating those dangers. This might make a child fearful of exploration, uncertain of availability of safety, doubtful of his/her ability to master environmental demands, and distrustful of significant others. These outcomes affect a child's development at all levels.

E Violence against Women

Woman abuse is a terrifying reality for hundreds of thousands of women from all walks of life in Canada, and around the world. It is therefore not surprising that the issue of violence in their intimate relationships came up in our interviews with women, particularly when the stressful context of their lives is taken into account. While the ways in which women in a given culture deal with violence against them may differ, the fact that it exists is chillingly universal. Woman abuse exists in all cultural and socioeconomic and religious communities. All women face barriers to leaving their abusive partners. These barriers include fatigue from daily humiliation, shame that this is happening to them, concern over the fate of their children, lack of affordable housing or childcare, and unequal employment opportunities. Immigrant women also face additional barriers such as fear of police involvement because of racism in Canada or a history of persecution in their country of origin, fear of deportation, fear of the response of their community, and for some of them a belief that marriage is binding until death. The women who spoke with us emphasized these obstacles to making change and worried about the impact that abuse has had on their ability to parent.

"My oldest child remembers my husband being physically abusive. He is really afraid. He says, "I will protect you." I was concerned that this was affecting the children a lot, so I attended the COPE Parenting Program. I was conscious that I shouldn't scream at my kids but I still did it. The program helped. Sometimes I'm concerned that my kids are not growing up in a family with love and affection. I want the best for them." (Program Participant, Toronto, ON)



F Child Abuse

Child abuse is a difficult topic to broach because of how emotionally loaded it is. Yet most of the mothers and service providers interviewed brought it up during their interviews even though they were not directly asked about it. Many of them were frustrated by the racism and systemic discrimination behind assumptions that abuse occurs in all immigrant and refugee families. Many of them are faced with children who threaten to call the authorities if they even tell them what to do and authorities who are more likely to jump to conclusions regarding child abuse because they are newcomers. Some of the parents interviewed did admit to coming from cultures where physical discipline is considered an acceptable way of raising children. They understand, however, that it is not considered acceptable in Canada, and would like to learn about alternatives.

For those women who spoke of violence in their adult relationships, their own negative experiences of early attachment in their families of origin often came up in the same conversations. They spoke of the cycle of violence that carried on from one generation to the next, and of their struggle, often without support, to break that cycle.

With all that said, it is critical to emphasize that children are a vulnerable group that needs protection. Child abuse jeopardizes the development of secure attachment during early childhood and thus has long-term effects on children's mental health. And child abuse is not exclusive to immigrant and refugee families - child abuse happens across cultures and is never acceptable. It always requires intervention but that intervention needs to incorporate consideration of families' cultural context and migration experience in order to be most effective. In addition to intervention, programs need to focus on prevention of child abuse, working within the complex context of immigrant and refugee families' lives.

G Lack of Informal Support

As mentioned repeatedly throughout this toolkit, immigrants and refugees often have to deal with the many challenges facing them without the support of extended family, and community that they are accustomed to. Many of them have lost family and friends in wars, or have left them behind in their countries of origin. Many of their family members and friends are scattered all over the world, or live spread apart in Canada.

"Only my family can support me because I remember when I had my daughter, my family, my sister, my friends came to see me to help me.... It was very helpful to me. My sister, my friends came...I felt very good." (Program Participant, Halifax, NS)

"You have your extended family in your homeland but here you are by yourself. There, our extended family looks after our children. Here we have to get a babysitter, but we have no money." (Program Participant, Vancouver, BC)



Even when immigrant and refugee families are trying to establish another social network to replace the one that they have lost, they find it to be a difficult and lengthy process.

"Making a new start is difficult. We make only friends who speak the same language. Friends are an important factor. We want to know more friends here but we're scared. It is challenging as a mature adult to make friends in Canada. After a few years, you make friends, but it's not like at home where we have known our friends since children. Here we don't feel secure because we don't know people for that long, even people of the same culture/language."
(Program Participant, Vancouver, BC)

H Lack of Awareness of Formal Support

Mothers expressed a lack of knowledge of the programs and services available to them or how to gain access to them. Many of them have come from countries where such formal support programs and services are non-existent. Many of them did not need such services in their countries of origin, where they spoke the language and knew the system, and may not have faced challenges such as living in poverty and inability to find employment.

"There's one thing. People don't know much about MISA. I didn't hear about MISA... I didn't know about MISA until one day my friend told me 'I'm going to MISA.' I said, 'What are you doing in MISA?'. She told me 'I'm going to English classes. I didn't need English classes so I didn't go to MISA for one year. Later on I knew that MISA was good for many aspects. To get work, to know what is the country, to know the laws and the regulations, and to have resources, and to ... use my potential.'" (Program Participant, Halifax, NS)

I Discomfort Seeking Formal Support

Even when newcomers are aware of formal support services available to them in Canada, many of them do not feel comfortable seeking formal support for 'family issues'.

The concept of counselling is often foreign to them as in their countries of origin, one does not go to 'strangers' to discuss personal matters and get support. In addition, women may be particularly uncomfortable seeking services to address their experiences of abuse.

"People at home don't look for people to talk about problems with. They talk to family and friends but won't go to someone who specializes in that."
(Program Participant, Hamilton, ON)



In addition, being accustomed to having family members and friends care for their children, many of them do not feel comfortable having strangers look after their children.

"You don't have to worry when you are at home with your family because your mother, your sister, your aunt is going to look after her. But here you have to leave your child with strangers. That is very difficult..." (Program Participant, Edmonton, AB)

Support Strategies

For most interviewees, informal support, that of families, extended family, neighbours and community is much more powerful and helpful than formal support. In addition they are often more comfortable seeking informal support. Most of them, however, are here without their families, and close friends. And most of them have experienced and are experiencing the stress of migration and resettlement. There is a heightened need for formal support from agencies and programs to alleviate the burden felt by mothers and families, formal support that better replicates important features of informal support.

Support is needed for stressors related to the experience of migration and resettlement - counselling, job searching, sometimes just informal groups where women can socialize with each other and share problems and joys and start to replace the network that they've lost. Immigrant and refugee parents need support that respects and validates rather than criticizes their effective ways of parenting and promoting attachment with their children.

Agencies can address the needs of immigrant and refugee mothers, families, and communities by **offering support** to them in overcoming the great challenges inherent in promoting attachment within a different context from that in which they were raised, and **learning from** and building on the strengths apparent in a group that is upholding strong values, maintaining positive practices, and incorporating new ideas in promoting attachment with their children.

Support strategies should address the following major categories: a. Creating Inclusive Environments and Programs, b. Creating Supportive Environments, c. Providing a Sense of Home and d. Outreach.

A Creating Inclusive Environments & Programs

To support and promote effective cross-cultural attachment practices in your overall programming it is critical to create inclusive environments and programs. The following are some concrete suggestions:



- Get to know the cultural backgrounds and languages most frequently spoken at home in the client population.

Whenever staff positions become available, try to increase the variety of languages spoken on staff. Professional interpretation and translation services can fill in where there are gaps.

- Provide culturally sensitive health information, resources, health promotion and health education and programming in a variety of languages.

Beyond language, programming and program material needs to be culturally sensitive and inclusive of behaviours and contexts that would be relevant to many families from many places. Hiring of staff with understanding of different cultural backgrounds can also ensure that there is an understanding of different cultural frameworks, and thereby affect the nature of programming. These basic elements of accessibility need to be built into budgets and program design.

- Encourage peer support and facilitate cross-cultural exchange in the design and delivery of parenting programs.
- Encourage the co-facilitation of workshops and activities by members of both the dominant and non-dominant ethnic, racial, and cultural groups.
- Build on parenting knowledge that families bring from their own cultural contexts.

While North American service providers work with particular models for child development which are sound and accepted in the West, parents come to North America from other parts of the world with strong cultural understandings of child development that have long histories to them. A two-way exchange of knowledge with parents can produce a mutual enrichment that ultimately benefits the child in question.

- Make a special effort to celebrate differences and to transmit to those who are using services the need to welcome and share diverse attachment practices.
- Facilitate group exercises, discussions and informational sessions to raise awareness and education on topics such as:
 - the meaning of parenting
 - the meaning of home
 - resettlement in a new society
 - intergenerational differences and similarities
 - raising children in Canada
 - the migration experience
- Design program activities based on concepts parents used in our research, such as:
 - singing/reading practices
 - carrying practices
 - touch and showing affection
 - sleeping practices
 - listening practices
 - playing practices
 - teaching practices



Here are some concrete examples of activities:

- Lap games, reading and singing lend themselves particularly well to cross-cultural attachment learning. Mothers are able to share songs and examples from their own cultures, while English or French language ones can be taught by the facilitator.
- Ask women to bring in any items or pieces of cloth they use now (or have used in their countries of origin) to carry their young children. Have them demonstrate the use of these items to other program participants. In the project's testing of this activity it was very easy to organize and women spontaneously got involved. It spurred discussion of different carrying methods used in different countries and women were very interested in learning techniques from each other.
- Ask women who have learned the practice of infant massage in their countries of origin to demonstrate the techniques they use to other program participants, and explain whether they use them to fulfill particular needs of their children. Encourage the group to discuss the benefits of the various techniques they have shared.



- Provide materials that support and use examples from a variety of family groupings, including single parent families, and those where extended family play a significant role.
- Provide free childcare and transportation for low-income families.

Free childcare may make the difference between whether parents and families living in poverty can access services or not. Whether services are located in a rural or urban setting, transportation is a critical factor to ensuring that families are able to fully participate in programs. For newcomers who settle initially in large urban settings, using the public transportation system can feel intimidating. Providing easy-to-use maps that provide clear, low level English directions is important. Maps that are available in languages spoken by newcomer communities are especially helpful if they are available or can be created. Accompanying individuals and/or groups of participants on local public transportation routes and identifying key places of interest can provide practical support. Programs that focus on reaching isolated families need to consider costs of transportation and allocating public transportation tickets as part of a budget. Ideally, having staff pay an initial visit to families' homes is an effective method of building trust and getting to know families. Accompanying parents to other health and social service agencies for their first visits can also be of crucial help as they adjust to life in a new country.

- Train and hire staff and select volunteers from communities served, rather than relying solely on use of interpreters.

"My reason for being here is Changing Together. I volunteer here. People are willing to show you where everything is. There are no barriers. In other places, people ask, 'Does she know what she's doing?' Here, people are from all over." (Program Participant, Edmonton, AB)

In order to provide a truly accessible health and social service environment it is essential to have staff who represent the cultural make-up of the community. Sometimes newcomers may not have



Canadian experience or professional qualifications for health and social service disciplines. More often, their impressive qualifications and experience are not recognized and valued in Canada. It is critical that agencies put time, energy, and financial resources into equitable hiring practices.

- Provide volunteer opportunities for program participants.

It is important to provide opportunities for immigrants and refugees to gain the necessary skills and experience to participate in decisions that affect their lives. Providing opportunities for parents to volunteer in order to build new skills and share their experience is as important as the services offered. Program participants can build on their experience as volunteers and seek positions where they can effectively serve their communities because of their intimate understanding of the experience of migration and resettlement.

"I'm working with the communities. I started taking parenting courses at drop-in-centres and I learned so many things from them, and then I decided to be involved in the community. So I've been taking different courses, for instance, Nobody's Perfect for facilitators. I took a training called Education on Prevention of Wife Assault, facilitating for Spanish-speaking people... You feel great when you can do something for the community. Because I can understand how they feel when they came here and they didn't have any support, and I've been through that already, so it's a good feeling when you can do that, but like I said, it's a process. When you're ready...you'll be able to help your friends and your family and your community." (Program Participant, Toronto, ON)

- Establish anti-oppression policies applicable to staff, volunteers, and program participants.

If an organization or agency does not already have anti-oppression policies in place, work together as a staff group with volunteer and program participant input to develop policies that are uniquely suited to the organization. Use policies developed by other organizations as starting points.

- Post anti-oppression statement in different languages and introduce it to program participants

Post a plain language version of the anti-oppression policy in English and other languages that are spoken in the community. Introduce the policy to program participants in all areas of programming from individual counselling to group workshops. When opportunities arise, gently remind and educate individuals about the policy and challenge perceptions, comments, expressions, or behaviours that may be discriminatory or prejudicial in nature. This helps to create a safe space for all staff, volunteers, and program participants.

Here is a concrete example of an opportunity to challenge comments:

- If a racist rhyme that many of us learned in childhood is spoken, explore the history of its origin and the meaning it holds for many people who were discriminated against with its use. Encourage participants to find other ways of expressing what they are feeling and thinking that do not disparage, offend, or put down groups of people. Women may take home such discussions and share with their children their right to feel safe and secure in their skin, their homes, their communities, their cultural practices and their sexuality.



- Incorporate anti-oppression check-ins into staff meetings.

At the beginning of each staff meeting, provide space for an 'anti-oppression check-in'. This allows all staff members to share incidents of discrimination they have experienced or witnessed within the work setting or the larger community. Staff members are given the opportunity to have their experiences heard and in addition become aware of the frequency and extent of discrimination that occurs. As the process evolves, staff may seek support or feedback from the group, and/or ask for suggestions on how to respond the next time a similar incident takes place.

- Conduct anti-oppression workshops in house.

Have staff take turns delivering workshops to each other on particular forms of discrimination, such as racism, and homophobia. This can lead to the processing of past experiences of hurt as a result of discrimination and to much learning and growth amongst the staff group. In particular, important strategies for intervention when faced with discrimination may emerge. If the staff group prefers, consider hiring an outside facilitator for such workshops. After staff members have experienced them, consider offering similar workshops to volunteers and program participants.

- Put a formal complaint protocol into place

Working towards an environment free of oppression is a process that takes a lot of time and hard work. Even for those who have done a lot of work in the area of anti-oppression and made a lot of progress, there is always more to learn and more to be done.

Ensure that a formal complaint protocol is in place for staff, volunteers and program participants to use if they have an experience within the organization that is not in line with the anti-oppression policy. Consider any such complaints as opportunities to redress oppressive experiences and learn how to prevent staff, volunteers or program participants from having similar experiences in the future.

B Creating Supportive Environments and Programs

It is critical to create supportive environments and programs by responding to the unique needs of program participants. It is important to provide emotional support and mental health related services within a cross-cultural framework, both at the individual and group levels. The following are some suggestions for ensuring supportive environments and programs.

- Incorporate relaxation into programming.

Some mothers may just want a chance and some space to relax in order to deal with chronic stress, anxiety, pain, and trauma. Because women do not often get time to focus on themselves and time to care for themselves, teaching relaxation techniques in a safe space and providing childcare can be a critical part of programming. Such a relaxation group could also act as an entry point to services that newcomer women are not often comfortable seeking certain types of support (e.g. individual counselling).



- Provide Parent Relief as part of core programming.

As mothers are most often the main caregivers of children, it is critical to provide child-care support in order that they may access health and social support services. Ensuring that free childcare is available to all families attending programs will help to make programs and services accessible to all parents.

Newcomer families often have no respite from their child-care responsibilities because of the lack of extended family or support base within their community. The provision of short-term parent relief that is flexible can offer parents an opportunity to take a break, do something good for themselves, attend a class, or visit a friend. Such support can make a large difference in the lives of newcomer families.

The nature of childcare offered, and the diversity of childcare staff employed are important issues because of the long-lasting impact of children's early experiences. In their countries of origin, parents can turn to other family and community members, other people with similar values, to share the role of caring for their children. It is important for parents to feel that there is at least some openness to their beliefs, values, and practices in an environment they are going to entrust with the care of their children. When children are cared for in a way that is consistent with the way they are cared for at home, they are more likely to feel secure. Hiring staff that reflects the diversity of the children being cared for is an effective way of providing culturally consistent care. It is important to follow this and other strategies suggested in this section within the child-care setting. For example, ensure that the environment and materials of a child care program reflect the diverse backgrounds of the children being cared for. This will give them the message that their diverse backgrounds and identities are valued.

Providing a Sense of Home

"Home is the basic unit of society. It is very important for the development of the family and the child." (Program Participant, Vancouver, BC)

Providing a welcoming environment where new immigrants and refugees feel comfortable and have a sense of belonging is critical in ensuring that programs are accessible and address the unique needs of parents and families who have lost their original homes and are struggling to find new ones. Here are some suggestions for providing a sense of home for program participants.

- Provide a welcoming and safe environment.
- Post a world map with "Where were you born?" written on it in many languages and ask program participants to mark their countries of birth with pins.
- Post diverse artwork, posters and images on walls. Encourage program participants themselves to submit artwork done by them or their children.
- Include extended family in programming.



- Ask program participants to bring in or recommend music from their country of origin to play during drop-ins or other programs and celebrations.
- Mark and or celebrate religious events and holidays in addition to those recognized by North American Christianity.
- Use a multi-faith calendar and allow families to tell about their religious practice as a way of promoting understanding and creating multi-faith sacred space.

D Outreach

As many immigrant and refugee parents and families are unaware of the services available to them and/or are uncomfortable accessing formal support services, yet face a heightened need for formal support, outreach is an essential component of programming. Here are some suggestions for initiating outreach to communities:

- Work with communities in the catchment area to ensure that they are aware of programs and services provided and that their participation in programs is encouraged and supported in any way possible. This may involve working in partnership with community leaders and/or ethnospecific agencies.
- Ask community representatives what would facilitate the participation of their communities in programming and adapt programming to meet their needs if necessary.



Culturally Responsive Resources



“Our organization serves children and families new to Canada from many different countries abroad. Discovering and working within the attachment practices of such a diverse population is both challenging and fascinating.”

—Service Provider

Section V

Culturally Responsive Resources

This section is intended to supplement the information contained in this toolkit by listing recommended resources for further information and/or support. An attempt was made to include resources from across the country but there were restrictions based on our space limitations and on the resources available. It is not an exhaustive list but a good starting point. The following resources are listed according to the corresponding sections of the toolkit under the categories, Program Support, Theory and Research, Videotapes, Sources of Additional Information and Support.

I. Attachment Across Cultures

Program Support

There are no Canadian print program support materials other than this toolkit available on Cross-Cultural Attachment. There are also no Canadian training courses currently available on Cross-Cultural Attachment. The following is a list of sources of training on attachment.

Crisci, Kussin and Mayer, Consultation, Counselling and Training

1881 Yonge Street, Suite 614

Toronto, ON M4S 3C4

Tel: (416) 480-1611 Email: ckmadmin@ckmconsultation.com

Fax: (416) 480-2922 Web-site: www.ckmconsultation.com

Crisci, Kussin and Mayer, Consultation, Counselling and Training, consists of three social workers in a unique group private practice. Geraldine Crisci, Annette Kussin and Nancy Mayer have combined their many years of experience and knowledge to offer excellent services in counselling, consultation and training. Since their opening in 1997, they have provided training to many organizations in Toronto, Ontario, and Canada. They offer their own training program and training designed for other



agencies. They are known and respected in the community for their counselling services, particularly related to trauma and attachment. They are also able to meet a variety of training, consultation and counselling needs because of their individual expertise and interest.

Infant Mental Health Promotion Project (IMP)

c/o Department of Psychiatry
The Hospital for Sick Children
555 University Ave.
Toronto, ON M5G 1X8
Tel: (416) 813-6062 Email: rhonawolpert@sickkids.on.ca
Fax: (416) 813-5326 Web-site: www.sickkids.on.ca/imp

The Infant Mental Health Promotion Project (IMP): designs and runs innovative training programs for service providers from different disciplines; develops teaching materials and information on infant development and parent-child relationships; offers information and support to service providers; and develops models and training for community workers in the use of innovative, practical interventions for infants and their families.

Right from the Start: An Attachment-Based Course for Parents

Right from the Start is an eight-week parent-training course, using attachment theory as a framework, to enhance caregiver skills in reading infant cues and responding sensitively. The course also incorporates current wisdom about parent training, adult education, and large group processes. The primary goal of *Right from the Start* is to improve parent-child interaction in order to foster infant attachment security. Group participation and networking opportunities are also expected to have a positive impact on parent functioning. For more information contact the Infant Mental Health Promotion Project (IMP) at the above address.

Theory and Research

Bowlby, J. 1969/1982. *Attachment and Loss: Vol. 1. Attachment*. New York, NY: Basic Books.

Bowlby, J. 1973. *Attachment and Loss: Vol. 2. Separation*. New York, NY: Basic Books.

Bowlby, J. 1980. *Attachment and Loss: Vol. 3. Loss*. New York, NY: Basic Books.

Cassidy, J and Shaver, PR, eds. 1999. *Handbook of Attachment: Theory, Research, and Clinical Applications*. New York, NY: The Guilford Press.

Franktman, MG. 1998. Immigrant Mothers. What Makes Them High Risk? In CG, Coll, JL. Surrey and K. Weingarten, eds. *Mothering Against The Odds: Diverse Voices of Contemporary Mothers*. New York, NY: The Guilford Press.

Harwood, RL, Miller, JG and Irizarry, NL. 1995 *Culture and Attachment: Perceptions of the Child In Context*. New York, NY: The Guilford Press.

Levy, TM and Deans, M. 1998. *Attachment, Trauma and Healing*. Washington, DC: Child Welfare League of America.

McCain, MN and Mustard, JF. 1999. *Early Years Study: Final Report*.

Reebye, PN, Ross, SE, and Jamieson, K. 1999. *A Review of the Literature on the Development of Attachment Theory and the Study of Cross-Cultural Practices Influencing Attachment*.



Videotapes

A Simple Gift: Comforting your baby. 10 min.

A Simple Gift: Comforting Your Baby is a unique Canadian videotape which provides specific well-researched information about the importance of the infant's attachment relationship with parents in the first year of life. The information is presented in clear, easy-to-understand language with examples of when and how to respond to an infant's distress in order to promote a baby's trust and confidence to explore the world. The video has been carefully prepared by a team of experts in the field of child development and parent-child attachment in order to foster optimal parenting.

Order from:

Infant Mental Health Promotion Project (IMP)

c/o Department of Psychiatry
The Hospital for Sick Children
555 University Ave.
Toronto, ON M5G 1X8
Tel: (416) 813-6062 Email: rhonawolpert@sickkids.on.ca
Fax: (416) 813-5326 Web-site: www.sickkids.on.ca/imp

Sources of Additional Information and Support

Canadian Institute for Child Health

Suite 300, 384 Bank Street
Ottawa, ON K2P 1Y4
Tel: (613) 230-8838 Email: cich@cich.ca
Fax: (613) 230-6654 Web-site: www.cich.ca

The Institute is an organization concerned with improving children's health and well-being. The organization works to ensure that this goal is met through many publications and resources for parents and health professionals. The organization's web-site includes a resource and publication catalogue concerning children's health, development and environments.

Child and Family Canada

Email: ghuot@cfc-efc.ca
Web-site: www.cfc-efc.ca

Child and Family Canada is a unique Canadian public education web-site. Fifty-two Canadian non-profit organizations have come together under the banner of Child and Family Canada to provide quality, credible resources on children and families on an easy-to-navigate web-site. Includes a Virtual Library.

Global Childnet

Email: Gcnet@unixg.ubc.ca
Web-site: <http://edie.cprost.sfu.ca/gcnet/index.html>

An organization that uses the Internet to offer a range of easily accessible, child health related, on-line services. These services include databases and other information on issues related to the well-being of the world's children.



The Hincks-Dellcrest Centre/Institute

440 Jarvis Street
Toronto, Ontario M4Y 1E1
Tel: (416) 924-1164 Email: info@hincksdellcrest.org
Fax: (416) 924-8208 Web-site: www.hincksdellcrest.org

The Hincks-Dellcrest Centre is dedicated to promoting optimal mental health in infants, children, youth and their families, and to contributing to the achievement of healthy communities. Their broad range of services includes prevention, early intervention, out-patient services, day treatment, residential treatment and mandated services. These services are enriched by their activities in research, program evaluation, the education and training of mental health professionals and the use of volunteers. The Hincks-Dellcrest Institute, a sister organization of the Centre established in 1986, is dedicated to helping develop the body of knowledge in the field of child, youth and family mental health, and provides advanced, post-specialty training for children's mental health professionals. As a resource to the broader community, the Institute has established both a national and international sphere of influence.

Invest in Kids

Invest in Kids Foundation
439 University Avenue
18th Floor
Toronto, ON M5G 1Y8
Tel: (416) 977-1222 Email: mail@investinkids.ca
Fax: (416) 977-9655 Web-site: www.investinkids.ca
Toll Free: 1-877-583-KIDS

Invest in Kids is a not-for-profit foundation dedicated to the healthy social, emotional, and intellectual development of children aged zero to five. They are working through research, public education and awareness, and training, to provide the skills Canadians need to positively influence the emotional, social, and cognitive development of our youngest children.

Voices for Children

3 Rowanwood Avenue
Toronto, ON M4W 1Y5
Tel: 416-413-0301 Email: voices@voices4children.org
Fax: 416-413-1012 Web-site: www.voices4children.org

Voices for Children connects people with knowledge and organizations with each other. The focus of their work with organizations is to increase organizational capacity to address issues comprehensively and collaboratively. Voices for Children connects people with knowledge by making current, expert knowledge about what to do for children available, accessible and applicable.



II. Beliefs, Values, and Practices

Program Support

- Cline, K. 1999. *Chinese Massage for Infants and Children: Traditional Techniques for Alleviating Colic, Teething Pain, Earache and Other Common Childhood Conditions*. Inner Traditions International, Ltd.
- Granju, KA, and Kennedy, B. 1999. *Attachment Parenting*. New York, NY: Pocket Books.
- Lawrence, RA. 1989. Psychologic bonding. In *Breastfeeding: A Guide for the Medical Profession (3rd Edition)*. Mosby, USA.
- Leboyer, F. 1997. *Loving Hands: The Traditional Art of Baby Massage*. Newmarket Press.
- McClure VS. 1989. *Infant Massage – A Handbook for Loving Parents*. Bantam Books.
- Priya, JV. 1992. *Birth Traditions and Modern Pregnancy Care*, Rockport, MA: Element, Inc.
- Sears, W, and Sears, M. 1993. *The Baby Book: Everything You Need to Know About Your Baby – From Birth to Age Two*. New York, NY: Little, Brown and Co.
- Warder-Morrison, N, Anderson, J, and Richardson, E. 1990. *Cross Cultural Caring: A Handbook for Health Professionals in Western Canada*. Vancouver, BC: University of BC Press.

Theory and Research

- Agnew T, Gilmore J, and Sullivan P. 1997. *A Multicultural Perspective of Breastfeeding in Canada*. Minister of Public Works and Government Services Canada.
- Coulter, J. 1999. *Benefits of Massage for Infants and Mothers*. IMPrint. 25 (Fall): 6-9.
- Harkness, S. and Super, CM. 1996. *Parents' Cultural Belief Systems: Their Origins, Expressions, and Consequences*. New York, NY: Guilford Publications.
- Small, M.F. 1998. *Our Babies, Ourselves: How Biology and Culture Shape the Way We Parent*. New York, NY: Anchor Books.
- Okun, BF. 1998. *Understanding Diverse Families: What Practitioners Need to Know*. New York, NY: Guilford Press.
- Macrae, NC, Stangor, C, and Hewstone, M. 1996. *Stereotypes and Stereotyping*. New York, NY: Guilford Publications

Videotapes

The Importance of Touch: A Step-by-Step Guide to Infant Massage and Touch in Labor and Infancy: A Clinical Monograph for the Healthcare Professional

Order from:
 Johnson and Johnson Information Centre
 Consumer and Professional Relations Department
 890 Woodlawn Road West



Guelph, ON N1K 1A5
 Tel: 1 800 361-8068
 Fax: (519) 826-6205

Gentle Touch® Infant Massage. Emma Miller. 47 min.

Order from:
 Gentle Touch Warehouse
 1891 Goodyear Avenue, Suite 622
 Ventura, CA 93003
 Tel: (805) 644-9272
 Toll Free Phone: 1 888 448-9489 Email: gtw4us@aol.com
 Fax: (805) 644-7699 Web-site: www.iaim-us.com

Baby Massage: A Video for Loving Parents. Elly Leduc, R.N., CIMI. 65 minutes.

This video is based on Vimala McClure's book, *Infant Massage: A Handbook for Loving Parents*. It demonstrates all of the strokes that a caregiver would learn in five class sessions from a certified instructor. It shows the entire Infant Massage routine as well as a quiet, inspirational massage with Elly Leduc, R.N., CIMI and an older infant who was massaged in an orphanage in Calcutta from birth until adoption at four months.

Order from:
 Gentle Touch Warehouse
 1891 Goodyear Avenue, Suite 622
 Ventura, CA 93003
 Tel: (805) 644-9272
 Toll Free Phone: 1 888 448-9489 Email: gtw4us@aol.com
 Fax: (805) 644-7699 Web-site: www.iaim-us.com

Sources of Additional Information and Support

International Association of Infant Massage – Canadian Chapter

1309 Parc du Village St
 Orleans, ON K1C 7B2
 Tel: (613) 830-6690 Email: jvyse@jve.on.ca
 Fax: (613) 830-8611 Web-site: <http://wellnet.ca/iaim-can.htm>

The International Association of Infant Massage is a nonprofit organization whose mission is to promote nurturing touch and communication through training, education and research so that parents, caregivers and children are loved, valued and respected throughout the world community.

Regional Representatives

Eastern Ontario - Judy Denney, (613) 825-4537, jdenney@cyberus.ca
 Edmonton - Angela Rosenburg, (780) 432-0731, rosebarn@telusplanet.net
 Calgary - Linda Spath, (403) 283-8491.
 British Columbia - Janet Alred, (604) 224-5354, infantmassage@intouch.bc.ca
 Quebec - Lynn Proulx, (613) 833-1779.
 Winnipeg - Trish Nyenyk, (204) 942-8496
 Oshawa - Riassa Chernushenko, (905) 782-0957



La Leche League Canada

La Leche League Canada

P.O. Box 29

18C Industrial Drive

Chesterville, ON K0C 1H0

Tel: (613) 448-1842

E-mail: laleche@igs.net

Fax: (613) 448-1845

Web-site: www.igs.net/~laleche

La Leche League International is an international, nonprofit, nonsectarian organization dedicated to providing education, information, support, and encouragement to women who want to breastfeed. Here are phone numbers for La Leche Leaders all across Canada.

Atlantic Canada	(902) 835-5522	Regina	(306) 584-5600
Montreal (English)	(514) 842-4781	Lethbridge	(403) 381-7718
Montreal (French)	(514) 525-3243	Calgary	(403) 242-0277
Ottawa	(613) 238-5919	Edmonton	(780) 478-0507
Toronto	(416) 483-3368	Vancouver	(604) 736-3244
Hamilton	(905) 385-6500	Victoria	(250) 727-4384
Winnipeg	(204) 257-3509	National Office	1 800 665-4324

WABA – World Association for Breastfeeding Action

PO Box 1200

10850 Penang, Malaysia

Tel: 604-658-4816

Email: secr@waba.po.my

Fax: 604-657-2655

Web-site: www.waba.org.br

WABA is a global network of organizations and individuals who believe breastfeeding is the right of all children and mothers, and who dedicate themselves to protect, promote and support this right. Their web-site includes a photo gallery of breastfeeding around the world, good links to breastfeeding from all over the world, and information on breastfeeding in seven other languages (Chinese, German, Spanish, French, Italian, Portuguese, Swedish).

III. Impact of Migration

Program Support

Gruno V, Stoevel S. 1997. *A workbook for community planning: Helping communities work together to help newcomers*. Citizenship and Immigration Canada.

Network Committee to Assist Survivors of War and Torture. *Understanding the Unspoken Pain, an Awareness for Providing Initial Assistance to Survivors of War and Torture*. Ottawa, ON: Canadian Mental Health Association.

Price, K, Ed. 1995. *Community Support for Survivors of Torture: A Manual*. Toronto, ON: Canadian Centre for Victims of Torture.

Wastie, S. 1994. Supporting Families at Risk for Language Loss. *Interaction*. Summer.



People Oriented Planning

POP (People Oriented Planning) is a training course developed by the United Nations High Commissioner for Refugees (UNHCR) in 1989. POP is a highly participatory two-day training course. It consists of introducing an analytical framework which is a tool for understanding the inter-relationships between new arrivals' social and economic roles and the changes in these roles created by leaving their home country, fleeing to a country of asylum and eventually settling in Canada. Understanding these factors assists sponsor groups and service providers to plan the most appropriate interventions to support newcomer integration and hopefully avoids costly mistakes. Following the introduction of the framework, several case studies are presented which give opportunity to discuss a variety of issues facing newcomers in small and large discussion groups.

For more information, please contact:

Jasmina Stebelsky

POP Project Co-ordinator

Tel: (613) 520-2600, ext. 1137

E-mail: jstebels@ccs.carleton.ca

Fax: (613) 520-3676

Theory and Research

Beiser, M, Hou, F, Hyman, I and Tousignant, M. 1998. *Growing Up Canadian: A Study of New Immigrant Children*. Applied Research Branch. Human Resource Development Canada.

Beiser, M, Shik, A., and Curyk, M. 1999. *New Canadian Children And Youth Study Literature Review*. Health Canada.

Canadian Council on Social Development. *The Progress of Canada's Children, 1999/2000*.

Hanvey, L and Kunz, JL. 2000. *Immigrant Youth in Canada*. Ottawa, ON: Canadian Council on Social Development.

Health Canada. 1999. *Canadian Research on Immigration and Health: An Overview*. Ottawa, ON: Minister of Public Works and Government Services Canada.

Herman, JL. 1992. *Trauma and Recovery: The Aftermath of Violence from Domestic Abuse to Political Terror*. New York, NY: Basic Books.

Van der Kolk, BA, McFarlane, AC, and Weisaeth, L. 1996. *Traumatic Stress: The Effects of Overwhelming Experience on Mind, Body, and Society*. New York, NY: The Guilford Press.

Williams, CL, and Westermeyer, J. 1986. *Refugee Mental Health in Resettlement Countries*. Washington, DC: Hemisphere Publishing Corporation.

Videotapes

Walk A Mile: The Immigrant Experience in Canada. A Multimedia Training Package
Citizenship and Immigration Canada. 2000. Burnaby, BC: Open Learning Agency

Order from:

Web-site: www.walkamilecanada.com

Tel: (604) 431-3210 or 1-800-663-1653



Also available on loan from:
Westcoast Multicultural and Diversity Services

Multicultural Canada. 1991. 25 min.

Written and produced by: Cathy Miller
Consultant and Teacher's Notes by: Dawn Gordon, Race Relations Consultant

Order from:
Unit C, 9005 Centaurus Circle
Burnaby, BC V3J 7N4
Tel: (604) 420-3066
Fax: (604) 420-3095

Also available on loan from:
Westcoast Multicultural and Diversity Services

Essential Connections: Ten Keys to Culturally Sensitive Child Care. 1993

Far West Laboratory Centre for Child and Family Studies

Order from:
Bureau of Publications, Sales Unit
California Department of Education
PO Box 271 Sacramento, CA 95802-0271
Tel: (916) 445-1260

Also available on loan from:
Westcoast Multicultural and Diversity Services

Sources of Additional Information and Support

Affiliation of Multicultural Societies and Service Agencies (AMSSA), BC

385 South Boundary Road
Vancouver, BC V5K 4S1
Tel: (604) 718-2777 Email: amssa@amssa.org
Fax: (604) 298-0747 Web-site: www.amssa.org

The Affiliation of Multicultural Societies and Service Agencies (AMSSA) of British Columbia is a coalition of over 80 organizations providing multicultural programs and immigrant settlement services throughout the Province of British Columbia. AMSSA believes in a just and equitable society which values Canada's cultural diversity.

Canadian Council for Refugees

6839 Drolet #302
Montréal, Québec, H2S 2T1
Canada
Phone: (514) 277-7223 E-mail: ccr@web.net
Fax: (514) 277-1447 Web-site: www.web.net/~ccr

The Canadian Council for Refugees is a non-profit umbrella organization committed to the rights and protection of refugees in Canada and around the world and to the settlement of refugees and



immigrants in Canada. The membership is made up of organizations involved in the settlement, sponsorship and protection of refugees and immigrants. The Council serves the networking, information-exchange and advocacy needs of its membership.

Canadian Race Relations Foundation

4576 Yonge Street, Suite 701

Toronto, ON M2N 6N4

Tel: 1-416-952-3500

Email: info@crr.ca

Toll-free no.: 1-888-240-4936

Web-site: www.crr.ca

Fax: 1-416-952-3326

Toll-free fax: 1-888-399-0333

The Canadian Race Relations Foundation aims to help bring about a more harmonious Canada that acknowledges its racist past, recognizes the pervasiveness of racism today, and is committed to creating a future in which all Canadians are treated equitably and fairly.

Changing Together...A Centre for Immigrant Women

#103, 10010 - 107 A Ave

Edmonton, AB T5H 4H8

Tel: (780) 421-0175 Email: changing@icrossroads.com

Fax: (780) 426-2225 Web-site: www.icrossroads.com/~changing

Founded in 1984, Changing Together is a non-profit, charitable organization operated by immigrant women for immigrant women. Their mission is to help Edmonton and area immigrant women and their families overcome personal and systemic barriers that keep them from participating fully in Canadian Society.

Cultural Profiles Project

AMNI Centre

Faculty of Social Work, University of Toronto

246 Bloor St.W., Rm. 100

Toronto, ON M5S 1A1

Tel: (416) 946-3699 Email: u.george@utoronto.ca

Fax: (416) 978-7072 Web-site: www.cwr.utoronto.ca/cultural

Each cultural profile provides an overview of life and customs in the profiled country. While the profile provides insight into some customs, it does not cover all facets of life, and the customs described may not apply in equal measure to all newcomers from the profiled country. Each profile is available in hard copy, and via the web-site.

Integration-Net

Web-site: <http://integration-net.cic.gc.ca/>

Integration-Net was created by Citizenship and Immigration Canada (CIC) as a communications, information and research tool to support the work of the Canadian settlement community. It also provides a means to develop both a national and international exchange of information and ideas about best practices on integration strategies and programs in order to share and learn from the experience of others.



Metropolis International

Web-site: www.international.metropolis.net

Canadian web-site: www.canada.metropolis.net

The International Metropolis Project is a set of coordinated activities carried out by a membership of research and policy organizations who share a vision of strengthened immigration policy by means of applied academic research. The project is dedicated to creating an active network of researchers and decision makers and providing all levels of government, community organizations and business with solid information on which to anchor policy ideas and programs.

The Ontario Coalition of Agencies Serving Immigrants (OCASI)

110 Eglinton Ave. W., Suite 200

Toronto, ON M4R 1A3

Tel: (416) 322-4950

Email: generalmail@ocasi.org

Fax: (416) 322-8084

Web-site: www.ocasi.org

OCASI was formed in 1978 to act as a collective voice for immigrant serving agencies and to coordinate response to shared needs and concerns. OCASI is a registered charity governed by a volunteer board of directors. Its membership is comprised of more than 100 community-based organizations in the province of Ontario.

World Education Services-Canada

45 Charles Street East, Suite 700

Toronto, ON M4Y 1S2

Tel: (416) 972-0070

E-mail: ontario@wes.org

Fax: (416) 972-9004

Web-site: www.wes.org Toll-free no.: 1-866-343-0070

World Education Services (WES) is a not for profit organization dedicated to providing accurate and reliable assessments of academic credentials earned outside Canada and the United States. Its mission is to facilitate the integration of foreign-trained individuals into the employment and education environment of their new country.

IV. Maintaining Effective Practices

Children's Books

Here is a list of children's books that reflect the experience of immigrants and/or refugees.

Gilmore, R. 1988. *A Gift For Gita*. Toronto, ON: Second Story Press.

Munsch, R. 1995. *From Far Away*. Toronto, ON: Annick Press.

Adoff, A. 1992. *Black is Brown is Tan*. HarperCollins Publishers.

Johnson, A. 1992. *Tell Me a Story, Mama*. New York, NY: Orchard Books.

Ajmera, M, and Anna Versola, R. *Children from Australia to Zimbabwe. A photographic Journey Around the World*. Watertown, MA: Charlesbridge Publishing.



- Milord, S. 1992. *Hands Around the World*. Williamson Publishing.
- Carpenter, S. 1997. *Bounce Me, Tickle Me, Hug Me. Lap Rhymes and Play Rhymes from Around the World*. Toronto, ON: The Parent-Child Mother Goose Program.
- Bernhard, E. and Bernhard, D. 1996. *A Ride on Mother's Back: A Day of Baby Carrying Around the World*, New York, NY: Gulliver Books/Harcourt Brace and Company.
- Kens-Douglas, R. 1992. *The Nutmeg Princess*, Toronto, ON: Annick Press Ltd.
- Cummings, P. 1998. *My Aunt Came Back*. Toronto, ON: HarperCollins Canada.

Program Support

- Ad Hoc Committee on Parenting in a Culturally Diverse Society. 1995. *Parenting in a Culturally Diverse Society: A Manual for Facilitators*. Ottawa, ON: Children's Aid Society of Ottawa-Carleton.
- Bernhard, JK, Lefebvre, ML, Ghud, G, Lange, R. 1995. *Paths to Equity: Cultural, Linguistic and Racial Diversity in Canadian Early Childhood Education*. Toronto, ON: York Lanes Press.
- Brown, D. 1998. *Mama's Little Baby: The Black Woman's Guide to pregnancy, childbirth, and baby's first year*. New York, NY: Plume Books.
- Changing Together... A Centre for Immigrant Women. *Family Life and the Law in Canada. A Workshop Manual Dedicated to the Prevention of Violence Within Immigrant Families*. Edmonton, AB.
- Chud, G, and Fahlman, R. 1985. *Early Childhood Education for a Multicultural Society: A Handbook for Educators*. Vancouver, BC: Pacific Educational Press.
- Chud, G, and Fahlman R. 1995. *Honouring Diversity within Child Care and Early Education: An Instructor's Guide*. Vancouver, BC: Ministry of Skills, Training and Labour.
- Comer JP, and Poussaint AF. 1992. *Raising Black Children – Two leading psychiatrists confront the educational, social, and emotional problems facing Black children*. New York, NY: Plume Books.
- Dotsch, J. *Non-Biased Children's Assessment Kit*. Willowdale, ON: Bias-free Early Childhood Services.
- Gonzalez-Mena, J. 1993. *Multicultural Issues in Child Care*. Toronto, ON: Mayfield Publishing Company.
- Greey, M. 1994. *Honouring Diversity: A Cross-Cultural Approach to Infant Development for Babies with Special Needs*. Toronto, ON: Centennial Infant and Child Centre.
- Hewes, J, Massing, C, Singh, L. 1995. *Many Ways to Grow: Responding to Cultural Diversity in Early Childhood Settings*. Edmonton, AB: Alberta Association for Young Children.
- Houston, MW. 1995. *Tell Me a Story (Then Tell It Again): Supporting literacy for preschool children from bilingual families*. *Interaction*. Spring.
- Keats DM. 1997. *Culture and the Child: A Guide for Professionals in Child Care and Development*. Toronto, ON: John Wiley and Sons.
- Mallory, BL and New, RS, eds. 1994. *Diversity and Developmentally Appropriate Practices: Challenges for Early Childhood Education*. New York, NY: Teachers College Press.
- Mangione PL. 1995. *Infant/Toddler Caregiving: A Guide to Culturally Sensitive Care*. Sacramento, CA: California Department of Education



Metropolitan Immigrant Settlement Association (MISA). *Family Violence Awareness Training – Workshop Materials*. Halifax, NS.

Waxler-Morrison N, Anderson J, and Richardson E. 1990. *Cross-Cultural Caring: A Handbook for Health Professionals*. Vancouver, BC: UBC Press.

Westcoast Childcare Resource Centre. 2000. *Towards Partnership: Multi-Language Resources for Families in Child Care*.

Westcoast Multicultural and Diversity Services. 1998. *Welcoming Newcomer Families in Child Care Programs: Resource Package*. (Available in Chinese, English, Farsi, Khmer, Punjabi, Serbo-Croatian, Somali, Spanish, Vietnamese)

YWCA of Canada. 1999. *Playing with Rainbows: A National Play Program for at-risk refugee children*.

Sources of Additional Information and Support

Changing the Legacy: Trauma Survivors as Parents

St. Joseph's Women's Health Centre
30 The Queensway
Toronto, ON M6R 1B5
Tel: (416) 530-6850 Email: kaldad@stjoe.on.ca
Fax: (416) 530-6629

This project is a collaboration between the St. Joseph's Women's Health Centre and the YWCA of Greater Toronto. It is intended to address the multi-generational impacts of psychological trauma on high-risk families in the South Parkdale area of Toronto. Components of the three year project include outreach presentations and clear language materials in five languages; counselling for women survivors of trauma who are now parents; group and play-based interventions for children; and the production of a resource manual for service providers.

Immigrant and Visible Minority Women Against Abuse

P.O.Box 6704
Ottawa, ON K2A 0E0
Tel: (613) 729-3145 E-mail: infomail@ivmwaa.com
Fax: (613) 729-9308 Web-site: www.ivmwaa.ottawa.on.ca

Immigrant and Visible Minority Women Against Abuse (IVMWAA) is a community-based agency in the Ottawa-Carleton area. IVMWAA exists to empower immigrant and visible minority women in the Ottawa-Carleton region to participate in the elimination of all forms of abuse against women; and to provide a culturally responsive crisis intervention counselling service and a cultural interpretation service which will facilitate an abused woman's accessibility to community and mainstream services.

'I Thought it Would be Better by Now': Parenting After Violence

St. Joseph's Women's Health Centre
30 The Queensway
Toronto, ON M6R 1B5
Tel: (416) 530-6850 Email: kaldad@stjoe.on.ca
Fax: (416) 530-6629



This project assists women and children in the high risk and diverse community of Parkdale, Toronto, who live with the impact of domestic violence and are grappling with the aftermath of this in their relationships with each other. This project addresses the unique concerns of the multi-racial, multi-ethnic communities of Parkdale and is developing a grassroots, community-based, preventative intervention into the cycle of abuse in families.

Multilanguage Services

Calgary Public Library
616 MacLeod Trail SE
Calgary, AB T2G 2M2
Tel: (403) 260-2694
Fax: (403) 237-5393

Westcoast Multicultural and Diversity Services (WMDS)

3rd Floor, 210 West Broadway
Vancouver, BC V5Y 3W2
Tel: (604) 709-8366 Email: wmds@wstcoast.org
Fax: (604) 709-5622 Web-site: www.wstcoast.org

WMDS provides resources, information and training to promote multicultural, anti-racist and anti-bias child-care programs. The goal of WMDS is to assist young children, their families and their caregivers to actively value diversity and human rights, and to oppose bias and discrimination based on: ability, age, class, race, gender, language, appearance, culture, sexual orientation, family grouping, spirituality/religion, and newcomer status. WMDS offers a range of services within Vancouver and throughout British Columbia.





Attachment

ATTACHMENT IS:

- the emotional connection between babies, children and people who care for them.
- showing love to and responding to children.

Families, and communities all over the world show attachment in different ways. We can all learn from each other.

Attachment is important because:

- it helps children become loving, trusting and secure
- it helps children grow and develop

WHAT ARE SOME THINGS THAT WE CAN DO

Babies:

- Touch, kiss, cuddle and hold your baby often every day.
- Hold your baby close during feedings.
- Look into the baby's eyes and smile.
- Massage your baby with warm hands and some oil.
- When your baby cries, pick the baby up. This helps the baby to learn that you are loving and are there when needed.
- Sing to your baby. Your baby needs to hear your voice often.
- Talk to your baby in a gentle voice. The baby will not understand your words, but will like the sound of your voice.
- Carry your baby with you in a sling while you do other things. Babies need this physical closeness.

Young Children:

- Read a story to your child. Hold your child on your lap. Young children like books with words that rhyme and with pictures with bright colours.
- Play games. Laugh a lot together.
- Enjoy quiet times. Rock and sing softly to your child.
Hug and kiss your child. Young children need to feel loved and secure.
- Teach your child new words by repeating them. Encourage your child to copy your words.
- Sing songs. Play your favourite music and dance with your child.
- Pay attention to your child. Listen when your child talks to you.

What do you do in your family to build love, trust, and security?

Early love is....

PLAYING
CARING
HUGGING AND KISSING



...now and for their future.

Early security is...

COMFORTING
BELONGING
TRUSTING



...now and for their future

Early attachment is...



RESPECTING
LEARNING
RESPONDING



...now and for their future

To learn more, please see the web-site: www.attachmentcrosscultures.org