Cultural diversity in center-based child care: differences and similarities in caregivers' cultural beliefs

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Citation for published version (APA):

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5. General discussion and conclusions

In this dissertation we focused on the issue of cultural diversity in center-based child care in the Netherlands. The general goal was to study the childrearing beliefs of caregivers of various cultural backgrounds working with toddlers in the Dutch child care context. To gain more insight in this subject, we applied three different measurement approaches. First, we used questionnaire data to investigate whether cultural differences in caregivers’ general and daycare specific beliefs could be found, and whether caregivers’ cultural background or their professional training and the micro-cultural context of the child care centers were important factors in explaining cultural differences in caregivers’ beliefs. Second, we used semi-open interviews to examine caregivers’ cultural childrearing beliefs in more detail. The main goal here was to investigate the cultural differences and similarities in caregivers’ reasoning about children’s independence and autonomy, children’s social development and group related issues, and caregivers’ authority. In addition, we investigated the influence of the cultural context and the overall quality of the child care center on caregivers’ reasoning. Third, caregivers were observed while working in the child care center. Doing so, we were able to relate caregivers’ beliefs to their actual childrearing practices. If, as we proposed, cultural childrearing beliefs were indeed important for process quality in child daycare, there had to be a relevant connection between caregivers’ beliefs and their behavior. So far, research presents mixed evidence for such a relation. Whereas in studies in which parental beliefs were related to childrearing practices often only little or even no relation between beliefs and behavior was found, in studies that investigated the relation between (kindergarten) teachers’ beliefs and practices, often a much more coherent pattern between the two was revealed. Researchers have suggested several explanations for the often weak belief – behavior connections. First, due to the dynamic nature of beliefs systems that adjust to specific circumstances, it may be difficult to find coherent relations with behavior in different contexts. Second, several methodological restraints may explain the often weak belief – behavior relations (Ajzen & Fishbein, 1977; Ajzen, 1996; Lorenz, Melby, Conger, & Xu, 2007). In this dissertation, we aimed at improving on
these methodological flaws, thus increasing the probability of finding belief behavior connections. In order to map caregivers’ beliefs onto practices, observations were made of specific situations that triggered goal directed behavior (the creative activity), peer-cooperation (the construction task), as well as group management behaviors (lunch time). As such, we could link these behaviors to caregivers’ collectivistic and individualistic childrearing beliefs. Furthermore, as direct belief – behavior relations may often not be found due to the dynamics of belief systems, we followed up on the findings of Wen, Elicker and McMullen (submitted), who found a moderating effect of context factors, in particular caregivers’ educational level, on the relation between beliefs and behavior. Whenever caregivers were higher educated a stronger relation was found between their beliefs and actual practices. As in our sample there was very limited variance in caregivers’ educational level, we did not explore such an effect. However, as the micro-cultural context of the center seemed to affect caregivers’ beliefs substantially, we explored possible moderator effects of micro-cultural contextual factors of the child care center on the relationship between beliefs and behavior.

5.1 Caregivers’ cultural beliefs

The studies in this dissertation demonstrate that both Dutch and immigrant caregivers valued individualistic as well as collectivistic childrearing beliefs and that there was considerable overlap in the beliefs they valued. For instance, all caregivers attached importance to children’s sociability and a feeling of belonging, and, despite the cultural differences in beliefs on this theme, all caregivers underlined the importance of children’s developing individuality. However, cultural differences in caregivers’ beliefs were found as well. Caregivers differed in the significance they attached to beliefs from either the individualistic or the collectivistic category. As we had expected, Dutch caregivers especially emphasized individualistic childrearing goals such as, for instance, children’s independence. The caregivers with a migrant background especially emphasized collectivistic goals such as, for instance, children’s’ obedience to adults, however they did not differ from the Dutch caregivers in their appreciation of individualistic goals as children’s self-confidence or their own role in actively stimulating children’s development and creating the opportunities for development. Moreover, this finding
demonstrates that the individualism – collectivism distinction can indeed be used when investigating the beliefs of educators of different cultural heritage living in one and the same society. The fact that individualistic as well as collectivistic themes were mentioned by caregivers of all backgrounds underlines, first, the notion of the coexistence of the two in many cultures (Greenfield et al., 2003; Harkness, Super, & van Tijen, 2000; Valsiner & Litvinovic, 1996). Second, it confirms the multidimensionality of both childrearing beliefs and the constructs of individualism and collectivism (Greenfield et al., 2003; Harwood, Schölmerich, & Schulze, 2000; Harkness, Super, & van Tijen, 2000; Kagitçibasi, 2005; Killen & Wainryb, 2000, Raeff, 2005; Suizzo, 2007; Tamis-LeMonda, Way, Hughes, Yoshikawa, Kalman, & Niwa, 2008; Valsiner & Litvinovic, 1996). However, when investigating differences between and within cultural groups in more detail, the distinction may be too general and may carry the risk of oversimplifying cultural patterns.

5.2 The child care center’s micro-cultural context

The micro-cultural context of the child care center, defined as the cultural background of close colleagues, and of the total team, as well as the cultural backgrounds of the children in their groups, indeed affected caregivers’ childrearing beliefs (cf. Harkness & Super, 1996). Caregivers who worked in a culturally diverse setting stressed collectivistic childrearing goals – in particular obedience –, and collectivistic views on children’s learning and development. Furthermore, caregivers whose direct colleagues were immigrant-Dutch attached less importance to more individualistic notions of learning and development. Interestingly, these findings not only applied to caregivers with immigrant backgrounds but also to the native Dutch. These results not only underline the importance of the cultural context in understanding caregivers’ beliefs, they also support the idea that beliefs are constructed and reconstructed in response to everyday experiences with childrearing in particular contexts, and in social interaction with others, such as a team of caregivers or the cultural community (Harkness & Super, 1996).

In studying the relation between caregivers’ beliefs and their actual behavior, we found that beliefs with a more specific and concrete, that is, a more behavioral content were moderately to strongly related to the behavior ratings, while little re-
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Relations with behavior were found for the beliefs with a more general and abstract meaning. Beliefs are considered dynamic structures that are adapted to the opportunities and constraints prevailing in the actual context, including social factors such as the views of colleagues and parents (Bugental & Johnston, 2000; Harkness & Super, 1999; Kontos, Burchinal, Howes, Wisseh, & Galinsky, 2002; Tamis-LeMonda et al., 2008). Consequently, consistent belief–behavior relations across contexts may just not exist. This notion lead us to investigate the possible moderator effects in the relations between beliefs and behavior. A second reason for exploring moderator effects on belief–behavior relations was that in a recent study stronger belief–behavior relations were found when teachers were higher educated and more experienced (Wen, Elicker, & McMullen, submitted). Although in our study educational level did not seem to have an impact on caregivers’ beliefs, due to little variance in educational level, we did find many indications for the influence of the child care center’s micro-cultural context.

An interesting pattern was revealed when comparing the belief-behavior relations between caregivers working in centers that differed in cultural diversity. We had expected that the likelihood for caregivers to put their beliefs into practice would depend on the compatibility of their beliefs with the child care center’s micro-cultural context, leading to differences in the strengths of the belief-behavior relationships as a function of that compatibility. The findings support this expectation. However, they do not provide conclusive evidence due to the methodological limitations of the study. Stronger relations between collectivistic beliefs and behaviors were found in centers high in cultural diversity, than in centers with predominantly Dutch colleagues and Dutch children. Conversely, beliefs classified as individualistic were stronger related to practice in centers low in cultural diversity than in culturally diverse centers. We believe that these findings underline the expectation that caregivers’ beliefs are more consistently expressed in behavior when they are in tune with the centers’ cultural context.

To conclude, these data confirm that caregivers’ childrearing belief systems are in part determined through a prolonged socialization process by the belief systems of their cultural and religious communities, and in part by their professional experience and their colleagues (cf. Harkness & Super, 1996, Rosenthal, 1991). The results further suggest that working in an ethnically diverse context not only reinforces collectivistic childrearing beliefs, but seems to make Dutch caregivers, reared in an individualistic society, adopt collectivistic childrearing beliefs as
well, in spite of the individualistic childrearing goals articulated in the center’s educational policy (Hong, Morris, Chiu, & Benet-Matinez, 2000).

5.3 Quality issues in child care, and practical implications

How can we interpret these findings and transfer them to the discussion on child care quality? We believe that the increasing cultural diversity raises the question whether the idea of what constitutes child care quality is still commonly shared among practitioners in child care. Quality criteria in child care centers are closely linked to beliefs about the functions and goals of these centers. These beliefs, in turn, are shaped by perspectives on childhood, by cultural patterns and personal values, which may strongly differ between cultural communities (Pence & Moss, 1994; Woodhead, 1996). In discussions on what constitutes quality in center-based care and in studies that aim to measure it, the constructs of ‘developmentally appropriate beliefs’ and ‘developmentally appropriate practices’ (DAP, Bredekamp, 1987; Bredekamp & Copple, 1997) are used as points of reference in many countries. Founded on child development knowledge, mostly generated by Western psychologists, such as Piaget, Dewey, Erickson, and many others, guidelines are provided for allegedly universal childrearing practices that serve to ‘foster the development of an isolated being with the end goal of being an autonomous individual’ (Lubeck, 1996: 156). This dichotomy between appropriate and inappropriate leaves little room for alternative ideas or further views on caregivers’ interactional qualities (Lubeck, 1996; Dahlberg, Moss, & Pence, 1999). There is a distinct risk that beliefs and practices that do not match with the principles of developmentally appropriateness are easily characterized as developmentally inappropriate. Based on the findings in this study, we argue that there is a cultural bias in the discussion on child care quality, as well as in research on this issue, that seems to favor Western, individualistic childrearing beliefs and practices (Dahlberg, Moss, & Pence, 1999; McMullen, Ellicker, Wang, Erdiller, Lee, Lin, Sun, 2005; Rosenthal, 1999; Singer, 1993). For instance, the currently available instruments for measuring the process quality in center care, that are used worldwide, almost unchanged, such as the Caregiver Interaction Scale (CIS) by Arnett (1989), the Observational Record of the Caregiving Environment (ORCE) developed by the United States’ National Institute of Child Health and Human Devel-
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Development (NICHD, 1996), the Infant Toddler and Early Childhood Environmental Rating Scales (ITERS and ECERS, Harms, Clifford, & Cryer, 1998) tend to focus almost exclusively on child-centered models of dyadic adult-child relationships. The influence of Western psychological theories, especially attachment theory, as well as the emphasis on individualistic childrearing ideals, is obvious (Rosenthal, 1999; Dahlberg, Moss, & Pence, 1999). The observation scale ‘facilitating interactions’, recently developed by the Dutch Consortium for Child Care Research (NCKO), is an important addition to the earlier mentioned scales where the focus is more on positive interactions between dyads of children and to the caregivers’ capacity to stimulate positive interactions between two children than on peer-cooperation and instilling a sense of togetherness. However, we argue that a mainly individualistic orientation on what constitutes child care quality does not match the group-based character of center-based child care (Rosenthal, 1999; Singer; 1993). Beliefs and practices more common in collectivistic societies, such as clear ideas on childrearing in groups, stimulating collaborative interaction and social play, may constitute very important aspects of child care quality that have until now been frequently overlooked (Dahlberg, Moss, & Pence, 1999).

Although the child care setting itself, due to the group-based character of child care, raises the importance of good group dynamics, these processes are an understudied topic. An exception is the recent meta-analysis by Ahnert, Pinquart and Lamb (2006). Their study presented that caregivers’ group sensitivity, other than the sensitivity to individual children, was an important condition for the quality of the relationship between the caregiver and the child. Our results are in agreement with this finding. Interestingly, Ahnert et al. did not find such relations for caregivers’ sensitivity to individual children and the quality of caregivers’ relation with the child. On the other hand, negative peer interactions, resulting from failing group management, were reported as a major cause of children’s low well-being and lack of involvement in center-based child care (Gevers Deynoot-Schaub & Riksen-Walraven, 2005). Thus, managing group processes cannot be reduced to merely stimulating positive interactions between children. To skilfully manage group processes, caregivers should stimulate a sense of togetherness among the whole group of children, by stressing the importance of listening to each other, by setting helping each other as a ground rule, and by making sure all children are involved in the group process (Dawes & Sams, 2004; De Haan & Singer, 2001; Wegerif, Littleton, Dawes, Mercer, & Rowe, 2004). We propose to
reconsider current consensus on the elements of process quality in child care in view of the central role played by group processes and to open up current thinking on quality in child care to collectivistic themes as group management.

5.4 Considerations regarding the study

The aim of this study was to explore caregivers’ cultural childrearing beliefs and related practices in culturally diverse child care centers. The interviews and the system and strategy of coding the interviews we used in this dissertation correspond closely to the coding schemes and procedures of Harkness, Super and Van Tijen (2000), but differs in a few aspects. In our study, we identified several individualistic codes as well as several collectivistic codes, to get a well balanced picture of caregivers’ beliefs. In the study by Harkness et al. (2000) only two collectivistic themes were identified, viz. being sociable and being obedient, while in the individualistic category several themes were identified. This is probably because they interviewed American and Dutch parents, both from individualistic societies, who were probably more outspoken concerning the individualistic childrearing goals. However, collectivistic or sociocentric childrearing probably consists of many more important themes than just these two. In the present study, involving caregivers with an immigrant background, we identified several additional beliefs that could be ranged among collectivistic beliefs. This further differentiation of collectivistic childrearing beliefs can be seen as a strength of this study. However, as the coding category of ‘being sociable’ still was among the most frequently mentioned socialization goals for all caregivers, the code probably still is not specific enough and deserves more fine tuning in future studies on collectivistic or sociocentric beliefs among educators of different cultural backgrounds living in an individualistic society.

In collecting and analyzing the data we used both quantitative and qualitative methods, in order to optimize our understanding of such a complex theme. Where the use of interviews and observations provided us with a good understanding of caregivers’ beliefs, quantitative analyses enabled us to explore group differences and similarities in beliefs and practices, and to relate caregivers’ childrearing beliefs to observed practices. This mixed method approach should be considered a major strength of our study (Tashakkori & Creswell, 2007).
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A third strength of the study is our aim of measuring beliefs and behavior on similar levels of specificity and concreteness (cf. Ajzen & Fishbein, 1977; Ajzen, 1996; Lorenz, Melby, Conger, & Xu, 2007), in order to increase the sensitivity of finding belief – behavior relations. Combining interview data with observations in the child care center, resulted in moderate to strong belief – behavior relations. Relations with behavior were especially found for the more specific and concrete beliefs, but not for the more general and abstract root metaphors of development. Although the relation between the belief constructs and the behavior scales was still far from perfect, our findings suggest that we were at least partly successful in measuring beliefs and behavior on similar levels.

The current study also has limitations that should be considered in future studies. The focus in this study was on professional caregivers only, and included a limited set of possible determinants of caregivers’ beliefs. Future research should also include the influence of parental childrearing beliefs, and examine the possible discrepancies in the beliefs of caregivers and parents. This could provide us with a better understanding of the dynamics of beliefs reconstruction, as parents and caregivers’ possibly influence each other’s beliefs in the frequent encounters they have. This would also give us insight into how parents and caregivers create a shared meaning when educating a child together.

A further concern was the study’s sample size which appeared to be a limitation in the statistical analyses. The four cultural groups were too small to study within-group differences, and to control for these differences in the analyses. Despite these limitations, the present studies offer valuable insight the issue of cultural diversity in center-based child care. This is an important issue in western societies where immigration has resulted in culturally and ethnically diverse communities.

5.5 Future research

In spite of the results presented in this dissertation, there are still many questions to be answered. Whereas we confirmed the notion that childrearing beliefs are dynamic and are influenced by the context in which people work and live (Harkness & Super, 1996, Rosenthal, 1991; Suizzo, 2007), several questions remain. We do not know, for instance, how this process of belief reconstruction and its relation to practices actually works. Possibly caregiver or center characteristics such
as, for instance, the availability of supervision and coaching, are decisive factors in this process. It also remains unknown at what ratio of caregivers with a particular cultural view or at what ratio of children with a particular cultural background, caregivers will adjust their beliefs and consequently their behavior. In future research, it would be interesting to explore these questions in more detail, for instance, by studying the beliefs and practices of several caregivers working in the same center or in a similar context over a certain period.

A second theme that deserves more attention in future research is the validity of the concepts and instruments that are used in child care research, as the population of children and parents as well as caregivers becomes more diverse every year. Most of these instruments are developed in and calibrated to Western populations. Therefore, it is important to examine whether these instruments are indeed culturally biased and fail to address care giving quality in a culturally sensitive and fair way in western as well as non-western contexts. The current changes in Dutch society, such as the increasing numbers of working mothers and, consequently, increasing numbers of young children attending center-based care, as well as the culturally diversifying of the population further underscore the relevance of this argument.
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