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Parenting partnerships in culturally diverse child care settings

A care provider perspective

RESEARCH PAPER NO. 36, MAY 2006

Kelly Hand and Sarah Wise

Australian Institute of Family Studies

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Executive summary

Constructive partnerships between parents and child care providers (carers) lie at the heart of a 'family-centred' orientation towards the provision of early childhood services. Potential benefits of child care for child development may be undermined if parents and carers differ in what they hope to achieve in their interactions with children, especially if there is a lack of respect or understanding of alternative childrearing perspectives.

Differences between parents' and carers' childrearing perspectives are expected when children from culturally and linguistically diverse backgrounds are looked after in mainstream child care services, as an abundance of research has shown that culture plays a role in shaping the beliefs and behaviours of adult carers.

A family-centred approach to child care embraces cultural diversity and promotes an understanding of children's culture and home environment, the way in which parents raise their children, and the objectives of this care. Adjustments to children's day care regime that accommodate parents' cultural requirements also fit under the umbrella of family-centred practice.

Using information provided by 242 carers participating in the Australian Institute of Family Studies' Child Care in Cultural Context study, this paper focuses on the extent to which carers in centre care and family day care contexts work with parents to understand their perspectives on childrearing, their reports of parental childrearing practices that differ from their own, and the issues that they confront in managing these differences.

The Child Care in Cultural Context study

The Child Care in Cultural Context study was developed to improve our understanding of the experiences of young children from diverse cultural backgrounds in formal child care settings and the impacts of differences between home and child care on children's wellbeing.

Families and carers were sought from Anglo, Vietnamese and Somali backgrounds. Participants were recruited through child care centres and family day care schemes across metropolitan Melbourne and through the community networks of the Somali and Vietnamese research assistants employed for the study. Data were collected via parent and carer questionnaires and through direct observation of the children's child care environment.

Both qualitative and quantitative data from the completed carer surveys were used to explore the nature and extent of partnerships between parents and carers of children who were part of the study. Carers were asked questions about the extent to which they worked with parents to understand the parents' childrearing perspectives; ways in which they engage parents on parenting issues; the types of parenting issues they came into conflict over; and the difficulties they faced in trying to work with parents within a partnership framework.

Carer responses were analysed according to the type of care, as previous research suggests that differences between these settings may create differences in the ways partnerships between parents and carers are approached and/or experienced.

Carers' responses were also analysed according to their own cultural background and whether or not they were from the same cultural background as the study child in their care. Carers participating in the study were identified as coming from a range of cultural backgrounds—Somali, Vietnamese and Anglo/Diverse¹—and the proportion of carers from specific cultural backgrounds varied according to the type of care setting they worked in.

Almost all centre carers in the study were identified as being from Anglo/Diverse backgrounds (96 per cent). Family day carers were a more culturally diverse group—45 per cent were from Somali backgrounds, 36 per cent were identified as Anglo/Diverse and 19 per cent were Vietnamese. Almost all carers in family day care settings were from the same cultural background as the study child in their care (that is, they were 'culturally matched'); however, only about half of carers in centre care settings were from the same cultural background as the study child in their care. That is, more than half of the children from Vietnamese and Somali background were looked after in day care centres by carers from Anglo/Diverse backgrounds.

These patterns are important to note, as findings that appear to be due to care type differences may actually be differences arising from carers' cultural backgrounds or the level of cultural match between parents and carers within different care settings.

Findings

This paper explores the nature of relationships between parents and carers in culturally diverse child care settings as reported by carers participating in the study. Firstly, the degree to which carers engage parents about childrearing practices and the barriers to doing so are discussed. Secondly, the carers' reports of the extent of differences between parents and carers in childrearing practices are considered, followed by a description of the types of differences that occur. Finally, the barriers reported by carers in accommodating parents' preferences when they differ from carers' beliefs are explored.

The key findings from this research are outlined below.

Working in partnership with parents

Overall, carers' responses indicated a high level of commitment to working with parents to understand their childrearing perspectives. Family day carers reported this to a slightly greater extent than centre carers. Post-hoc statistical tests, however, suggested this difference between different care settings was accounted for by Somali carers' responses. Almost half of family day care carers were from

1 Care providers who were not Somali or Vietnamese were combined for analytic purposes and are referred to as 'Anglo/Diverse' carers, to provide a measure of cultural match with children from Anglo and Diverse backgrounds.

a Somali background and they reported working with parents to a greater extent than Anglo/Diverse and Vietnamese carers.

Carers were also asked to describe the ways in which they worked with parents to understand their childrearing perspectives. Most commonly, for both centre care and family day care, carers reported using informal interactions at the beginning and end of each day to communicate with parents. Both centre carer and family day carer groups also made appointments to talk to parents if specific issues arose.

Centre carers were more likely to report using more formal means of communicating with parents than family day care carers, such as newsletters and parent-teacher evenings, and also indicated that social events were helpful in getting to know parents. Centre carers also used recorded information about sleeping, nappy changes and feeds to help keep parents informed about their child's day.

Much of this information was 'one way'—that is, carers informing parents about their child's experience of care. However, some carers also indicated that they actively sought information from parents as a part of their day-to-day communication, or when the child commenced care.

Family day carers, particularly those from Somali backgrounds, described actively working with parents to understand their parenting practices and preferences and explicitly spoke of finding out 'how they want their children looked after'.

However, carers in both centre care and family day care settings indicated that some difficulties arose in trying to work with parents using a partnerships approach. Lack of time was a significant barrier to working with parents, especially when communication centred on informal contacts at the beginning and end of each day. Some carers also expressed a belief that some parents were not interested in engaging in discussions about childrearing. Centre carers also mentioned language as a barrier to working with parents from a different cultural background to their own.

Discovering and accommodating differences

Carers were asked to indicate whether or not they sought to find out about differences between parents' childrearing practices and their own. Seventy-seven per cent of centre carers and 45 per cent of family day carers reported finding out about such differences. Of those that sought this information, carers in both groups reported that they discovered actual differences with about one-third of parents.

The onset of toilet training and approaches to discipline were most often reported as differences and were commonly reported by carers from both centre and family day care, irrespective of whether carers and parents were from the same cultural background or not.

Some carers did attribute differences to culture. These differences were the value of 'messy' play (some parents were reported as not wishing their children to be involved in messy play), and also the degree to which carers and parents valued and encouraged children's independence.

Differences were also noted between parents and carers from the same cultural background. Some carers attributed these differences to 'normal' variation between individuals and stated it was unrealistic not to expect differences to occur. Others saw these differences occurring as a result of the carers' early childhood training or their need to comply with Australian child care guidelines.

Carers also identified a number of barriers to accommodating parents' preferences that were different to their own practices. Again, lack of time was a key barrier, as were language differences.

Carers also suggested that in the context of group care settings, it was not always possible to meet the requirements of all parents. The need to conform to child care legislation and accreditation requirements was also seen by some carers as a barrier to accommodating parents wishes. In addition, a number of carers noted that they found some parents' preferences to be 'inappropriate' in the context of their own training and childrearing beliefs and thus would not incorporate them into their practice.

These barriers were noted by both centre carers and family day carers and again occurred regardless of whether or not parents and carers were 'culturally matched'.

Conclusion and implications

Reports from carers participating in the Child Care in Cultural Context study suggest that accommodating parents' preferences in Australian child care services is not always straightforward.

Carers generally reported positive attitudes about understanding where their beliefs and practices departed from that of parents. Many carers actively sought this information through a variety of formal and informal modes of communication and knew where conflicts existed.

Carers in both centre care and family day care settings reported differences with parents in childrearing approaches and difficulties in working with parents to understand and accommodate their preferences. These differences were evident regardless of whether the carers and children had the same or different cultural backgrounds.

The barriers to working in partnership with parents identified by carers (such as a lack of time, language barriers and difficulties in engaging parents) suggest that a need for further training and support to enhance carers' capacities for communication and engagement may be indicated.

Parenting partnerships in culturally diverse child care settings: A care provider perspective

Introduction

In Australia's multicultural society, child care providers (referred to as 'carers' from this point) often find themselves caring for children from diverse cultural backgrounds. Australian child care practices are regulated by a national accreditation system and hence must accord with standards of 'good quality' care (that derive from a Western perspective of developmental appropriateness). Children may find themselves moving between child care settings (that is home and formal care settings) that are organised according to different objectives and beliefs about children and childrearing. In other words, the 'culture' of child care, or the particular orientation of an individual carer, may be at odds or 'clash' with the beliefs and practices about children and childrearing that derive from parents' cultural backgrounds.

Developmental theories suggest that supportive relationships between parents and carers, which involve openness and cooperation surrounding the shared task of childrearing, may be an important factor in promoting good outcomes for children using child care (Bronfenbrenner, 1979; van IJzendoorn, Tavecchio, Stams, Verhoeven, & Reiling, 1998; Owen, Ware, & Barfoot, 2000). These supportive relationships (or 'partnerships' as they are referred to from this point) between parents and carers are seen as an important way of ensuring that children's experiences at home and in child care are in synergy, or can at least promote an understanding of differences in childrearing approaches between parents and child care providers.

The Australian Institute of Family Studies' Child Care in Cultural Context study was designed to measure the childrearing beliefs, goals and practices of parents and carers of children from Anglo, Vietnamese and Somali backgrounds, and the relationship between childrearing approach and several dimensions of psychosocial adjustment (see Wise & Sanson, 2000).

Parents and carers were recruited through formal child care settings within the Melbourne metropolitan area as well as through the community networks of Vietnamese and Somali research assistants involved with the study. These settings included accredited day care centres and family day care settings—child care provided for children within the carers' home that is administered and regulated by local government. Data were collected via parent and carer questionnaires and through direct observation of children's child care arrangements. These data collection methodologies generated information about various aspects of the children's home and child care settings, family characteristics and child adjustment.

This paper draws on 242 carer reports to describe carers' attitudes towards working with parents in a 'family-centred' approach, how much they engage parents about

their childrearing practices at home, and barriers carers have encountered in accommodating parental preferences in the context of formal child care settings.

A review of the literature about parent–carer partnerships in child care settings precedes a brief overview of the Child Care in Cultural Context study and its participants. The findings section of the paper describes the degree to which carers engage parents about their childrearing practices at home, and the barriers to accommodating differences when they occur. Both qualitative and quantitative data from carer surveys are used to explore the nature and extent of partnerships between pairs of parents and carers who took part in the study. The findings are divided into two main sections: (1) carers’ reports about their experiences of working with parents; and (2) carers’ reports of how they discover and accommodate differences between parents’ childrearing practices and their own.

The paper then concludes with a discussion of the findings and how these relate to early childhood policies and practices in Australia.

Cultural dimensions of parenting

Parents from different cultural backgrounds are known to differ in their beliefs about children, the importance they place on personal attributes (such as obedience), and how a well-socialised member of society behaves (Bornstein, Tal, & Tamis-LeMonda, 1991).

There is also considerable cultural variation in beliefs about what influences child development (such as the extent to which children’s behaviour can be shaped by particular forms of discipline), which helps determine the techniques, strategies or ‘socialisation practices’ that parents employ for achieving desired outcomes in children (Harkness & Super, 1996).

In addition, although all societies accommodate infants’ needs for sleep, food and supervision, they tend to go about it in different ways. For example, children’s sleeping arrangements (such as the places for and scheduling of sleep) are known to vary depending on the child’s culture of origin (Gonzalez-Mena, 2001).

In the child care literature, disagreements between carers and parents over child care practices are well documented. Educational approaches, physical discipline, encouragement of play that attempts to break gender stereotypes, and basic care regimes, such as changing nappies, feeding, comforting and toilet training, are often cited as sources of tension and conflict between parents and carers (Erwin, Sanson, Amos, & Bradley, 1993; Gonzalez-Mena, 2001).

Thus, for child care providers, understanding parents’ childrearing beliefs and practices, and the possible cultural basis for perceived differences in attitudes and behaviours, is an important aspect of working in partnership with parents in culturally diverse child care settings.

Defining partnerships in the practice literature and Australian guidelines

Partnerships between parents and carers are broadly defined as equal, cooperative relationships where care providers in particular seek out parents’ perspectives

and incorporate these where possible into their everyday practice. In the early childhood practice literature, partnerships are seen as part of a family-centred practice approach to the care of young children, which recognises the parent as the 'expert' about their child (see Stonehouse & Gonzalez-Mena, 2004).

An Australian commentator, Stonehouse (2001a), adds that partnerships between parents and child carers are 'a relationship, a matter of heart and mind and not a discrete set of activities' (p. 2). The purpose of partnerships, Stonehouse argues, is to enhance the wellbeing of the child rather than the operational needs of child care centres or family day care schemes. She suggests that communication is central to partnerships, and needs to be ongoing and reciprocal. Partnerships should not be limited to communication, however, and Stonehouse lists mutual respect, trust, recognition and valuing the unique contribution and strengths of the partners and shared decision-making as important qualities of good partnerships.

Parental involvement and acceptance of diversity by carers are also key to successful partnerships. Stonehouse (2001a) argues that 'inviting the parent to be involved typically allows the professional to retain power and control, while working as partners necessarily requires sharing power and giving up some control' (p. 2). Furthermore, acceptance of diversity is central to working in partnership with parents—this should not be limited to acceptance of cultural diversity but also includes acceptance of differences in lifestyle choices, age, gender and socioeconomic status.

North American commentator Gonzalez-Mena (2001) suggests that diversity of childrearing beliefs and practices can strain relationships between parents and carers. However, she argues that differences, if managed well, can be a source of enrichment for carers personally and for the care setting as a whole. Gonzalez-Mena (2001) suggests partnerships are about 'resolving differences, living with them, gaining from them and celebrating them', as well as 'avoiding a deficit model that says when childrearing practices deviate from the norm, they are inadequate rather than reflecting competent or adaptive responses' (p. 109).

Partnerships, however, are not just about taking on board parents' preferences. In the literature dedicated to early childhood practice, it is recognised that it is not always possible nor desirable to incorporate parents' preferences. Carers need to decide how far they are willing to compromise when parents request a practice that differs from their own (Stonehouse, 2001a). However, when carers feel that they cannot accommodate parents' wishes, they need to manage conflicts through mutual respect and ongoing communication (Gonzalez-Mena, 2001).

In Australia, engaging in partnerships with parents is an element of the requirements for accreditation of child care centres (Quality Assurance and Accreditation System (QAIS)) and family day care schemes (Family Day Care Quality Assurance System (FDCQA)). The QAIS and FDCQA are linked to national child care funding. The National Child Care Accreditation Council (NCAC) developed and administers accreditation and quality improvement guidelines that apply to all child care centres and family day care schemes. Communication and partnerships with families is a key quality principle in both the QAIS and the FDCQA. Carers are also required to take into account the diversity of backgrounds of the children in their care (National Childcare Accreditation Council [NCAC], 2001).

The importance of parent–carer partnerships for child wellbeing

Much of the research literature about the importance of partnerships between parents and carers has ‘anchored’ itself (Schnaper, 2002, p. 375) in Bronfenbrenner’s (1979) ecological systems framework (for example, Feagans & Manlove, 1994; Ghazvini & Readdick, 1994; van IJzendoorn et al., 1998; Owen et al., 2000). Bronfenbrenner’s theory focuses on the interrelations among children’s social settings, referring to linkages between two or more of a child’s social settings, such as home and child care, as the mesosystem (Owen et al., 2000). Within the context of Bronfenbrenner’s framework, ‘each setting’s developmental potential is enhanced when linkages are strong and demands on the child are compatible across settings’ (Owen et al., 2000, p. 414).

In contrast, differences in childrearing beliefs and practices between home and child care may pose a challenge for development. If parents and carers are working at cross-purposes—that is, if children are exposed to the linguistic, social and environmental demands and expectations derived from two cultures, as well as differences in interaction styles, orientations and care routines—children (particularly infants or the temperamentally vulnerable) may become confused, frightened and insecure (van IJzendoorn et al., 1998). Thus, partnerships between parents and carers may play a decisive role in child development (Smith & Hubbard, 1988) and are thus increasingly viewed as a dimension of good quality in child care settings (Ghazvini & Readdick, 1994; Rosenthal, 2000).

However, certain high-quality early childhood programs are consciously designed to provide a more enriching (and by implication ‘different’) care experience for children from low-income or disadvantaged backgrounds. This is based on the knowledge that these experiences can enhance children’s cognitive and language development, at least in the immediate- and short-term (see Rosenthal, 1999; Schnaper, 2002; Loeb, Fuller, Kagan, & Carrol, 2004). This suggests that children can make sense of different expectations between home and child care, and thus derive benefits from each environment independently (Long & Garduque, 1987; Erwin et al., 1993; NICHD Early Child Care Research Network, 1997; Schnaper, 2002).

Despite conflicting conclusions about the influence of home–child care differences on children’s development, developmental theory suggests supportive linkages between parents and carers contribute to children’s adjustment to new settings and overall child wellbeing (Powell & Bolin, 1992; van IJzendoorn et al., 1998). According to Rosenthal (2000), if there are tense rather than supportive relationships between carers and parents, and a lack of knowledge about differences, ‘the wellbeing of children is endangered’ (p. 12). Other research conducted by Owen et al. (2000) also found that more partnership behaviour in care settings was linked to more positive interactions both between carers and children and between children and their mothers.

Researching the quality of partnerships in early childhood settings

Much of the (predominantly North American) literature about parent–carer partnerships suggests that a family-centred partnerships approach is rarely seen in practice (Schnaper, 1997). Feagans and Manlove (1994) concur, and highlight that ‘the literature paints a somewhat dismal picture’ (p. 588) of relationships between parents and carers in formal child care settings. This is despite research that exists to suggest partnerships are valued by both parents and carers (Nelson & Garduque, 1987; Lamb-Parker, Piotrkowski, Baker, Kessler-Sklar, Clark, & Peay, 2001), and both parents and carers see a lack of similarity in the care of children as potentially harmful and disruptive (Nelson & Garduque, 1987).

Much of the research about parent–carer partnerships has been conducted in centre care settings (Schnaper, 1999). This literature suggests that communication between parents and centre carers is most likely to occur at ‘drop-off’ and ‘pick-up’ times, and that these interactions are regular, but generally brief (Endsley & Minish, 1991; Schnaper, 1997). Endsley and Minish (1991) observed parent–carer interactions in 16 centre care settings and found most interactions to be social and brief and that 20 per cent of the interactions observed were merely greetings. When more extensive conversations did occur, they tended to focus on basic care issues such as the child’s behaviour, health concerns, and the child’s activities during the day. Further, the authors report that information about childrearing and topics regarding cognitive and social development were rarely discussed. However, more substantive interactions were found to take place in infant and toddler rooms than in preschool rooms.

Ghazvini and Readdick (1994) measured parents’ and carers’ perceptions of the frequency and importance of one-way, two-way and three-way (involving a community service) exchanges in 12 child care centres in the United States. Carers reported all forms of communication with parents occurred more often than parents reported such interactions taking place. The study also found that frequency of parent–carer communication was positively correlated with an objective assessment of the quality of the care setting, which utilised the widely used Harms and Clifford Early Childhood Environment Rating Scale (1980).

Recent Australian research has supported many of the US findings described above. Hughes and MacNaughton (2002) conducted a small-scale qualitative study with carers from five child care centres. Carers were asked about their communication with parents and the ways they worked with parents to encourage dialogue. They found that communication between parents and carers is often ‘problematic and complex’ (p. 15) and that carers tend to communicate informally with parents. It was reported that many centre carers found formal ways of communicating with parents of little help in building better relationships with parents, although carers in all five centres reported using a mix of formal and informal communication approaches.

Utilising parents’ perspectives, Australian researchers Hayden, De Gioia and Hadley (2003) found quite different results. Their study, which combined information from interviews, surveys and focus groups (involving a total of 180 parent participants), explored the ways in which partnerships could be enhanced between families from culturally and linguistically diverse (CALD) backgrounds and early childhood services. Parents in this study reported being eager to participate in centre life, but lacked confidence as to how to initiate this involvement. Findings also suggest that for parents from CALD backgrounds in particular, informal approaches were the least preferred, and that more formal approaches such as organised interviews and meetings better suited them. For example, parents reported that drop-off and pick-up times were too hurried for giving and receiving information (Hayden et al., 2003). However, parents said they valued highly the use of communication books and organised meetings that gave information about the program or their child’s development and that informal discussions could also be initiated at these times.

Findings from research about parent–carer communication in family day care have generally been more positive than those associated with centre care. Research by van IJzendoorn et al. in the Netherlands (1998) used survey responses from parents and carers from four different types of child care (centre care, family day care, after-school care and babysitter care). They found that the quality of communication in the family day care settings they studied was better than that found in centre

care.² Parents of children attending home-based care (such as family day care) also reported closer personal relationships with caregivers than parents of children attending centre care (Pence & Goelman, 1987). Other researchers have found that parents and carers in home-based care settings spend more time talking with each other during transition times at the beginning and end of each day than parents and carers in centre care, although these interactions were found to frequently involve conversation about topics unrelated to the child (Powell & Bolin, 1992). Endsley, Minish and Zhou (1993) also found that adult-centred conversations regularly occurred in the child care centres they observed.

Barriers to partnerships between parents and carers

A number of issues have also been identified in the relevant research literature that may impact on parent–carer relationships, whether in centre-based or family day care settings. For example, carers in the US report that engaging parents is difficult, as parents can be indifferent towards communication (Galinsky, Shinn, Phillips, Howes, & Whitebook, 1992). This research also suggested that carers were most likely to report positive relationships with parents with more education and higher incomes, who were in a couple relationship, and who actively sought to use carers as a resource for learning about childrearing and child development. This was noted as an issue of some concern, as the families who were already most advantaged tended to have the most positive parent–teacher relationships (Galinsky et al., 1992).

Time pressures on both parents and carers may be partly responsible for a lack of engagement. Research by Endsley and Minish (1991) found that centre-based carers were more accessible in the mornings but parents were more accessible during the afternoon. Such a mismatch in availability could also lead to difficulties for both parents and carers in trying to engage one another, inhibiting information flow.

The tendency of carers to place a higher value on professional knowledge than on parents' own knowledge about children and childrearing is noted as a further factor inhibiting parent–carer partnerships. Hughes and MacNaughton (2000), for example, argue that although the importance of parent–carer partnerships is emphasised in the child care literature, in practice, parents' roles in such exchanges are often constructed as 'subordinate' or of less importance than the knowledge of the child care professional (p. 242). In an analysis of 162 journal articles that contained reference to parent–carer communication, Hughes and MacNaughton (2000) found that parental knowledge was seen as important, but was not given as much weight as the professional knowledge of the carer.

Tensions between parents' preferences and carers' knowledge of what is 'best' for children in a group care setting may also strain relationships between parents and carers. Feagans and Manlove (1994) argue that many carers hold the view that 'professionals know better than parents how to educate and manage the behavior of children' (p. 585).

In summary, the nature of relationships between parents and carers is an under-researched but important aspect of the care of young children. Despite some limited findings about parent–carer partnerships (albeit predominantly from the US), most of the literature about these partnerships is professional literature that offers advice to carers and tends to be based on anecdotal rather than research evidence. Much more needs to be understood about the nature of, and barriers to, parent–carer partnerships in different child care arrangements—both in Australia

2 Communication was measured using the Parent Caregiver Relationship Inventory, which was a scale adapted for the study from the Barrett–Lennard Relationship Inventory (1962) (see van IJzendoorn et al., 1998).

and overseas. This is especially important in the context of culturally diverse child care settings.

The Child Care in Cultural Context study aimed in part to help fill this gap in knowledge. The remainder of this paper explores the nature of relationships between parents and carers in culturally diverse child care settings as reported by carers participating in the study. Firstly, the degree to which carers engage parents about childrearing practices, the ways in which carers engage parents, and the barriers to doing so are discussed. Secondly, the carers' reports of the extent of differences between parents and carers in childrearing practices are considered, followed by a description of the types of differences experienced. The barriers carers report in accommodating parents' preferences when they differ from carers' beliefs are also explored.

The Child Care in Cultural Context study

The Child Care in Cultural Context study was developed by the Australian Institute of Family Studies to consider the nature of differences between home and child care and the subsequent influence on child wellbeing (Wise & Sanson, 2000).

Data collection

Families and carers were sought from Anglo, Vietnamese and Somali backgrounds. The Vietnamese and Somali cultural groups were chosen because they represent cultures that reflect 'non-Western' childrearing values and beliefs. They have also been in Australia for varying lengths of time, thus their 'immersion' and adoption of Australian cultural values is likely to be different (da Silva & Wise, forthcoming).

Parents and carers of 258 children provided information to the study. Information was collected via questionnaires that respondents either completed themselves, or completed through face-to-face interviews in their preferred language.

Participants were recruited through child care centres and family day care schemes across metropolitan Melbourne in areas with high Somali and Vietnamese immigrant populations. Reflecting the differences in care types and the cultural diversity of the targeted sample, the sample was not random, with different methods employed to encourage participation. Vietnamese and Somali research assistants used their community networks to recruit participants for the study and Institute researchers visited carers in child care settings and at family day care area meetings to provide information about the study and invite participation.

In most cases, carers were initially approached and if they agreed to participate in the study, assisted researchers in recruiting families of children in their care into the study. However, in a small number of cases, parents were initially approached via community networks and local councils, with consent then sought from the child's care provider.

For a detailed description of the sampling strategy, readers are referred to Wise and Sanson (2000).

Measures

This paper uses information collected from carers via the surveys. Carers were asked to respond to a number of rating scales and open-ended questions about their relationships with parents.

In order to gauge the degree to which carers engaged parents about their childrearing practices at home, carers were asked to indicate on a scale of 1 to 10: 'How much

do you work with parents to understand their perspectives on childrearing?', with a score of 1 indicating 'not at all' and a score of 10 indicating 'very much'. Carers were also asked via open-response questions to describe the strategies they used to work with parents to understand their childrearing perspectives and any difficulties they had experienced in achieving this.

To measure the extent to which carers sought out information about parents' care practices that differed from their own, carers were asked to indicate 'yes' or 'no' to the question: 'Do you find out about differences between parents' practices and your own behaviour?' Carers who indicated that they did find out about differences were then asked to indicate on a 10-point scale (from 10 per cent to 100 per cent) the proportion of parents they would find differences with on child care issues. These carers were also asked via an open-response question to describe the most common differences found between parents' practices and their own behaviour.

Finally, carers were also asked via an open-response question to describe any difficulties they had faced in accommodating parents' childrearing practices and behaviours that differed from their own.

Participants

Children's ages ranged from 2 months to 5 years and 9 months (mean age = 2 years and 5 months). Children's primary care arrangements were centre-based care ($n = 146$), family day care ($n = 100$) or informal home-based care ($n = 12$). Due to the small number of children attending informal home-based care as their principal child care arrangement, these children have been excluded from the current analyses for this paper, leaving a sample of 246 children.

Of the children using centre care or family day care as their principal or primary care arrangement, both parent and carer data was available in 216 cases, with 242 carers providing information about children in their care. This paper is based on these 242 carer reports.

Children's cultural backgrounds were classified based on the cultural background of the respondent parents. Of the 246 children who identified centre care or family day care as their primary care arrangement and for whom data was available, 87 children had parents who were Australian-born from Anglo backgrounds, 64 children had parents from Vietnamese backgrounds, 74 children had parents from Somali backgrounds and a further 21 children had parents from Australian-born but non-Anglo ethnic backgrounds. For the purposes of this paper, this last group are described as 'Diverse'. The distribution of children from these cultural backgrounds in family day care and centre care is presented in Table 1.

Table 1. Cultural background of study children by care type

Cultural background	Care type		
	Centre care ($n = 146$) %	Family day care ($n = 100$) %	Total ($n = 246$) %
Anglo	39.0	30.0	35.4
Somali	19.9	45.0	30.1
Vietnamese	28.8	22.0	26.0
Diverse	12.3	3.0	8.5

For group comparisons, due to small numbers in the Diverse groups and for continuity with classification of carer ethnicity, the Anglo/Diverse groups have been combined for the following analyses.

Parent characteristics

Of the children for whom parental information was available, 78.4 per cent were living in intact couple families, 14.0 per cent were living in sole parent families and 7.7 per cent lived in a household with a parent and other adults. No statistically significant differences were observed between care types according to family structure ($\chi^2(2) = .615, p = .732$).

Twenty-seven per cent of children whose parents were participating in the study lived in households where no parent was employed. However, employment status in children's families differed by care type ($\chi^2(1) = 10.95, p = .001$).³ Nineteen per cent of children from the centre care sample compared to 40 per cent of children from the family day care sample were from households where no parent was employed. This difference in levels of 'jobless' households between the two groups is most likely due to the high proportion of Somali and Vietnamese children using family day care (67 per cent of the children in the family day care sample were either Somali or Vietnamese), as Somali children and Vietnamese children are significantly more likely to come from families where no parent is employed (52 per cent and 40 per cent respectively) than children from Anglo/Diverse backgrounds (5 per cent) ($\chi^2(2) = 49.60, p < .001$).

Mothers' age and level of education also varied by type of child care. Mothers of children who attended centre care were more likely to be over the age of 35 (45.6 per cent) than mothers whose children attended family day care (27.5 per cent), and less likely to be under the age of 25 than family day care mothers (centre care = 5.1 per cent, family day care = 18.7 per cent) ($\chi^2(1) = 6.82, p = .009$). Mothers whose children primarily attended centre care were also more likely to have completed tertiary studies (38.5 per cent) than mothers from the family day care group (16.1 per cent) ($\chi^2(1) = 10.69, p = .001$). Again, these differences were likely to have been a by-product of the concentration of Somali and Vietnamese children in the family day care sample—when Somali and Vietnamese mothers were removed from the care type comparisons, no differences were found in mothers' education attainment.⁴ Most mothers from Somali and Vietnamese backgrounds were aged under 35 years (86.7 per cent and 74.2 per cent respectively), whereas mothers from and Anglo/Diverse background were more likely to be aged 35 or over (60.0 per cent) ($\chi^2(2) = 40.84, p < .001$). Similarly, while 52.4 per cent of mothers in the Anglo/Diverse group reported holding a tertiary qualification, only 4.5 per cent of Vietnamese mothers and 3.6 per cent of Somali mothers reported having completed a tertiary or postgraduate degree.

Hours spent in child care

A significant relationship was also found between the number of hours children attended their primary care arrangement per week and care type ($\chi^2(4) = 9.91, p = .04$), with children in centre care using significantly more hours of child care on a weekly basis (18.7 per cent of children in centre care used more than 40 hours per week of child care, compared to 24.7 per cent of children in family day care). Overall, most children (approximately 80 per cent) spent less than 40 hours per week in care.

³ For chi-square comparisons where the degrees of freedom equal 1, the Yates Correction for Continuity has been applied to the chi-square statistic. This correction accounts for a possible over-estimation of the chi-square value for 2 by 2 tables (see Pallant, 2005).

⁴ $\chi^2(1) = .537, p = .464$

Carer characteristics

Carer qualifications and experience

Most centre carers (78.3 per cent) who provided information to the study had completed a relevant diploma or certificate. In addition, 12 per cent had completed a relevant tertiary degree and only 3.5 per cent had no formal early childhood qualifications. By contrast, only 44.3 per cent of family day carers had completed a relevant diploma or certificate, and 33 per cent had no formal child care qualification. No family day carers reported having completed a relevant Bachelor degree. Whether or not carers held any sort of qualification also differed according to the type of care setting, with centre carers more likely to hold any sort of formal child care qualification⁵ than family day carers ($\chi^2(1) = 36.32, p < .001$). It should be noted, however, that rates of formal child care qualifications reported in this study are much higher than the national average for both centre carers (55 per cent) and family day carers (26 per cent) (Department of Family and Community Services, 2003, p. 16). This suggests that family day carers with qualifications were more likely to take part in the Child Care in Cultural Context study than those without qualifications. For centre care it seems likely that the 'qualified carer' for each room was nominated to complete the survey in most instances.

In terms of years of experience, family day carers had spent more years working as a child care worker. A higher proportion of family day carers (71.7 per cent) had more than five years' experience than centre carers (49.7 per cent). Differences in years of experience between centre carers and family day carers were statistically significant ($\chi^2(1) = 10.86, p = .001$).

Carer cultural background

Like the children in the Child Care in Cultural Context study, carers were also from diverse cultural backgrounds. Carer ethnicity was not collected in the carer survey, but was assigned by researchers after meeting carers during the observation stage of the study. Care providers who were not Somali or Vietnamese were combined for analytic purposes and referred to as Anglo/Diverse carers, to provide a measure of cultural match with children from Anglo and Diverse backgrounds. The distribution of carers' cultural backgrounds by child care type is shown in the Table 2.

Table 2. Carer cultural background by care type

Carer cultural background	Care type		
	Centre care (n = 146) %	Family day care (n = 100) %	Total (n = 246) %
Anglo/Diverse	95.9	36.0	71.5
Vietnamese	3.4	19.0	9.8
Somali	0.7*	45.0	18.7

Note: * represents one carer

Carers in centre care settings were most likely to be from an Anglo/Diverse cultural background. Vietnamese and Somali carers mostly worked in family day care settings. This is important to note, because differences in carers' approaches may be confounded by the mix of cultures of both children and carers within the centre care and family day care groups. This should be remembered when considering the results presented in the findings section.

⁵ This includes a Bachelor degree, diploma or certificate in early childhood or child care studies.

Cultural match between child and carer

In most cases, children attending family day care had the same cultural background as their carer (97 per cent).⁶ This applied to all Somali children, and all but three Vietnamese children. Further, approximately half (54 per cent) of children in centre care had the same cultural background as their carer, although the majority of Vietnamese and Somali children attending centre care were not cared for by a carer from the same cultural background. This confirms that very few Vietnamese and Somali carers in the current study worked in centres.

Again, the high level of cultural match between children and carers in family day care compared to centre carers and children in the study needs to be considered when interpreting the findings reported below, as differences observed between centre care and family day care may in fact be confounded by the 'match' or otherwise in parents' and carers' cultural backgrounds.⁷

Findings

As mentioned earlier, this paper sets out to provide information about the extent to which carers work with parents to understand parents' childrearing perspectives. Carers were also asked to report ways in which they engaged parents on parenting issues, the types of parenting issues they came into conflict over and the barriers they met in trying to work with parents within a partnerships framework.

These findings are structured to compare the practices of centre carers and family day carers, as previous research suggests that there may be some variation in the extent to which carers work with parents to understand their childrearing perspectives, the level of differences found between parents' practices and their own and in the ways carers deal with these differences with parents (Powell & Bolin, 1992; van IJzendoorn et al., 1998). Findings are also presented according to both carer and child cultural backgrounds, as it is hypothesised that variation may also occur according to whether parents and carers are of the same or different cultural backgrounds.

The findings are presented in two parts. Attitudinal data are presented first, followed by carers' reports of the qualitative nature of their engagements with parents.

Carers' reports about their experiences of working with parents

Extent of partnership practice

Carers were asked to rate the extent to which they worked with parents to understand their perspectives on childrearing. Ratings were provided on a 10-point Likert-type scale, where a score of 1 indicated that carers did not work with parents at all and a score of 10 indicated they worked with parents to a great extent. Overall, carers' responses indicated a high level of commitment to working with parents to understand their childrearing perspectives (mean = 8.03).

These data were also compared by care type subgroups and cultural match subgroups using independent samples t-tests. A significant difference was found between family day carers (mean = 8.54) and centre carers (mean = 7.69) ($t(240) = 3.93, p < .001$), and between the culturally matched (mean = 8.36) and

6 However, as Anglo and Diverse carers were combined into one category for analytic purposes, the degree of cultural match between children and carers in both family day care and centre care settings may be overstated to some extent.

7 For a more detailed description of the current sample, see da Silva and Wise (forthcoming).

not culturally matched carer–child pairs (mean = 7.21) ($t(240) = 5.34, p < .001$). In short, family day carers and culturally matched pairs reported more partnership practice than centre carers and not culturally matched pairs. These findings are hardly surprising, given the considerable overlap between individuals in the family day care and culturally matched pairs.

Significant differences were also found between the extent to which carers reported working with parents when considered by the carers' cultural background ($F(2) = 26.87, p < .001$). Somali carers reported working with parents the most (mean = 9.46), followed by Anglo/Diverse carers (mean = 7.80), and finally Vietnamese carers (mean = 7.00). Responses from Somali carers were also markedly homogeneous, with a range of only 3 and a standard deviation of .959 observed for this item, compared to a range of 7 and a standard deviation of 1.68 for Anglo/Diverse carers, and a range of 5 and standard deviation of 1.44 for Vietnamese carers. Post-hoc tests using a Bonferroni adjustment found that while differences between Somali carers compared to both Vietnamese and Anglo carers were statistically significant ($p < .001$), differences between Vietnamese and Anglo carers were not statistically significant ($p = .057$). It should also be noted that given that all but one of the Somali carers worked in family day care settings, the high levels of working with parents reported by Somali carers may account for the differences between centre carers and family day carers.

Strategies to understand parents' perspectives

Carers were also asked to describe how they worked with parents to understand their childrearing perspectives in an open-ended response format. Data were missing for a small number of cases ($n = 11$). Examination of the remaining 231 cases revealed some common themes across the entire sample, as well as some differences between family day carers and centre carers. Excerpts of selected carers' responses that represent these themes are given verbatim, and then discussed, below.

Strategies to understand parents' perspectives: centre carers' reports

Not surprisingly, centre carers' responses to the open-ended response question about the ways they worked with parents showed a strong emphasis on informal exchanges at drop-off and pick-up times.

A lot of my discussions are informal and take place within the room.

Anglo/Diverse centre carer, Anglo child

I talk to the parent on arrival and departure of creche. This information is mainly found out from incidental discussions, which occur daily or whenever the child comes to creche.

Anglo/Diverse centre carer, Anglo child

Day-to-day, information swapping when parent comes to pick up the child.

Anglo/Diverse centre carer, Vietnamese child

Talking about the child's experience of the day was an important aspect of communication for many centre carers. Responses from some carers suggested that communication tended to focus on basic information about the child's day, with the information flow appearing to be predominantly from carer to parent. Again, this is not an unexpected finding.

We discuss with parents on a daily basis about their child's behaviour.

Anglo/Diverse centre carer, Somali child

Parents can ask carer questions.

Anglo/Diverse centre carer, Anglo child

I talk with parents in mornings and afternoons about their child's day. Parents have access to all observation files. The program plan is clearly displayed on the wall.

Anglo/Diverse centre carer, Somali child

Many centres also gave examples of arrangements such as parent-teacher evenings, newsletters and parent information nights as information-gathering strategies. Carers of younger children also noted the use of daily written information about the child's day, such as the number of nappy changes, the amount of food/milk consumed, and how much the child has slept.

Verbal and written information between carers and parents on a day-to-day basis of when children are in care.

Anglo/Diverse centre carer, Anglo child

Daily discussion, centre plan for parents to view and add their own initiated experiences, daily communication sheets.

Anglo/Diverse centre carer, Diverse child

Talk to the parent about how the children are going on a daily basis. Write down what children do throughout the day and give information to parents.

Anglo/Diverse centre carer, Vietnamese child

For some carers, taking time out to research and understand parents' cultures was also reported as a way of understanding parents' perspectives on child care.

Researching the culture and discussing aspects of it with parents.

Discussions at the end of the day and asking lots of questions.

Anglo/Diverse centre carer, Vietnamese child

Reading and researching Vietnamese culture—discussion with Vietnamese carers.

Anglo/Diverse centre carer, Vietnamese child

Other centre carers reported specifically finding out about parents' own practices and preferences, seeking information about children's experiences in the home.

An active exchange of how the child is participating in the program and information about the home environments is sought at least weekly.

Anglo/Diverse centre carer, Anglo child

When certain issues arise I ask how parents would deal with these issues at home and how the child responds—thus giving an insight into the child and the appropriate way to reach a solution with him/her.

Anglo/Diverse centre carer, Vietnamese child

Talking with parents about the sorts of things they do at home with their child.

Anglo/Diverse centre carer, Vietnamese child

Discussing strategies and their way of doing things at home.

Anglo/Diverse centre carer, Anglo child

A few carers specifically referred to listening to parents and working in partnerships.

Asking questions, listening to answers.

Anglo/Diverse centre carer, Anglo child

On-going information exchange with parent. Work in partnership with parent.

Anglo/Diverse centre carer, Somali child

Some centre carers highlighted the importance of finding out about parents' childrearing perspectives at the time of the child's enrolment, as well as maintaining regular discussions throughout the year.

Initial meeting involves great discussion, which is then followed up a short time later. Information is also gained via the enrolment form and feedback sheets throughout the year. I hold quarterly information exchange evenings and encourage parents to meet with me throughout the year—whenever necessary.

Anglo/Diverse centre carer, Vietnamese child

Working with parents on the best 'settling-in' procedures for their child. Giving parents the opportunity to bring in food from home to give to their child for lunch. Incidental discussions with parents on arrival and departure for progress reports.

Anglo/Diverse centre carer, Vietnamese child

Some centre carers also reported actively seeking ways of working with parents to help children in their care adjust to differences found between home and child care settings.

We actually do our best to follow the same routine that the child has at home, for example, we endeavour to learn words of different languages etc. We celebrate different festivals from other countries, for example, Chinese New Year or Jewish Passover.

Anglo/Diverse centre carer, Diverse child

We really spend a great deal of time with each family. The children orientate prior to starting and we spend quality time discussing the children's needs, obtaining an understanding of the children's background.

Anglo/Diverse centre carer, Diverse child

Working with parents is an important part of working with children. Staff try to work together with parents in collaboration so as to maximise all resources.

Anglo/Diverse centre carer, Vietnamese child

Strategies to understand parents' perspectives: family day carers' reports

As with centre carers, a number of family day carers reported that communication with parents occurred at drop-off and pick-up times.

Talk to parents almost everyday when they come to pick up their children.

Vietnamese family day carer, Vietnamese children

Family day carers were less likely to mention structured strategies such as newsletters and formal parent-carer interviews than centre carers; however, a large proportion of family day carers mentioned making time to speak with parents about their children on a regular basis.

In the morning parents like to stay for a while, giving us a chance to discuss issues concerning the children, various parenting styles and concerns.

Anglo/Diverse family day carer, Anglo child

Regular friendly conversation, taking feedback from parents, try to work out together what is best for the child, taking special time to talk about important issues.

Anglo/Diverse family day carer, Anglo child

Some family day carers also reported approaches that involved two-way communication to find out about parents' childrearing perspectives.

I discuss on a regular basis how they deal with situations and compare them with how I deal with similar situations and offer advice where applicable.

Anglo/Diverse family day carer, Anglo children

As with some centre carers, a number of family day carers also highlighted the importance of involving parents from the beginning of the child's enrolment in care and continuing this dialogue over time.

Everyday I communicate with the parents. I found a lot of information about many issues before care began ... the communication is ongoing.

Anglo/Diverse family day carer, Anglo child

Reflecting, perhaps, the reported high levels of working with parents by Somali carers earlier in this paper, Somali carers' reports suggested a stronger focus on finding out about parents' wishes and preferences—particularly relating to routines and food—both at the start of the care relationship and over time.

I talk to the parent as we go and give them updates. Also we talk about the food, routines and ways in which they want their children to be looked after.

Somali family day carer, Somali children

The parents visit me and talk about what they need and their ways, like using the Somali language and providing Somali meals.

Somali family day carer, Somali children

Every parent would be happier if the carer plans for their children and discusses the plan with the families so that they can include in the plan cultural practices which the parents want to remain with the child, and maintain their cultural beliefs and to further develop their skills.

Somali family day carer, Somali children

Barriers to working with parents

Carers in this study were asked to describe the barriers they experienced in working with parents. Overall, 84 per cent of carers ($n = 207$) who participated in the Child Care in Cultural Context study responded to this question.

Barriers to working with parents: centre carers' reports

For centre carers, the difficulties associated with lack of time were frequently voiced.

The time—day care is a busy industry with not much time to do other things.

Anglo/Diverse centre carer, Anglo child

Time—too busy to have lengthy conversations with parents.

Anglo/Diverse centre carer, Somali child

Centre carers also suggested that parents were often busy and appeared hurried at drop-off and pick-up times.

It is difficult as most parents don't have the time to stop and chat before and after work. When we make interview nights, we have quite a good response, so we need to allocate time frames for each interview, so sometimes they may be cut short to try and fit everybody in.

Anglo/Diverse centre carer, Anglo child

Time constraints—catching the parents to speak to them on a one-to-one basis during their coming and going.

Anglo/Diverse centre carer, Vietnamese child

Some centre carers' comments indicated that information exchange sometimes needed to occur out of regular working hours, which involved staying behind after hours.

Sometimes falling behind in routine tasks when taking time out to talk to parents. Staying back after hours to talk to a parent.

Anglo/Diverse centre carer, Vietnamese child

Time constraints are a large issue—in relation to additional work load and after-hours work for staff and accommodating the client's family situations and availability.

Anglo/Diverse centre carer, Vietnamese child

In some cases, related to time pressures, the sheer number of parents that carers needed to work with creates difficulties.

Making time to speak to parents at beginning and end of each day can be difficult with 25 children in the room, which means 50 staff–parent interactions per day.

Anglo/Diverse centre carer, Anglo child

Centre carers who cared for children from a diverse range of cultural backgrounds mentioned specific difficulties, such as language.

Language barriers can make communication difficult.

Anglo/Diverse centre carer, Anglo child

Parents in need of an interpreter.

Anglo/Diverse centre carer, Vietnamese child

Even in centres where a bilingual carer may be employed, if they are not always available when parents visit, difficulties may arise.

If a parent cannot speak English and the other carer is not around, it's hard to communicate.

Anglo/Diverse centre carer, Vietnamese child

Centre carers also reported that some parents were not interested in exchanging more than basic information about their children.

Some parents seem to only want to know that their children have been safe, fed, etc.

Anglo/Diverse centre carer, Anglo child

Most parents are very concerned about their child's development—for others we can only keep trying.

Anglo/Diverse centre carer, Anglo child

Sometimes parents are reluctant to divulge information about their child.

Anglo/Diverse centre carer, Diverse child

Lack of parent interest.

Anglo/Diverse centre carer, Vietnamese child

Some parents are hard to talk to, whether uncooperative or always busy.

Anglo/Diverse centre carer, Anglo and Diverse children

Barriers to working with parents: family day carers' reports

Difficulties in overcoming time pressures were also reported by family day carers in the study as barriers to working with parents.

Sometimes time constraints.

Anglo/Diverse family day carer, Anglo children

Time—on my behalf and the parents.

Anglo/Diverse family day carer, Anglo children

We don't have much time, so I can talk and ask the parents bit-by-bit every day.

Vietnamese family day carer, Vietnamese child

Like centre carers, family day carers reported difficulty engaging some parents about their child or their childrearing perspectives.

Not all parents want to discuss their perspectives.

Anglo/Diverse family day carer, Anglo children

Parent doesn't give much value about carer's opinion.

Anglo/Diverse family day carer, Anglo children

Responses from family day carers also suggested that discussions with parents were held outside of normal working hours in order to help overcome time constraints.

Busy (from both sides)—that is the reason why sometimes we have to talk over the phone at night or at weekend.

Vietnamese family day carer, Vietnamese child

Carers' reports about discovering and accommodating differences

Discovering differences

The next findings consider whether carers attempt to find out about differences between parents' childrearing practices and their own, the extent to which such differences exist and what these differences may be. These findings relied on carers' responses to open-ended questions included in the carer questionnaire. Carers completed information about differences in childrearing practices with parents if they responded 'yes' to a leading question: 'Do you find out about any differences between parents' practices and your own behaviour?' Although the mean score for the extent of partnerships practice question reported earlier was high (mean = 8.03 on a 10-point Likert-type scale), only 155 (64 per cent) carers reported that they did find out about differences between parents' practices and their own. Further, centre carers (76.9 per cent) were significantly more likely to find out about differences than family day carers (45.5 per cent) ($2(1) = 23.81$, $p < .001$).

The 155 carers who indicated that they had found out about differences with parents were also asked to specify the proportion of parents who held different ideas to them about child care issues, using a 10-point scale, with a score of 1 indicating that 10 per cent of parents held different ideas, and a score of 10 indicating 100 per cent of parents held different ideas. On average, carers tended to report that their own views differed from those of around one-third of parents (35.5 per cent) on child care issues. Differences in responses between centre carers and family day carers were small (37.3 per cent and 31.6 per cent respectively) and non-significant.

The nature of parent-carer differences

Carers who reported finding out about differences were asked to describe the types of childrearing differences they found. One hundred and sixty-four⁸ carers responded to this question. Responses tended to focus on basic care issues such as

⁸ A small number of the carers who reported not finding out about differences with parents responded to this question. In these cases their responses were 'no difference'.

toilet training, sleep routines and outdoor play in cold weather. A much smaller number of carers reflected on differences involving discipline, the value of play as a tool for learning and the importance of encouraging independence. These responses are reported according to care type below.

Parent–carer differences: centre carers’ reports

The 108 centre carers who responded to this question reported an extensive range of parent–carer differences, although differences in basic care routines were most often reported, and the timing of toilet training featured here. Irrespective of ‘cultural match’, carers also reported different discipline approaches. Some of the comments relating to child discipline and toileting are provided below.

Behaviour guidance—setting limits and sticking to them—most common. Some toileting, that is too many choices—undies, pull-ups, nappies—can confuse some children.

Anglo/Diverse centre carer, Anglo children

Guidance issues—for example bribing children with lollies.

Anglo/Diverse centre carer, Anglo child

Smacking as a behaviour guidance technique. Doing more for children as opposed to developing self-help skills, for example feeding children when they are able to do it themselves. Allowing children to walk around while they are eating and drinking. Not allowing children to play with water, sand or mud. The above are examples of parents’ practices that are different to my own.

Anglo/Diverse centre carer, Anglo children

Carers’ perception of parental inexperience, rather than cultural differences, was seen as a source of differences between carers and parents, as the following reports suggest.

Probably toilet training—parents not really knowing when or how to go about it. We, as carers, give them advice from what we have been taught, information sheets on the issue—most parents are most appreciative.

Anglo/Diverse centre carer, Anglo children, but number of Vietnamese children also in her care

However, some carers also mentioned a range of differences that they attributed to differing cultural expectations and beliefs about raising children. For example, in centres with a high proportion of Vietnamese children, the commencement of toilet training was often referred to.

The majority of Vietnamese parents ask me to begin toilet training as soon as they start in my room (when the child is two years old).

Anglo/Diverse centre carer, Vietnamese child

One carer also referred to differences in toileting arising from parents’ religious requirements.

Washing children’s bottoms after toilet use as with Muslim culture.

Occasionally parents are very concerned about the lack of privacy in child care bathrooms.

Anglo/Diverse centre carer, cares for both Anglo and Diverse children

In centres with a high proportion of Somali and Vietnamese children, feeding and ‘messy’ play were commonly reported sources of difference between parents and carers.

The biggest issue is the type of sensory experiences offered: sensory play such as water/sand, goop, slime, digging is often looked on as 'dirty' in some cultures.

Anglo/Diverse centre carer, Vietnamese child

Differences surrounding food largely concerned the amount and type of food children should eat. Australian carers reported giving children some choice in the amount of food they consumed, in contrast to some Somali parents, who expected children to finish all food that was offered to them.

Somali families expect me to hand feed children, even if it means being forceful.

Anglo/Diverse centre carer, Somali children

Cultural differences were also observed regarding the achievement of developmental milestones. One Australian carer who had both Anglo and Vietnamese children in her care, observed a tendency among Vietnamese parents to place importance on children reaching developmental milestones at an early age.⁹

Anglo parents seem a lot more relaxed and easygoing regarding children's development, whereas Vietnamese parents are more demanding and concerned that their child may not be developing quickly enough.

Anglo/Diverse centre carer, Vietnamese child

Related to this were carers' reports of different attitudes towards the value of play as a learning tool, as opposed to adult-directed learning activities. These differences appeared to apply to Anglo carers and Vietnamese parents the most.

Parents don't like their children to play with sand or water, instead they are more concerned that their children learn to count, to write. They pay little attention to other activities.

Anglo/Diverse centre carer, Vietnamese child

Another area of difference for carers of children from both Somali and Vietnamese backgrounds was the different emphasis placed on independent behaviours, such as self-care skills.

Vietnamese parents rarely encourage their children to become independent. For example, instead of encouraging their children to do things for themselves, to learn to take responsibility, they like to help their children put on their shoes (or socks) or feed them even if their children are 3–4 years old, or even 4 or 5 years old. Parents don't train them to put things away after using or play etc.

Anglo/Diverse centre carer, Vietnamese child

Although this carer's perspective seems somewhat contradictory to the statements above about Vietnamese parents having higher expectations for children's development, it may suggest that carers experience parents who have varying expectations for different aspects of their child's development. Alternatively, it may be that what carers attribute to culture may in fact be individual rather than culturally based differences.

Parent–carer differences: family day carers' reports

All 45 family day carers who found out about differences between their own practices and those of parents described these differences. The range of differences

⁹ It should be noted, however, that overall, Vietnamese parents did not expect children to achieve key developmental milestones at an earlier stage than other parents. da Silva and Wise (forthcoming) report that, with the exception of cognitive outcomes, there is no significant difference between parents from Vietnamese backgrounds and their carers in terms of the age at which they would expect children to achieve key developmental milestones.

was rather more limited than that reported by centre carers. This may reflect the greater degree of similarity in cultural backgrounds between parents and carers in family day care compared to centre care settings. However, the narrow range of responses from family day carers should also be considered in the light of the fact that fewer family day carers participated in the study than centre carers and that less than half of family day carers reported trying to find out about how parents' practices differed to their own.

Similar to reports from centre carers, family day carers described differences around basic care practices such as behaviour management and toileting.

Some parents try to get their child to go to the toilet/potty long before they are ready.

Anglo/Diverse family day carer, Anglo and Diverse children

Some parents believe that a smack is as good as time out. While I have been known to smack my own children, I do try very hard to avoid it happening as I don't believe it achieves anything. It is more a stress release for the parent.

Anglo/Diverse family day carer, Anglo children

Unlike centre carers, some family day care providers, particularly Somali carers, emphasised cultural similarities, even when differences in parenting approach were observed.

The people who I look after, their children, we have different behaviour! But we are the same culture all the way.

Somali family day carer, Somali children

We all have common practices but we all have different habits.

Somali family day carer, Somali children

Allah has created everyone different, but the families which I look after, their children have the same cultural practices as mine.

Somali family day carer, Somali children

Reasons for parent–carer differences in care practices

Although this information was not explicitly sought, some carers offered their views about the reasons for differences between parents' practices and their own.

Carer education and training, for example, was cited as a source of differences between parents and carers in the way they guide children's behaviour.

It's different between culture [and] education. Carer—guiding children, asking children to do things, no fear, independent in eating, putting clothes on, make their own choices. Parents—forcing children, ordering children, making them fearful, dependent.

Vietnamese family day carer, Vietnamese children

Parents have a limited time living in Australia. There are cultural expectations and differences. I did a child care course. I'm a trained worker.

Vietnamese centre carer, Vietnamese child

Somali children using family day care were cared for by Somali caregivers exclusively. However, despite a cultural match, carers in this group also reported differences between parents' practices and their own. The need to balance parents' preferences with the needs of providing child care within a formal system of care, was cited as a reason for different care practices.

There are no common differences, but we all have different habits, therefore we all try to find a common ground under Australian guidelines.

Somali family day carer, Somali children

Another carer recognised that differences may arise for a multitude of reasons and suggested that differences between parents and herself were normal and to be expected.

Every parent has a different way of doing things. No one major difference ... I find that parents' practices are different (in small ways) to what I do, a lot of this is generational and lifestyle.

Anglo/Diverse family day carer, Vietnamese children

Accommodating parent–carer differences

The carer questionnaire also asked carers to describe any barriers they had experienced when trying to accommodate differences with parents over childrearing matters. Their responses suggest that although carers in this sample value a partnership approach, tensions exist in trying to accommodate parental preferences in practice. This appeared to be largely due to the constraints imposed by a high child-to-adult ratio, as well as the perceived desirability of implementing parents' wishes.

For example, some carers indicated that in a group care context, accommodating parents' preferences is not always achievable.

Sometimes it's hard to meet each parent's request for their child, as there are ten children to two staff. We do take into consideration what they ask and try to implement them—the only time we will not implement them is if they interfere with group needs.

Anglo/Diverse centre carer, Anglo children

Practical issues such as time and language difficulties were also reported as significant barriers to resolving differences. This reflects earlier findings about difficulties in engaging parents.

There is never enough time to do all that you want or need.

Anglo/Diverse centre carer, Anglo child

Language, embarrassment ...

Anglo/Diverse centre carer, Vietnamese child

Carers also suggested that some parents were unwilling to discuss differences or to strike a compromise when differences did occur.

Most of the time it works really well. The only thing would be time or some parents aren't interested.

Anglo/Diverse centre carer, Anglo child

All parents are different. Some will talk and listen and ask advice. Others are always right and don't want to know much, just not interested.

Anglo/Diverse family day carer, Anglo children

Parents dodging issues.

Anglo/Diverse family day carer, Anglo child

Another family day carer also suggested that it was not always appropriate to discuss differences when children were present.

The main difficulty is time in that the child is usually around at pick up or drop off, and trying to discuss that child while they are around is inappropriate. Usually have to make some other time to call or meet.

Anglo/Diverse family day carer, Anglo child

Centre carers also described the tensions involved in balancing the needs of all children in a group when different parents may have differing preferences for the care of their children.

In group care, a level of consistency is required so that children feel secure. This means that there needs to be a fair, stable but flexible set of limits for all children in care. This can differ from parents' ideas.

Anglo/Diverse centre carer, Anglo children

If parents are very definitely against messy play, it is difficult to explain to children why they cannot participate in experiences their friends are enjoying very much.

Anglo/Diverse centre carer, Anglo child

Difficulties arise when parents wish you to do something different with their child than with others—other children follow, [and parents' preferred practice] doesn't fit into routines.

Anglo/Diverse centre carer, Diverse child

In other cases, carers stated that although they were generally open to parents' preferences they sometimes felt that it wasn't appropriate to adopt them. This was reported as an issue by both family day carers and centre carers.

Some perspectives are inappropriate and there can be no compromise, but not all parents can see this—the flexibility with the smaller group can make most things possible within reason—but not all parents are happy with change for another child's sake.

Anglo/Diverse family day carer, Anglo children

Some ways are inappropriate in a child care setting. Obviously discussion always occurs, however, sometimes it depends in the circumstances and appropriateness.

Anglo/Diverse centre carer, Anglo children

However, sometimes the issue wasn't that carers personally believed that parents' preferences were inappropriate. In some instances, parents' requests contravened accreditation guidelines and/or the policies and philosophy of a particular centre.

It is not always easy to do exactly what parents would like due to the nature of child care. Parents' ways are not always appropriate to accreditation standards.

Anglo/Diverse centre carer, cares for both Anglo and Diverse children

Our centre policies, procedures and regulations are sometimes challenged, so we explain where we stand in regards to following procedures etc.

Anglo/Diverse centre carer, Anglo child

Requirements for accreditation. Kinder policies. Personal beliefs.

Anglo/Diverse centre carer, Vietnamese child

Sometimes difficulties arose because carers were unwilling to compromise their own practices or ways of managing children in a group care context.

I aim to listen to parents' point of view and if their way doesn't come into conflict with my opinions or values (based on training and experience) I am happy to incorporate them if possible without affecting my room too much.

Anglo/Diverse centre carer, Anglo child

Sometimes there is too much difference and common ground cannot be reached.

Anglo/Diverse family day carer, Anglo child

Discussion of findings

The current paper set out to firstly consider the extent to which carers work with parents to understand their childrearing approaches, and secondly to investigate how these differences are acted on, and the hurdles that carers felt prevented them from adopting parents' preferences in practice. The findings relating to these issues and the implications for child care policy and practice are discussed below.

Working in partnership with parents

Overall, carers participating in the Child Care in Cultural Context study reported beliefs and behaviours consistent with the ideals of 'partnership practice'.

Carers' responses indicated a high level of commitment to working with parents to understand their childrearing perspectives. However, small, statistically significant differences were found between centre carers and family day carers in the extent to which they reported working with parents, with family day carers reporting working with parents more frequently on these issues. These differences are most likely accounted for by the attitudes of Somali carers (who were over-represented among family day carers) to partnership practice, rather than indicating a true difference between the practice of family day carers and centre carers. Although a higher quality of communication and relationship has been observed in family day care compared to centre care in earlier studies (for example, van IJzendoorn et al., 1998), Somali carers, who constituted almost half of the family day care sample, reported working with parents to understand their childrearing perspectives to a greater extent than other carers in the current study.

Carers involved in the study also reported a variety of strategies to engage parents in discussions about their children and their parenting. Carers in both centre care and family day care reported that communication with parents typically involved brief discussions at drop-off and pick-up times. More formal arrangements, such as meetings, information evenings and periodic written reports tended to be undertaken to a lesser extent. Centre carers of infants and toddlers also recorded information about the child's feeding, sleeping and toileting on a daily basis in order to keep parents informed. Some centre carers reported using social events as an opportunity to establish closer relationships with the parents of children in their care. This mix of mainly informal communication with an element of formal methods was also found in the Australian-based study by Hughes and MacNaughton (2002) of parent-carer communication in centre care settings.

Responses from both centre carers and family day carers suggested that communication often only flowed from carer to parent. Reports by some carers seemed to reflect an approach to partnerships described by Stonehouse (2001b), which involves a lot of communication with parents, but 'which is in reality essential communication' (p. 3), that is, basic information about the child's daily experience in care. Such exchanges are seen to be important, as parents like to know what their child did during the day, and any problems that arose.

Responses from a smaller proportion of both centre carers and family day carers highlighted the importance of two-way communication and of finding out about parents' preferences. Family day carers from a Somali background, in particular, described actively working with parents to discover 'what they [parents] need' and 'how they want their children to be looked after'.

Both centre carers and family day carers reported difficulty in achieving an ongoing dialogue with parents when communication was centred on informal contacts with parents at the beginning and end of the day. Consistent with findings in a study by Hayden et al. (2003), several carers mentioned that these times of

the day were busy and rushed for both parents and caregivers alike, limiting the quality of such interactions. For centre carers, in particular, language barriers were also noted as an impediment to working with some parents to understand their childrearing perspectives.

Some carers also felt some parents were not interested in engaging in discussions about their children's care. Both family day carers and centre carers mentioned differences between parents' goals for children's development and their own knowledge of child development, based on their early childhood training and education. These differences of understanding of child development sometimes created conflict with parents.

Barriers to working with parents, such as difficulties in engaging parents, time pressures and conflicts between carers' professional understandings of good practice and parents' preferences have been reported in earlier research (Endsley & Minish, 1991; Galinsky et al., 1992; Feagans & Manlove, 1994).

Discovering difference

The 77 per cent of centre carers and 45 per cent of family day carers who reported finding out about differences in childrearing practices reported that they discovered actual differences with approximately one-third of parents.

Overall, family day carers reported fewer differences than centre carers in the qualitative data about the types of differences they found. Although this may be due to the smaller number of family day carers compared to centre carers responding to the survey, it has been suggested elsewhere that the extent of carer-reported parent-carer differences could be more limited in family day care compared with centre care (Kontos, 1994; Coe, Thornburg, & Ispa, 1996). Fewer children, greater continuity of caregiving and a more informal approach to child care in family day care compared to centre care, is thought to encourage more extensive communication and closer relationships between parents and carers, which can be linked to similarities between children's home and care settings (van IJzendoorn et al., 1998). The flexibility that family day care offers in terms of choice of carer is also thought to promote similarity of care between carers and parents (Morelli & Verhoef, 1999). This is especially pertinent to parents from culturally and linguistically diverse backgrounds, who may choose a carer on the basis of his/her cultural or religious background (Kontos, 1994; Coe et al., 1996; Morelli & Verhoef, 1999).

Approaches to discipline and the onset of toilet training were most often reported as areas of differences with parents in both centre care and family day care settings, irrespective of cultural match. These results are corroborated by analyses of the quantitative data collected in the current study, which showed differences in parent and carer parenting practices and childrearing both within and between the cultural groups (see da Silva & Wise, forthcoming).

A number of carers reported differences with parents about the value of messy play, such as sand, mud and water play, and attributed these differences to culture. While carers viewed messy play as a valuable sensory experience for children, some parents reportedly did not like their children's clothes getting soiled, or their children getting wet. Gonzalez-Mena (2001) suggests that some parents do not have adequate time or resources to deal with the messy consequences of such play, and cites a real-world example where African-American parents in a centre were unhappy with their children playing in sand, as it meant considerable time in the evening removing sand from their children's hair.

Some carers attributed differences in how carers and parents valued and encouraged children's independence to differences in culture. They felt that

while carers expected children to try and dress and feed themselves, for example, parents would reportedly request that carers did these things for their children. Such differences in attitudes towards independence among parents from Western and non-Western or traditional societies have been reported in both the child care practice and research literatures. Gonzalez-Mena (2001), for example, states that parents from non-Westernised societies are 'less concerned about children helping themselves than they were about teaching them to help others' (p. 52). However, it should be noted that carers also noted differences in parents' expectations of children's independence without attributing this to culture.

Not surprisingly, differences between parents and carers from the same cultural background were also commonly found, suggesting that factors other than cultural beliefs and values also influence childrearing attitudes and behaviours. The training that carers receive in Australia, and the legislation and quality principles that regulate child care, are largely based on a Western model of child development (Rosenthal, 1999; Hughes & MacNaughton, 1999, 2002). Some carers reported that this model of understanding children and childrearing was not always consistent with their own cultural beliefs, or that of the parents with whom they interrelated. Thus, conflicts sometimes arose when parents' wishes contravened accreditation or centre guidelines.

Accommodating differences in childrearing approaches

Lack of time was reported as a key barrier to accommodating parents' needs in practice, as were difficulties in meeting the requirements of all parents in a group care setting. Carers also noted the need to conform to child care legislation and guidelines as a barrier to complying with some parents' preferences. Structural barriers such as these have emerged in other recent qualitative research relating to partnerships between Australian parents and carers (MacNaughton, 2004).

A number of carers also talked about the 'appropriateness' of parents' practices, while others deliberately only incorporated practices that did not conflict with their own knowledge and experiences as child care professionals. This reflects the findings of other research, where early childhood training and experience appears to create a professional distance between carers and parents (Feagans & Manlove, 1994; Hughes & MacNaughton, 2000).

Conclusion/implications

Reports from carers involved in the Institute's Child Care in Cultural Context study suggest generally positive attitudes about understanding where their childrearing beliefs and practices departed from that of parents. Many carers actively sought this information through a variety of formal and informal modes of communication, and were aware of differences.

Most commonly, carers reported differences related to child discipline, toilet training and encouraging children's independence. These differences were evident regardless of whether the carers and children had the same or different cultural backgrounds. The differences were also reported by carers in both types of settings (centre care and family day care).

However, accommodating parents' preferences in Australian child care services is not always straightforward. For example, carers suggested that actually adopting parents' wishes may not be desirable or practical in all cases. Barriers such as lack of time, difficulties engaging parents and tensions between parents' wishes and child care legislation and accreditation guidelines were all highlighted as impediments

to partnership practice. These barriers to working with parents to accommodate their preferences were reported by both centre carers and family day carers.

Barriers to working in partnership with parents identified by carers suggest a need for further training and support to enhance carers' capacities for communication and engagement. This is of particular importance for carers in culturally diverse settings, where language differences can create an additional barrier to effective communication.

Australian accreditation guidelines, such as the *Quality Improvement and Accreditation System Source Book* (NCAC, 2001) (for long day care centres) and the *Family Day Care Quality Assurance Practice Guide* (NCAC, 2004), and child care legislation provide some direction in how child care services can develop effective partnerships with parents. For example, steps for family day carers in developing partnerships with parents include the carer 'learning about the child from the family's perspective' and respecting a 'family's decisions about care for children without making judgments' (NCAC, 2004, pp. 14–15). In centre care settings, requirements for carers include consulting 'with families when there may be differences between the centre's philosophy and family values' (NCAC, 2001, p. 22) and suggest that carers 'should invite families to participate in the centre's activities and share aspects of their culture' (NCAC, 2001, p. 35). However, given limitations, such as lack of time, identified by carers in the current study and others (see MacNaughton, 2004, for example), more detailed guidelines about how to implement these principles in a practical context may be of greater benefit to carers.

Another source of guidance for carers is the child care practice literature. Publications by Stonehouse (2001a, 2001b) and Stonehouse and Gonzalez-Mena (2004), for example, provide some guidance about ways to enhance communication and build partnerships with parents and overcome the challenges described by carers in the current study. These authors advise carers to be mindful of the need to work collaboratively with parents and children, focusing on 'interactions and relationships' and 'honouring diversity' (Stonehouse & Gonzalez-Mena, 2004, p. 180). The authors give concrete examples of the ways that carers can put into practice these principles and engage parents and children, while also acknowledging the practical difficulties faced by carers when implementing these principles in child care services.

However, as noted in the introductory sections of this paper, much of the practice literature is based on anecdotal evidence. Further research is warranted to provide more evidence-based guidance regarding the most effective ways in which carers can develop partnerships with parents and respond to the needs of parents and children in Australian child care services. Further research should take into account the experiences of parents, children and carers from diverse cultural perspectives and care situations.

Findings from the Child Care in Cultural Context study suggest that despite generally favourable attitudes towards partnership practice, the general principles underpinning this approach (such as two-way communication) are not always adopted by carers in practice. Guidance and supervision surrounding effective engagement (including models of communication that reflect parents' preferences and schedules), as well as strategies for overcoming conflicts (including ways to negotiate with parents when their needs appear at odds with Australian accreditation standards and centre/scheme policies), may enhance the quality of relationships between the carers and parents responsible for the large numbers of young children using Australian child care services today.

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