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ABSTRACT

The paper first points out how important it is for professionals who work with families and infants with developmental problems to be aware of ethnic and cultural differences, and then goes on to discuss some values typically held by Hispanic Americans. Professionals should understand the family's immigration history and status in order to know their needs and their approach to services. Family roles, including the dichotomous role of the mother and the dependence on other family or extended family members, have implications for services. The importance of manners and deference to others should be grasped so that professionals do not misconstrue attitudes of family members. Socioeconomic status and religious beliefs and superstitions affect the acceptance of handicaps within the family. The paper concludes with a caution against allowing oneself to be misled by one's own prejudices and attitudes into misinterpreting behaviors by people from other cultures. (CL)

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MULTICULTURAL CONSIDERATIONS:

Working with families of Developmentally Disabled
and High Risk Children
The Hispanic Perspective

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TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

In the field of early intervention, professionals who work with families and infants with developmental problems must assess a variety of child behaviors, parent-child interactions, home environment etc. Although there are basic similarities found among all families, different ethnic and cultural groups hold values, attitudes and behaviors that are characteristic to themselves and different from those of other groups. It is important for professionals to be aware of these differences so as to better understand and serve families from diverse groups. One word of caution though, cultural or ethnic background is just but one of many influences on how a person views life and the kinds of values that a person holds.

Hispanics represent the largest minority in California. As a group Hispanics are younger and have a higher fertility rate than the general population. By the turn of the century, Hispanics will outnumber any other ethnic group (including whites) in California. Every program in the State will be serving larger numbers of Hispanic children and families.

When we speak of the "Hispanic population", we are talking about a very heterogeneous group of diverse socio-economic status, national origin, religious preference and "acculturation" into mainstream American culture. There is no such thing as a Hispanic culture. It is as great a mistake to believe that all Hispanics share the same values and outlook as it is that everyone views the world from the mainstream "American perspective". Socio-economic status seems to have a greater influence on values and outlook on life than any other aspect. Those of middle class, educated, Hispanics are more similar to "mainstream American" values than to those of poor Hispanics with limited education. Having said that, we shall explore some values and issues that may be pertinent when working with most Hispanic families and point out some specific ways of addressing these.

In trying to understand a Hispanic family's situation, it is important that one take into consideration a variety of factors such as immigration history, length and permanence of stay, education, religious beliefs, socio-economic status etc.

Immigration History

As with many immigrant populations, concerns surrounding immigration may take precedence or determine the family's reaction over other issues, including the arrival of a disabled child. While undocumented immigrants may avoid services for fear of reprisal, even those who are here legally may not be able to understand or trust the system or utilize it fully to their advantage. As professionals we must answer questions like: Is this a family who recently immigrated? or, on the other extreme, Are they native Californians, when California was part of Mexico? How long have they been in the country? Do they intend to stay permanently? What is the country of origin? What is the reason for immigration? Answers to these questions will give us clues into the child's and family's needs. A poor Mexican family who has come across the border in search of a better economic life will differ dramatically in values and needs from a rich Ecuatorian family who has come here in search of treatment for their special child which may not be available in their own country, or from an intellectual Chilean family who fled their country for political reasons. All these families may intend to stay in this country only on a temporary basis, but their approach to search for services for their child will be dramatically different as it will also be different from a family who has been in the U.S. for several generations.

Roles Within the Family

In traditional Hispanic families, the woman's role is characterized by a significant dichotomy. As a daughter and wife, she is subservient to the male, but as a mother she is respected and almost idolized. In Mexico, Mother's Day is such a significant holiday that people spend 90% as much as is spent at Christmas for all presents (for family, friends and business). It is not unusual for a mother to receive large gifts, such as appliances, even in the poorest families.

In the Hispanic family it is not unusual for the mother to be the one who makes most decisions regarding raising of children but the father is the ultimate authority figure. However, he will probably defer to his mother or mother-in-law when she is around. This has implications for professionals who must figure out which person is the best one to work with when making suggestions for changes for intervention.

Children tend to be babied and kept dependent longer than by mainstream American standards. It is not unusual for a child to be fed by the mother into the second or even third year. Children are given the bottle even when they are fully capable of drinking from a cup. However, older siblings may be given responsibility for caring for their younger siblings at a very early age. Children are also taught respect for elders from a very tender age. Many Hispanics will consider your typical American or anglo child a brat due to their poor manners, willfulness and independence.

Hispanic families tend to depend on other family members or extended family members for most of their needs. Babysitters are seldom used. Relatives or friends take over the care of a child when the mother is unable. This must be considered in

situations where respite care is warranted. Unless the Hispanic family has built trust with the caretaker, they will not avail themselves of this kind of service, even when desperately needed.

The Hispanic family tends to be traditional, with several generations living under the same roof or in close proximity of each other. Divorce is not as common as in the general population. However, in some small towns in Mexico that tend to export emigrants to the States, the saying goes: "If you want to break up a family, send them across the border".

Education

In the Spanish language when you say that somebody is "bien educado" (well educated) you are referring to the fact that this person has good manners, not to the amount of formal education. Manners are very important with traditional Hispanic families. Strangers treat each other with deference and respect. As professionals we must remember to look and act professionally. Trying to be casual to make the other person feel at ease may be construed as lacking manners and misunderstood. It is important to be deferential and businesslike at first until trust and rapport are built. However, genuine warmth towards a child is welcome and, in many ways, expected. When using Spanish, one must be careful not to use familiar terms until the other party does it. Many Hispanic parents may seem uninterested or unable to understand whatever is being dealt with. Don't misunderstand deferential manners towards professionals for lack of interest or understanding.

The importance of formal education depends very much on the parents own education. In the U.S. the level of education for Hispanics falls dramatically below that of the general population. Illiteracy is still all too common in many Latin countries. In small towns in Mexico you still find "escritorios publicos" (public desks) where someone will write a letter or draft documents for you if you can't write. It is possible that a family with little formal education may not feel as threatened when faced with a diagnosis of mental retardation where they are told that their child will not be able to read or write. However, mental retardation is often mistaken for mental illness and that can have enormous negative connotations. As professionals we must make sure that we explain the diagnosis and its implications.

Disability/ Health

The reaction to having a child with a disability will always be a personal one and cultural attitudes are just but one of the many influences to this reaction. Cultural acceptance or lack of acceptance of a disability will, nonetheless, make it that much easier or harder whichever the case may be. It seems that acceptance of disability in the Hispanic family is inversely related to socio-economic status or education. The higher the socio-economic status, the more likely that a disabled family member (specially mentally retarded) will be kept hidden from society at large.

Sometimes a crucial influence on the way a family reacts to having a child with a disability is their religious beliefs. A majority of Hispanics are catholics and may believe that this life is just a way to get to heaven, that you must bear your

crosses because they will earn you a place in Paradise. However, not all misfortune is readily accepted and there may be some bartering with the Virgin or some saint. A family may offer to have the child wear a habit -or not cut their hair or some other promise- until the child walks or "is cured" etc. It is important to take these beliefs seriously, even when we don't share them, and try to work through or around them.

There is a wealth of superstitions and old wives tales that are given as explanations for problems with the birth of a child. If the mother knits for the child, she must not wind the yarn into balls or the child will be born with the cord wrapped around its neck. The woman must be careful when using scissors or sharp objects while pregnant lest the child be born with cleft, etc. When there are problems with the birth, or the child is born disabled, the mother may be blamed because she didn't do as she was told.

Not only are superstitious beliefs common, it is not unusual to get "curas" (cures) from a brujo or sha-man. Herbs, amulets, etc. can be given to the family to undo the problems. The birth of a disabled child may be seen as a curse put on by someone or some evil spirit. While amulets are probably harmless in and of themselves, some herbs and other remedies may be counteractive or interactive with whatever medication the child may be taking. It is important to find out if any cures are being used or sought.

It is not uncommon for people in Mexico and Latin America to self-medicate and, if the symptoms are similar, to use other people's prescription drugs. Again, one must find out the complete repertoire of medications being given to the child even if it means asking specific questions such as: Do you give her any suppositories? any infusions? etc.

Conclusion

We must try to understand the values and attitudes behind some behaviors that may be unfamiliar or unacceptable to the mainstream American culture and work through those values and attitudes to change behaviors, if it is warranted. However, we must be vigilant about our own prejudices and attitudes so as not to misinterpret behaviors by people from other cultures. I am reminded of the student intern that was doing a home assessment on a Hispanic family and who observed that the mother "did not have a sense of fire danger" because she warmed up her tortillas directly over the open flame of the stove. Well, that is the generally accepted practice to warm up tortillas, used by millions of "fit" mothers over many generations. Let us acknowledge cultural differences and the influence they may have on values and behaviors and not impose our own values as the only valid ones.