

BANANAS CHOOSING CHILD CARE HANDOUT

Employing A Limited-English Speaking In-Home Caregiver

Exposing your young child to another culture can be an extremely valuable experience. The child's world view and understanding of differences can expand tremendously. Many limited-English speaking caregivers are kind, caring and capable individuals and, by thinking about hiring them, you expand your pool of potential providers. However, parents may feel reluctant to hire a person who doesn't speak fluent English – especially if their child is a baby or a toddler. This Handout addresses the issue because BANANAS staff knows from experience that parents can learn to communicate and build trusting relationships with such caregivers.

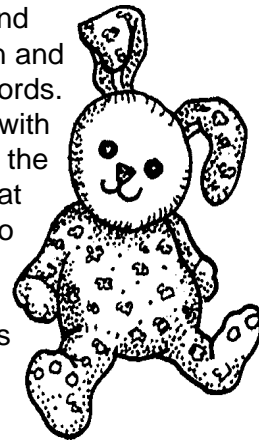
Parents have expressed concerns in the following areas:

- **Interviewing and hiring** – How can I interview or hire someone if I can't be sure I will fully understand the applicant or that the person will fully understand me?
- **Communicating with the provider** – Will the caregiver understand my instructions and will she be able to tell me about the baby's day?
- **The provider's ability to deal with an emergency** – Will the caregiver be able to get assistance in an emergency situation?
- **Child-rearing practices** – How can we find out what each other believes? And, then, will the caregiver really abide by my beliefs and instructions?
- **The child's language development** – Will my child's language development be affected because the provider isn't a native English speaker?

Interviewing And Getting Started

You will want to do your interviewing in person. Use the telephone only to arrange for the meeting and call in the evening when the caregiver may have an English speaker at home. Allow plenty of time for the actual interview. Even if the applicant speaks conversational English, find someone to help translate or ask the applicant to bring along a friend or family member who speaks English. You need to be sure that the caregiver really understands what is being said and what agreements are being made. The applicant may also feel more comfortable having an interpreter present. Don't let the interpreter take over the interview. Try to insure that he or she is not changing or embellishing the

applicant's statements. Keep in mind that many cultures adore children and that actions speak louder than words. Encourage the applicant to play with your child at some point during the interview – keeping in mind that many young children take time to warm up to a new face. An experienced and loving person's personality and child-rearing abilities will show when she interacts with your child.



As with any interview, find out what experience the caregiver has had and request the names of other families the applicant has worked for. Follow through by calling all references. Some people may not have local work experience. Ask for the names of friends who have been in the U.S. for a long time, as a kind of "credibility" check. BANANAS has additional information on interviewing caregivers in our Handout "*Where and How to Look for a Caregiver to Work in Your Home.*"

Before you make a final decision, pay the applicant to work with your child while you are at home or in-and-out on errands. Do this at least once or twice. This will give you both a chance to be more at ease and will help you make your final decision. Hire the caregiver on a part-time basis for a short probationary period before you actually need the care so you have a further opportunity to evaluate the situation. This kind of caution is no different from the care you would use in hiring fluent English speakers. Having confidence in your decision is the basis of building a trusting relationship.

Business and interpersonal practices differ from culture to culture. Do not take anything for granted. Clearly state your requirements, such as two weeks notice if the caregiver is going to quit, early notification if she is sick, open communication in the case of disagreements and dissatisfaction, etc. Address such topics as using the phone for personal calls and how you want the caregiver to take your phone messages, etc. Don't assume that she knows how things are "usually done" in the United States.

Make sure the caregiver understands the terms of employment – the hours, pay, vacation or sick days, etc. Write up the agreement and, if possible, review it with someone present who speaks both languages. Make sure both you and the caregiver have a copy. (BANANAS has a Handout called “*Sample Agreement for Parents and In-Home Caregivers*” that can help you write your own agreement.)

Ongoing Communication

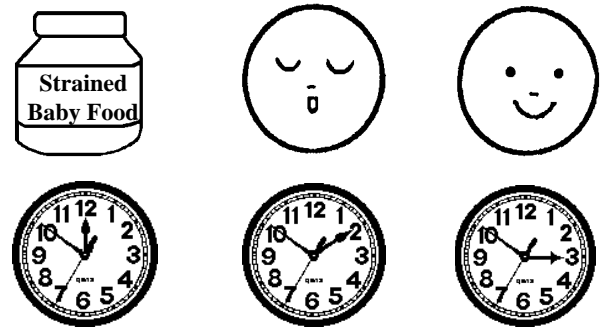
Good communication is crucial and there are many techniques which you can use to insure an open exchange of information. One of the best ways to communicate your child’s routines and your particular preferences for care is to demonstrate these yourself. In order to do this you may want to have the caregiver start working for you when you can be home with her for a few days. Since child-rearing practices do differ from culture to culture, you need to actually *show*, rather than *tell*, the caregiver your preferences. For example, you may want to show her when you think the baby should be picked up, when the baby should be talked to and when the baby should be allowed to cry a little. Walk the caregiver through other tasks such as diapering the baby, disposing of soiled diapers, making the formula, heating the formula, etc.

Plan a daily routine. For example, *Mornings*: bathe the baby, floor play, walk, lunch....*Afternoons*: storytime, naptime, outdoor play, etc. Specify whatever it is you want to happen and when. Be specific about things that are important to you – the baby’s diet, getting out of doors once or twice a day, making sure the baby gets adequate sleep, having diapers changed frequently – whatever matters to you.

If you also want the caregiver to do light housework, laundry, clean the baby’s room, etc., you need to tell her when you want these activities to occur. Go through this plan step-by-step with the caregiver for a day or two until you are confident you have communicated your practices and preferences clearly. You will also want to take the time to familiarize the caregiver with your home and any equipment you want her to use – stove, washing machine, vacuum cleaner, etc. Smoke alarms and fire extinguishers should be part of this review. Make sure you introduce your caregiver to your neighbors – especially any who are home during the day and who could be of assistance in an emergency.

When it comes to housework, one parent suggests: “*Parents need to keep their priorities straight; if the caregiver is great with the baby but occasionally makes a mistake carrying out household duties – gently clarify the procedure.*”

Graphic charts are a good way to convey the baby’s routine using pictures, simple English phrases and pictures of clocks showing the time you want the baby to eat, nap, etc. This same chart concept can be used for the provider to communicate with you. If you laminate your chart or cover it with clear contact paper, it can be used over and over. The provider can draw hands on the clocks with a crayon to show you when the baby last had a nap, a bowel movement, etc. The crayon will wipe off with a cloth.



Baby ate lunch Baby went to sleep Baby woke up

Debriefing at the end of day is important to most parents. Use the type of chart shown above or some kind of pictorial checklist to assist the caregiver in telling you about the child’s day. (BANANAS sells a “*Daily Report Train*” to aid caregivers in communicating with parents. It is available for \$4 in Spanish, Chinese, Vietnamese or English.) If you ask the same questions in the same way every day, you will find it becomes easier and easier for the caregiver to share information. Explain to her that you are asking these questions because you miss your baby and want to know what happened while you were away. Tell her that you are not trying to “snoop” on her and that your questions don’t mean you dislike or distrust her.

It can be helpful and reassuring (but isn’t absolutely necessary) if you can find a friend or acquaintance who is fluent in the caregiver’s language to assist in clarifying communication now and then. Perhaps an English-speaking member of the provider’s family or one of her friends can play that role. This person could meet with the two of you when you first discuss a new topic like potty training or when you discuss an area where miscommunication seems to be occurring.

Be aware that some foreign caregivers may be very shy and sometimes even afraid to hold your baby when you or another adult in your family is present. People’s homes may seem very personal and make the caregiver feel like an intruder. Give your caregiver time to adjust and do whatever you can to make her feel comfortable.

Emergencies

Review the use of 911 with your new caregiver. In Alameda County, 911 workers are available who speak many languages other than English. The caregiver needs to know how to request a worker who speaks her language. She should also know that as long as she doesn't hang up the phone, the address can be traced and an emergency vehicle dispatched. BANANAS has a Handout on how to use the 911 system. This Handout comes with an emergency sticker to put by your phone which lists important phone numbers, such as your work phone, poison control, 911, etc. A second Handout on the same topic is titled, *"Preparing For An Emergency"* and is accompanied by an emergency information card. Both Handouts are available in Chinese, Spanish and Vietnamese with English translations. Stop by our office or send us a self-addressed envelope, stamped with one first class postage stamp, for *either* Handout. Please specify the language you want.

Ask the caregiver to practice calling you at work. Give her a written script which contains any extension numbers necessary to reach you. Have her call you at a set time the first few days so you are sure she can get through to you at work. Make sure she also knows the phone numbers of any other adults you want called in an emergency as well as the child's clinic or physician.

Child-Rearing Practices

"Different cultures have different attitudes toward children. It is important to know something about the cultural norms of your caregiver. For example, I knew that Chinese parents are very indulgent of their infants – they believe in holding babies (not using passive restraints such as playpens). They don't usually believe in corporal punishment, etc. I liked these aspects and found that my own caregiver shared these beliefs."

Child-rearing practices are a sensitive and important concern for many parents hiring a limited-English speaker. In the big three crucial areas of "eating, sleeping and excreting," parents and caregivers must be able to agree on mutually acceptable practices. Because of cultural differences, this may take some negotiation. Different cultures have different expectations of how children should be treated at various ages in their lives. For example, you and your caregiver might agree that a crying baby should be picked up but you might not agree on the age at which this practice could or should change. Or, you may have differences of opinion about topics like weaning, whether to allow a child to continue to drink from a bottle or use a pacifier or "blankie." Perhaps you have different thoughts and ideas about what children should eat and how they

should be taught to feed themselves, when and how they should be potty trained, what they should wear and how they should learn to dress themselves, what is an unacceptable mess and what is a learning experience.... Your list could be quite long.

Talk these issues over with the provider. Find out what her child-rearing beliefs are. Listen with an open mind. You may find, for example, that you actually like her style of potty training better than your own. On the other hand, you are the parent. You have the final say on how your child is reared and you have the right to communicate this to the caregiver. If you like and basically trust your provider, you will probably find that there are some child-rearing practices that you are willing to negotiate and others where you want your way to be the way. Here is how one parent felt about this topic:

"Once a parent is comfortable with the basics – she knows her child will be safe/happy, etc. – the parent has to be more flexible with little things. For example, my caretaker constantly reminded me to dress my baby in a hat – even when I didn't think it necessary. But, it seemed a worthwhile tradeoff to indulge my caretaker when my child was happy and well tended."

Not all providers are able to put their own beliefs into practice with children from another culture. While such caregivers may be very firm or traditional with their own children, they may be reluctant or afraid to treat your child the same way. The result can be that your child dominates the provider and expects to always get his way. Obviously, you will want to prevent such an unhealthy relationship from developing. Once you and the provider have discussed and reached an understanding on what behavior is acceptable and what consequences are appropriate for misbehavior, she must feel that she has specific permission to put that understanding into practice. If you give the caregiver your full support when she enforces the rules, it should be easier for her to feel comfortable doing so.

Health Issues

Based on deep-seated beliefs, health practices also vary from one culture to the next. Parents should never assume that everyone knows or agrees on the "right" way to respond to a particular illness or condition. Instead parents need to take the initiative in exchanging information so different beliefs can be recognized and discussed. Let's look at a common situation – a child with a fever. Caregivers and parents from different cultures might well have opposite responses. A parent may want the sick child to be dressed lightly, sponged down gently with cool water and given liquids to lessen the temperature. A caregiver may have been taught that children with fevers should be bundled up, kept in

a heated room and not given a bath or cool drinks. If the caregiver acted on her ideas, she would feel that she was giving the feverish child appropriate care. If the parent didn't know about the caregiver's attitude toward fevers ahead of time, she could be very upset to come home and find the caregiver using these procedures.

A situation like this can easily lead to miscommunication and loss of trust. The solution is to discuss fevers before the child ever gets one. The parent will then be aware of the difference in practices and can make it clear how she wants *her child's* fever handled. The parent may never change the provider's view of how to treat a fever. That isn't necessary. Obviously, it's all right for the caregiver to use her own remedies on her own children. With the parent's child, however, the provider needs to understand and follow the procedures that the parent wants her to use.

Ongoing communication around the topic of health is very important. A general theoretical discussion about sickness and the care of ill children should take place during the initial interview with the caregiver. Health issues should be discussed and practices (handwashing after diapering, the correct way to take a child's temperature, etc.) should be demonstrated in the beginning of the parent-caregiver relationship. They should be reviewed again when illnesses actually occur. To communicate about illnesses (everyday little ones and more serious ones) the parent and the caregiver must reach a point where they are able to exchange accurate information, advice, techniques and attitudes.

Language Development

Children have amazing abilities in the area of language. Even very young children can quickly become fluent in two or more languages. As long as there is a rich language environment and a good English model in the home, the child's English will progress in a normal manner. This will happen simultaneously with the child becoming familiar with, and even fluent in the caregiver's language. Many families encourage the use of the sitter's native language with the child to assist their child in becoming bilingual. You can also arrange for the caregiver to use English tapes of stories and songs if you want English reinforced during the day while you are away. There has been a good deal of research and certainly extensive practical experience with children learning two languages at the same time. Parents and caregivers should know that young children who are simultaneously learning two languages sometimes display one or more of the following phenomena:

- temporary delays in talking because the child is doing a lot of learning through reception (taking it all in);
- temporarily mixing up of the two languages resulting in some amusing conglomerates;
- an imbalance in the development of either language.

Not all children display these characteristics and they are soon outgrown. The advantages of learning two languages far outweigh any temporary concerns.

Other Considerations

Problems can arise if the caregiver has just arrived in the U.S. She may be lonesome or homesick. Parents could seek out peers (working for other parents) or a church or community group to provide some support for a homesick caregiver during rough times. Your caregiver could be young, still growing and developing herself; and she could be inexperienced, however willing. In any case, you will probably need to spend time talking to and training her to insure peace of mind about your child's care. A different problem might arise with an older caregiver with a great deal of child care experience who might be less willing to compromise or take advice or orders from an employer who is younger than she is. If you value her experience and trust her, use tact and persistence to convince her to work with you as a team.

One parent who has used a limited-English provider successfully urges parents to consider having the care provided in the caregiver's home. (This is perfectly legal without a license as long as the provider only cares for the children of one family.) This parent felt her provider was more at ease and received more support from relatives in her own surroundings. She also felt it was very rewarding for her child to be treated like a member of the provider's family and fully exposed to traditional food, customs and language.

BANANAS' staff members are fluent in Amharic, Chinese, Laotian, Spanish, Tagalog, Thai and Vietnamese and are happy to help should you decide to hire a limited-English caregiver. Additional Handouts you might find helpful are "*Your Rights and Responsibilities as an In-Home Caregiver Employee*" and the counterpart, "*Your Rights and Responsibilities as an Employer of an In-Home Caregiver.*" Employing someone who speaks a different language does involve extra effort. But the rewards can be numerous as parents, caregivers and children learn from one another and from each other's cultures.

(Thanks to Verna Haas and Linda McCoy for sharing their insights and suggestions.)

