Better Serving Immigrant Children and Families: A Winnipeg Child and Family Services Study

by

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Acknowledgments

In social work, you learn the meaning of support. However, it was not until this practicum that I truly understood and felt how powerful an impact support can have on an individual. There are people who supported me, academically and emotionally, who I would like to acknowledge because they made my academic pursuits achievable.

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Abstract

"Better Serving Immigrant Children and Families: A Winnipeg Child and Family Services Study" was initiated by the Winnipeg Child and Family Services Community-Based Early Intervention Program to enable them to better serve immigrant children and families. This study examined the parenting concerns of immigrant parents from 5 cultural groups (Central American, Filipino, Portuguese, Sudanese and Vietnamese) living in Winnipeg's West Central Area and ways CFS could help address these concerns. Using a qualitative and community-based approach, 25 interviews and 5 focus groups were conducted with first generation immigrant parents, 5 interviews and 1 focus group in each of the communities. The major themes that emerged were about: a. the knowledge immigrant parents have about CFS, b. immigrant parenting concerns, and c. ways CFS can better serve immigrant groups. This research practicum describes the tasks I undertook as a co-investigator of the study, to learn more about applied research with immigrant families.

This study enabled me to achieve my learning goal of gaining research skills with immigrant groups. The lessons learned ranged from practice to research to social work education. Some of these were the importance of building trust and rapport and being culturally and linguistically sensitive, the benefits of involving the community and how time consuming and expensive qualitative research can be. This practicum experience was worthwhile. It helped me and can assist others in future activities with immigrant groups.
 CHAPTER ONE: INTRODUCTION

Canada is often referred to as the “land of immigrants” due to the many immigrants living in the country. The city of Winnipeg reflects this statement. In Winnipeg, immigrants make up 17.4% of the total population (Statistics Canada, 1998). As the immigrant population increases, so do the numbers of children. More than thirty-eight percent of the immigrant population are children (Statistics Canada, 1998).

Immigrants play an important role in Canadian society. They stimulate growth, prosperity and cultural diversity. Children also play an important role since the future largely depends on them. It is imperative, therefore, that their well being is maintained.

As more and more immigrants come to Canada, social service organizations are recognizing the Canadian reality of cultural diversity. Programs reaching out to immigrants are new and growing. Many social service organizations designed to serve the whole of Canadian society have been found to cater to the mainstream population resulting in inappropriate social services for immigrant groups. Mainstream refers to the general population (Nyman, 1992). Immigrants face issues such as language and cultural differences, integration stress and limited social support and resources. These issues create a gap between mainstream social service organizations and immigrant groups since for the most part, mainstream organizations do not address the concerns immigrants face.

Serving immigrant groups is not a new area for Winnipeg Child and Family Services (CFS). They have undertaken several activities in the past involving families from immigrant groups. Consultations with the immigrant community, however, indicated that the services provided by CFS to them are underdeveloped. The CFS Community-Based Early Intervention Program therefore initiated “Better Serving
Immigrant Children and Families: A Winnipeg Child and Family Services Study” (BSICF) to learn how they can better serve immigrants. This introduction addresses the significance of this study and why it is important by discussing the following points.

a. The history of CFS and immigrant groups shows that culturally appropriate services have been a concern for social workers and families for many years.

b. Principle 8 of the Child Welfare Act states that families are entitled to services which respect their culture and linguistic heritage.

c. Immigrant numbers are increasing in Canada. This leads to changes in the demographics using the social services.

d. Immigrants make important contributions to the Canadian economy. Canada’s birthrate is declining making immigrants the best hope for growth.

1.1. CFS Community-Based Early Intervention

Child and Family Services is a community agency that oversees the welfare of children. The Community-Based Early Intervention and Prevention Program, one of the 6 services CFS offers, is the initiator of this study. Their role in the agency is to prevent the maltreatment of children, consistent with the vision of the agency. The program functions to treat societal rather than individual aspects of the environment as well as provide early intervention for families at risk by addressing child welfare issues as they apply to specific communities. Their mission statement is to “work in partnership with communities to ensure a climate that supports and promotes healthy individuals, families,
programs are intended to promote change at the neighborhood level in order to ensure a community climate that nurtures and supports the reduction of incidents of child maltreatment and the promotion of healthy families and communities.

On April 24, 2001, the Community-Based Early Intervention and Prevention Program held a meeting with representatives from diverse cultural groups. Sinh Nguyen, a CFS Community-Based Early Intervention social worker whose responsibilities include working with immigrant groups, convened this meeting. The purpose was to discuss concerns Winnipeg immigrant communities have with Child and Family Services. The most common concern expressed was that CFS did not have services designed to effectively serve Winnipeg’s immigrant groups. The most common complaint was that CFS had a very weak relationship with immigrant groups, especially with those who had recently arrived in Canada. In addition, community representatives accused CFS of lacking knowledge and awareness about the child and family concerns of immigrant groups.

The principles of the Child Welfare Act emphasize a family-focused and community-based approach promoting the best interests of children (Manitoba Community Services, 1984). Principle 8 states that families are entitled to services which respect their culture and linguistic heritage (Tavares & Delisle, 1993). As a result of the Principles and the community meeting, the Winnipeg Child and Family Services Community Based Early Intervention initiated “Better Serving Immigrant Children and Families: A Winnipeg Child and Family Services Study (BSICF)” to better learn the
concerns immigrant parents have. Sinh Nguyen and I were assigned to undertake the research activities.

1.2. Background of CFS and Immigrant Communities

In 1990, CFS social workers serving families residing in the NorthEast area of Winnipeg were experiencing difficulty with Latin American families because of the differences in language and culture (Tavares & Delisle, 1993). As a result, workshops and forums were held with the Latin American community to further explore child and family issues. As suggested by community representatives, the project was extended to the Laotian and Vietnamese community. This project was referred to as the Multicultural Parenting Education Project. An advisory committee was developed to support and guide the development of project activities. This committee, plus a person hired to coordinate the workshops and programs, worked with CFS to better understand the respective communities. Consultations and surveys were also conducted with social service providers, community representatives and parents to learn more about the respective group’s child and family concerns. Some of the concerns expressed in these consultations were about the impact cultural conflicts had on the generation gap between parents and children. As well as culture and language differences, another major concern found in the consultations and surveys was the negative feelings associated with CFS. Many of the families did not trust or like CFS due to the negative experiences some had faced with the service.

Based on these Multicultural Parenting Education Project findings, the following were recommended:
a. Parenting concerns of immigrant groups be further explored.

b. Training and professional development be provided to all CFS staff on racism and immigration.

c. The CFS Board of Directors set up a mechanism allowing clients to evaluate CFS service efficiency.

None of these recommendations have been formally implemented. The April 24, 2001 meeting with representatives from diverse immigrant groups underscores that child and family concerns with CFS still exist in the immigrant community. Since, the workshops and forums held with the three immigrant groups (Latin American, Laotian and Vietnamese) were conducted ten years ago, the staff of the CFS Community-Based Early Intervention Program decided that it was better to explore CFS service delivery to immigrant groups again. This would ensure that the concerns identified and being addressed are current. In addition, the recommendation made in the Multicultural Parenting Education Project, suggesting that parenting concerns of immigrant groups be further explored, strengthened the force behind this study.

1.3. Immigration

The increasing numbers of immigrants coming to Winnipeg necessitates the importance of services appropriate for them. The 1996 Statistics Canada census states that over 17% of Winnipeg’s population are immigrants (Statistics Canada, 1997). In the year 2000, Winnipeg was actually the seventh most popular immigrant destination within Canada (Citizenship and Immigration Canada, 1998). In this study, immigrants are
referred to as individuals born outside Canada who may or may not hold Canadian citizenship.

At the 2001 Regional Metropolis Conference in Winnipeg, Mayor Glen Murray spoke about wanting to increase immigration to help strengthen Winnipeg’s economic prosperity. Canada is faced with a declining birth rate and aging baby boomers. Immigration is therefore one of Canada’s best hopes for growth. Statistics Canada’s 2001 Census shows that for the first time since World War II, immigration is the main source of population growth as the country’s birth rate has decreased by one third since 1996 (Samyn, 2002) thus re-inforcing Canada’s need for immigrants.

1.4. **CFS and Practicum Objectives**

CFS’ main goal in conducting this research was to learn more about current immigrant child and family concerns in the Winnipeg inner city and how these could be addressed. The research questions that guided this study are as follows:

- What are the concerns some immigrant groups have in terms of child and family service delivery to them and their families?
- How can CFS address the concerns expressed by immigrant communities?
- How can CFS establish a partnership with immigrant communities?

As a social work graduate student, I was willing to assist with the research activities, thus making the implementation of BSICF feasible. Using this study as my research practicum was an opportunity to refine the skills I developed from my current research work with the New Canadian Children and Youth Study (NCCYS), and to develop new research skills. The New Canadian Children and Youth Study is a large
national study examining the health and well being of immigrant and refugee children. Being a research assistant for this research project introduced me to the need for networking, interviewer training and supervising, data sampling and cultural sensitivity in conducting interviews with immigrant and refugee families. My knowledge and understanding of the positive impact community involvement can have matured. In addition, I gained experience in completing progress reports, and writing ethics and funding proposals. Working within the university policies and guidelines, I learned much about the ethics policies concerning research with human subjects. My experience as a research assistant for NCCYS was therefore extremely valuable in preparing me for this practicum. NCCYS, however, uses a quantitative methodology. To expand my knowledge about the different research methodologies which could be used with immigrant groups, I decided that a research practicum using a qualitative approach would further develop my skills, especially in qualitative data collection and analysis.

I also had no experience in applying research findings. I had heard that there are many studies with good intentions but the findings and recommendations are often not implemented. For instance, Kurdish representatives I consulted with for NCCYS noted that they had been involved in a number of studies and had seen no benefits from their participation. They felt that the people conducting the studies were only interested in fulfilling their research role and not genuinely interested in their well being. Hence, I wanted to gain first-hand experience in applying research findings to program development. These representatives made me realize the importance of implementing and applying research findings and not just conducting studies.
In short, since I intend to undertake research projects concerning immigrants in the future, this CFS study fit well with my learning goals. Research with immigrant groups would increase my knowledge about their concerns, cultural values and how to build a rapport with them. The research methodology undertaken was qualitative which would help me build new research skills. This research also provided an opportunity for me to refine the networking, interviewer training and supervising skills I had gained from NCCYS.

There was a fine line of difference between this project being a thesis or practicum. However, this study was initiated and funded by CFS. In other words, this project belonged to them. I was assigned as a co-investigator. Due to the scope of the study, focusing on one particular area such as translations, focus groups or interviewer selection, training and supervision, was not feasible. It was better for CFS that I assist their staff also assigned to the study with a majority of the activities. The work involved in the study would have been too much for one person. Hence, this project became a research practicum giving me the opportunity to learn more about applied research. My practicum experience and learning is dispersed throughout this report.
CHAPTER TWO: LITERATURE REVIEW

Given the research questions and my research practicum learning goals, I focused on the following literature as a framework to guide my work: a. factors affecting immigrant integration, b. immigrant parent concerns, c. the benefits of community involvement in research and program development, and d. qualitative research. Immigrant parents are more likely to experience certain concerns than non-immigrant parents because of issues of integration and cultural conflict across the generation gap. The literature on these issues was reviewed along with literature on qualitative research, community-based programming and the history of CFS with immigrants.

2.1. Factors Affecting Successful Integration

When an individual moves to another country, he or she must integrate into a new society (Isajiw, 1999). This practicum views integration in part as the process involved in learning values and norms of a society. An immigrant also has to rebuild a new life in another community to satisfy immediate needs such as making a living, learning the official language, participating in social life and going to church (Breton, 1964). Societies are characterized by their own values. Conforming to these values enables one to function completely in society (Thomas, 1990). Integration allows immigrants to fully participate in a new unit. For example, each society has an official language(s). Interaction with the majority of society is therefore limited for those who cannot speak the official language since they cannot communicate with the majority. They cannot use
the banking system, buy a car or interview for a job without an interpreter who can speak their language.

There is sufficient research demonstrating that integration is a stressful experience (Beiser et al, 1997; Harker, 2001; Samuel & Verma, 1992). Beiser et al (1997) found immigrants to be at high risk of stress due to barriers immigrants face when integrating in a new society. Barriers are defined as obstacles that impede the integration process of learning their new society’s values and norms and satisfying immediate needs (Nyman, 1992). Bienvenue and Goldstein (1985) refer to barriers as threats to social integration. It keeps immigrants from fully participating in their new society. When discussing services for immigrants, attention frequently turns to the integration barriers they face because of the stressful impact they have on immigrants (Nyman, 1992; Stevens, 1993). The following will review the factors affecting integration.

Some studies declare that English proficiency is the number one factor determining integration success (Beiser et al, 1997; Health Canada, 1999; Kincheloe & Steinberg, 1997; McDermott & Palchanes, 1994; Sporakowski, 1993; Stevens, 1993). Samuel & Verma (1992) found immigrant children’s knowledge about their new country’s language and culture affects their integration process. The more knowledgeable immigrants were of their new society’s official language(s), the faster and more successful their integration was. It seems more organizations today recognize this language barrier that some new Canadians face and are attempting to overcome it by providing alternative methods of translation.

Studies also show that poverty is another concern of immigrant children and families in Canada (Beiser et al, 1997; Beiser et al, 1998; Health Canada, 1999;
The Poverty Profile (1998) stated that immigrants have significantly higher poverty rates than non-immigrants. Furthermore the 1996 Census tract indicated that immigrant families tend to live in neighborhoods with high poverty (Health Canada, 1999). In fact, certain immigrant groups in Canada have striking poverty rates. In 1991, 41% of Latin/South/Central Americans, 41% of those with West Asian origins, and 39% of Arabs lived in poverty, compared to the national poverty rate of 16% (Kazemipur & Halli, 1998).

Although immigrants are poorer, literature shows that immigrants work more than non-immigrants. However, a majority of these employed immigrants work in jobs with irregular hours, lower pay and fewer benefits. It is the Canadian born, who are more likely to work in white-collar jobs with higher pay, more benefits and regular hours (Yalnizyan, 1998). Working in occupations with irregular hours contributes to integration stress. Weekend and shift work have been found to be associated with higher job stress, lower job satisfaction and less leisure time with the family (Jamal & Badawi, 1995).

Finding jobs they are satisfied with is difficult for most recent immigrants. A British Columbia study found an increasing number of recent immigrants facing labour markets unable or unwilling to verify foreign credentials (Health Canada, 1999). Their education not being recognized, plus poverty and unstable jobs are factors which hinder immigrant parents from successfully integrating into Canada.

Limited occupational opportunities for immigrants have also been found to be the result of discrimination (Teevan, 1992). Satzewich & Li (1987) found European and U.S. immigrants to have higher incomes and occupational status than other immigrant groups who arrived in Canada, even when age, gender, English proficiency, and level of
education were statistically controlled (Breton, 1985). Canada and other Western nations have taken various initiatives towards eliminating discrimination but the reality is, inequality still exists (Health Canada, 1999; Yalnizyan, 1998). A survey carried out in Western Canada found most immigrants reporting that they have been the targets of discrimination (Isajiw, 1999).

Nyman (1992) prepared a report on increasing mental health services for immigrants and refugees. To better serve immigrants and refugees, recommendations focused on reducing integration barriers. For instance, the immigrants’ limited knowledge about the availability of mental health services is a barrier in their service use. Some of the potential remedies were publicizing services in places that will most likely reach participants such as community newsletters, radio, immigrant-serving agencies and doctor’s offices, and translating brochures and other public relation materials into different languages. Although the report is in the area of mental health, the target group includes immigrants. In fact, the document is intended for other social service planners, managers and researchers interested in serving immigrant and refugee groups. The CFS Community-Based Early Intervention Program can learn from the report by gaining an idea of issues another organization experience with respect to serving immigrants and how they attempted to address them.

2.2. Limited Resources for Immigrant Groups

Resources available for immigrant families are also limited (Stevens, 1993). Immigrants do not use existing services as much as the other groups in need (Kirst-Ashman & Hull, 1997). In fact, many studies have found immigrant families to be under
users of government transfers and social programs (Baker & Benjamin, 1995; Kincheloe & Steinberg, 1997). Stevens (1993) concurs that according to government figures, immigrants subsidized the non-immigrant population with their tax dollars. It can easily be assumed that underuse of services by newcomers is due to immigrants not needing such services. However, research shows that underuse of services by newcomer groups is more probably due to inappropriate services being offered, conflicting cultural values with mainstream helping services, and inaccessibility due to language barriers (Kirst-Ashman & Hull, 1997; Nguyen, 2001). It should be acknowledged that although most social services are designed for the mainstream population, they do not always meet their needs either. This is, however, intensified for immigrants whose cultural backgrounds differ widely from the dominant society’s since cultural conflicts also become an issue in service delivery (Nyman, 1992).

Even when resources are available, seeking help from outsiders can be an issue for some immigrants further hindering social service use. Self-sufficiency, a philosophy that values solving one’s own problems, was found to be prominent with Asian cultural groups. In the Kirst-Ashman & Hull study (1997), they found Asians valued self-sufficiency, and this, in turn, influenced their social service use regardless of whether the service was offered in their own language.

Despite the values of self-sufficiency and underuse of service by immigrants, issues such as integration stress make immigrants more likely to require specialized social services. Moreover, the Multiculturalism Act of 1988 states that federal government institutions must ensure that government policies and programs are responsive to the needs of all Canadians and that service delivery be accessible to
everyone (Stevens, 1993). Hence all Canadians new or old should be receiving appropriate and accessible services.

In addition to limited resources, immigrants often face a decrease in social support when arriving in Canada. Kirst-Ashman & Hull (1997) found immigrants to have fewer connections and a smaller social support network than non-immigrants (Kirst-Ashman & Hull, 1997). Yet, social support has a positive impact on people’s well being (Health Canada, 1999). For instance, many studies demonstrate social support helps to decrease stress (Fuchs, Lugtig & Guberman, 2000).

Social support with respect to immigrant groups has also been studied due to the impact a decrease in social networks has on immigrants. In fact, smaller social support networks have been found to be a barrier against successful integration (Beiser, 1993). Separation from family and friends can have a negative impact to immigrant well being. Studies of South East Asian immigrants demonstrate that the rate of depression is much higher among those who came to Canada alone than among those who came with their families (Beiser, 1993). The negative impact a decrease in social support has on immigrants makes them more likely to need supportive resources, intensifying their need for services.

2.3. Cultural and Generational Conflicts

Generational conflict exists in every society. Norms change throughout the years creating a difference in values between generations. For example, some parents may still believe in the traditional idea of a woman’s role; staying at home, caring for children and relying on a husband for financial support. In today’s modern times, however, women
working outside the home is acceptable and normal. Hence, a conflict or misunderstanding may potentially develop when the daughter wants to join the labour market. The child feels it is acceptable when her parent does not.

This conflict and misunderstanding could also emerge because of cultural differences. Most immigrant adults who come to Canada already have a well developed social and cultural identity (Tonks & Paranjpe, 1994). Their children, however, develop their identities in Canada. Immigrant children, however, have been shown to integrate more quickly than their parents (Isajiw, 1999; Prostl, 1995; Stevens, 1993). Using the example above, immigrant children in Canada grow up in a society where women working outside the home are acceptable and normal. Some immigrant parents, however, grew in a society where it is not proper or normal. It is, therefore, difficult for immigrant parents to accept their daughters working outside the home.

First generation immigrants are those living in Canada who were born in other countries and came to Canada with an established cultural and social identity (Tonks & Paranjpe, 1999). This group is therefore more likely to have different concerns than non-first generation immigrants or Canadian born. Although first generation immigrants integrate into their new country, features of their foreign country’s community, life-style and identity remain (Abu-Laban, 1999; Isajiw, 1999). Studies show that first generation immigrants retain the highest degree of their cultural values. The higher the immigrant generation is in Canada, the less likely that they will know and use their foreign language and the less likely they are to retain their cultural identity and values (Abu-Laban, 1980; Isajiw, 1999).
Children of first generation immigrants often struggle between valuing their family’s culture and language and “fitting in” with their school friends and Canadian culture. Similarly, parents struggle and become frustrated when their children behave differently in Canada than in their home country increasing the potential for conflict (Manitoba Culture, Heritage and Citizenship, 1998). Clothing is an example. Some children who have no problems wearing a chador in India will refuse to wear it in Canada.

Some immigrant children learn how to speak English fluently before their parents. This sometimes leads to parents relying on their children for translations and explanations about written materials, for example, asking children to read permission slips they bring home from school. At times, this dependency leads to children feeling superior to their parents and creates parent and child conflict since some immigrant parents come from countries where children depend on parents not the reverse (Isajiw, 1999). Parents are not used to and often resent feeling dependent on their children.

Thus, it can be concluded that conflicting values due to a difference in cultural identity and generation are an added stress for immigrant families. Most social services are developed to assist and support people. For instance, helping immigrant parents and children resolve cultural conflicts or assisting immigrant parents find a stable job with higher pay and more benefits. Hence, it is essential that organizations provide services which will be of benefit to the users.
2.4. **Under Developed Research with Immigrant Groups**

Research on immigrant children and families remains under developed in Canada and existing studies are based on small unrepresentative samples. A current study, the National Longitudinal Study of Children and Youth study (NLSCY) provides an example of the under-representation of immigrant children. This longitudinal study was initiated by Statistics Canada to gain a more complete understanding of Canadian children and their families. This research will no doubt provide valuable information to service providers, educators, social workers, and others. However, the percentage of immigrant and refugee children and families in the sample was only two percent, hardly sufficient for increasing understanding of immigrant and refugee children and their families. Therefore, information for program and policy development will continue to be based on data from the mainstream Canadian child and family unless funding is provided to conduct further research on minority communities. It is more difficult to receive funding to develop effective programs for newcomers without appropriate and reliable data. The BSICF study was designed specifically to contribute to the limited information available about immigrant children and families with the goal to improve child and family services for immigrants.

2.5. **The Benefits of Involving the Community**

Through community-based programming, social service organizations learn and understand the target community’s concerns and needs as they view it. Community-based programs revolve around the needs and solutions as identified by service users
themselves. (Stevens, 1993). With a better understanding of the community, mainstream social service organizations can develop or improve services for them (Stevens, 1993).

Community-based programming involves activities where the service users participate in all the stages of implementation. Questions are asked such as “what is needed and how can these needs be addressed”. This approach has been said to be challenging because of the charity model behind the development of many social services (Stevens, 1993). The residual or charity approach is one in which the needy and less fortunate such as orphans and people in poverty are helped through different services. The expectation is that the users should be thankful to the workers. Using a community-based approach, program planners function more as community development workers where they are working “with” the service users, not “for” them. Community input and ownership is a priority; this can be challenging because control over program development is shared with the target community.

Planned Parenthood of Manitoba, now the Sexuality Education and Resource Center (SERC), is an example of an organization where community-based programming was used to re-evaluate programs to ensure cultural appropriateness. The health services offered by Planned Parenthood of Manitoba were found to cater to mainstream Canadian families creating a gap between newcomer and mainstream communities (Stevens, 1993). Planned Parenthood of Manitoba used a community-based programming model to bridge this gap. Consultation groups and surveys were conducted with ethnic communities to identify concerns and ideas about how to address these. Planned Parenthood of Manitoba felt community-based programming really helped them learn how to better serve newcomer and multicultural groups (Stevens, 1993). They recommend other mainstream
agencies to also re-evaluate their services in terms of cultural appropriateness, so that all Canadians have equal access to services and equal standards of service.

Several factors contribute to the effectiveness of community-based programming, with community action being one (Kirst-Ashman & Hull, 1997; Stringer, 1996). Input from the target group about their needs and how they can be addressed can be most adequately ascertained with needs assessment research. In Stringer’s (1996) handbook for practitioners on community-based action research, he wrote about involving the community during the course of collecting information. Individuals from the target groups identified their needs and potential solutions and they assisted in how additional information from other representatives could be gained. Therefore, representatives from the target communities were involved in decision making processes from beginning to end, including data collection, sampling and the implementation plan.

Stevens’ (1993) experience of using advisory committees demonstrates how Stringer’s (1996) conception of including representatives from the target group in decision making processes works. When studying cultural groups, it has been argued that only researchers from the target community can adequately interpret their experiences (Stanfield, 1998). To fully understand the experiences, one must have lived according to the respective cultural values and beliefs. Hence, to ensure that the program being developed remains responsive to the needs of the community, Stevens (1993) suggested forming community advisory groups made up of representatives from the target community supporting and guiding program development. To ensure that advisory groups have a stake early on, the Planned Parenthood Project created them right after the activities to be undertaken were decided upon. This also helped researchers recruit proper
advisory group members since roles and expectations were clearer (Stevens, 1993). For instance, if the Chinese community were to be included in the sample, then Chinese representatives would have to be recruited.

In addition to increasing the knowledge and awareness of the target community’s views, literature shows that community-based programming empowers the target community and increases trust. Communities are empowered when they have the opportunity to voice their opinion and make recommendations regarding decision making processes and program development (Stringer, 1996). Rubin & Rubin (1986) referred to an empowered group as the opposite of a central authority system where a limited number of people make decisions that affect the lives of many people. Empowerment is achieved when authorities, in this case, program developers are one and same with partisans (program users). Empowerment involves people learning that they are not helpless or dependent and can make a difference (Rubin & Rubin, 1985).

Partnering with the target community and involving them in decision making processes, such as in program development, increases the trust they have in the researcher and in the respective service agencies (Schuler, 1996). With respect to immigrant groups, Kirst-Ashman & Hull (1997) found Asian Americans to more likely accept community-based services than other services despite their value of self sufficiency.

This section of the literature reviewed demonstrates the benefits of community-based programming with immigrant groups. Culturally appropriate programs are developed with support from the community. Supporting and assisting with program development empowers the target community. This, in turn, addresses some of the issues
reviewed such as the need for self-sufficiency and trust to work in partnership and develop programs that are culturally appropriate.

2.6. Qualitative Research

Qualitative research is suggested when little is known about a phenomenon (Morse & Field, 1995). Since there is a limited amount of literature available about Canadian immigrants, using qualitative research with respect to BSICF was examined. Literature was reviewed regarding semi-structured interviews, using focus groups in data collection, data analysis and maintaining the quality of data.

In quantitative research, measurements rely on the use of tools that provide a standardized framework in order to limit data collection to predetermined response and analysis categories (Patton, 1980). In qualitative research, however, measures describe people’s experiences in depth.

Qualitative data consist of detailed description of situations, events, people, interactions, and observed behaviours; direct quotations from people about their experiences, attitudes, beliefs, and thoughts; and excerpts or entire passages from documents, correspondence, records and case histories. The detailed descriptions, direct quotations and case documentation of qualitative measurement are raw data from the empirical world. The data are collected as open-ended narrative without attempting to fit people’s experiences or program activities into predetermined standardized categories.

(Patton, 1980; 22)

Qualitative studies provide a more thorough and detailed description than quantitative studies. It allows the evaluator to study selected issues in depth since data collection is not constrained by predetermined categories. In qualitative research, categories emerge as a result of the investigation allowing respondents to answer more freely (Marlow, 1993). In community-based programming, the group the organization
intends to serve identifies their concerns and needs and how to address them. Qualitative research is therefore an appropriate data collection tool in community-based programming since how respondents feel or think about certain things are thoroughly examined. The literature reviewed in the section, “Under Developed Research with Immigrants Groups”, also demonstrates how immigrant groups can be misrepresented in research studies such as in the National Longitudinal Study of Children and Youth project. The sample only includes 2% of immigrants. To better understand newcomer experiences, a strong emphasis should be put on their views and thoughts such as in studies like the New Canadian Children and Youth Study where the total sample is composed of immigrants. (Boas, 1943). According to Pelto and Pelto (1978), cultural behaviour should always be studied and categorized from the target’s view and not the researchers.

2.7. Qualitative Data Collection

Interviews can help find out people’s thoughts and feelings. In fact, in-depth interviewing has been said to be a data collection method relied on quite extensively by qualitative researchers (Marshall & Rossman, 1995). Using open-ended questions, it is a useful way to gather information quickly. It can be done individually or in groups. A focus group is an interview method where a group of people is interviewed at once.

Interviewing seems to be an effective data collection method with immigrant respondents because language barriers can be addressed by using bilingual interviews (Marshall & White, 1994; Mc Dermott & Palchanes, 1994; Twinn, 1997). Marshall & White (1994) used semi-structured interviews in their study with respondents for whom
English was a second language. They found that having an interviewer who spoke and understood the respondent’s language increased the quality of the data. Since the English language was a major challenge to participants in their study, Marshall & White (1994) found it more appropriate to use the language of the informant to obtain the data needed. Hence, their interviewers spoke English and the respondent’s first language, which overcame the language barrier.

Bilingual interviewers increase the quality of data when the sample is immigrant. However, the literature reviewed also shows that the quality of the interview is dependent on the qualities of the interviewer. Marshall & Rossman (1995) noted that interviewers should have superb listening skills, interpersonal skills and gentle probing skills as these will impact the amount of data collected. To elaborate, Morse & Field (1995) indicated that the amount and quality of the data is dependent on the ability of the interviewer to gain trust from the respondents. If respondents do not trust the interviewer, responses will be minimal and possibly inaccurate. Morse & Field (1995) also indicated that the ability to manage issues also affects the quality of information collected. Issues may rise during an interview that can prevent the interviewer from collecting more data. For instance, interviewers may face interruptions during the interview such as the telephone ringing and people walking in and out of the interviewer room which could affect the responses, especially if the respondent is afraid of someone listening to their conversation.

The key to gaining trust from respondents and managing interview issues is to ensure interviewers are prepared and confident. This increases the chances of having a good interview where respondents feel free and comfortable to answer all the questions honestly. To prepare interviewers, role playing the interview process is a strategy Morse
& Field (1995) used. Interviewers role played the following activities with each other: completing the consent forms, explaining the purpose of the study, answering their questions and terminating the interview. This allowed interviews to practice the activities involved in the interview making them feel more prepared.

Bilingual interviewers help address language barriers by being able to speak the language of the interviewee. However, the issue of translation accuracy arises. It is a challenge to translate and interpret in a culturally relevant and comprehensible form while maintaining the meaning of the original items. Failure to maintain the meaning of the original items decreases the validity of the data (Sperber, Dervellis & Boehlede, 1994). Methods have, therefore, been developed to minimize this threat to research validity. One of these methods developed is back translation. In this method, the original translation is translated back into the source language by another independent translator. The two source language versions are then compared to make sure they match (Sperber, Dervellis & Boehlede, 1994).

Many qualitative studies combine several data collection tools since limitation in one method can be compensated by the strengths of another tool (Marshall & Rossman, 1995). For instance one-on-one interviews are good for eliciting personal experiences and focus groups are better for obtaining opinions and feedback (Padgett, 1998). Focus groups help elicit how participants feel about a topic and to identify the range of perspectives regarding it (Witkin & Altschuld, 1995). Qualitative data analysis is also very time consuming resulting in smaller one-on-one interview sample sizes (Marlow, 1993; Marshall & Rossman, 1995; Padgett, 1998; Patton, 1980; Patton, 1984). Focus groups, however, usually have between eight to twelve participants, which is large
enough to increase the number and diversity of responses but small enough to allow everyone to share in the discussion (Padgett, 1998; Witkin & Altschuld, 1995). Focus groups address the one-on-one interview limitation of small sample sizes and one-on-one interviews elicit in-depth personal information which set the agenda of the focus groups.

2.8. Qualitative Data Analysis

Data analysis is the process of bringing order, structure and meaning to the mass of data collected (Marshall & Rossman, 1995). Categories, patterns and themes emerge from the data collected using inductive analytic techniques, moving from the specific to the general (Marlow, 1993; Morse & Field, 1995; Padgett, 1998). Analysis is inductive in that the researcher attempts to make sense of the data without imposing his or her expectations. The process begins with specific observations and builds towards general patterns (Patton, 1980).

Many researchers begin with line-by-line coding. In this process, relevant bits and pieces of information are identified or coded and linked together to create categories (Padgett, 1998). In doing so, patterns, similarities and differences in the data are usually noted (Marlow, 1993). After all the information is coded, linkages between them appear and themes begin to take shape across the sample. Themes relate categories together making the data more meaningful by capturing patterns in the participants’ experiences (Padgett, 1998).
2.9. Developing an Action Plan

Planning means working out what to do before action by an organization is undertaken. This helps organizations keep focus on their goals and coordinate their actions to achieve these goals. Planning involves a. defining the problem, b. agreeing to goals, c. laying out solutions, and d. determining actions (Rubin & Rubin, 1986). Since developing an action plan involves planning activities, Rubin & Rubin (1986) emphasize the importance of involving as many stakeholders as possible. For instance, managers, service providers, service users and funders can all be involved in the decisions on what actions should be taken. This helps ensure that the action plan developed is feasible since opinions from all levels are incorporated.

The research findings from BSICF were to help identify the concerns of immigrant parents and provide solutions regarding how to address them. In order to ensure implementation of the recommendations made in the study, an action plan needed to be developed. Since I have no experience in this area, Rubin & Rubin’s (1986) helped me develop expectations of what would occur in this stage of my practicum.

2.10. Summary

The literature reviewed suggests that there are issues immigrant children and families face such as integration stress and conflicting cultural values which make them more likely to need child and family services. Immigrants come from another society bringing with them their own cultural values. Familiarizing oneself with mainstream Canadian values and norms can be quite stressful due to cultural conflicts, language barriers and limited resources. Furthermore, the literature review shows that although
immigrants work more than non-immigrants, their wages are lower with fewer benefits and thus they are generally poorer. They also face issues of discrimination which all contribute to integration stress.

The Canadian society recognizes the importance of the role parents play in their children’s development and well being. As a result, programs and services are made available to assist and support parents. Immigrant parents, however, face additional challenges to parenting which some social service organizations neglect to consider. Added to the generation gap evident in most families, immigrant parents have to resolve cultural conflicts with their children. Immigrant children integrate faster than their parents creating a difference in values which can lead to conflict. Dealing with such conflicts is stressful for immigrant parents and children. Given that many immigrants’ have decreased social supports and increased integration pressures, children and families could potentially benefit from services that support and assist them.

The history of CFS with immigrant groups and the consultations held with community representatives from diverse cultural groups indicate that their services are not yet culturally appropriate. As more immigrants arrive in Canada, the need for appropriate multicultural services is growing. Moreover, the Multiculturalism Act and the Child Welfare Act emphasize the right all Canadians have to culturally appropriate and accessible services. All of these factors created the impetus for this study. Thus, my research practicum was born.

Before undertaking the research, literature on methodology and conducting research was reviewed. The benefits of involving the community and using a qualitative methodology became evident. The following framework illustrates how the different
literature fit together to inform the decisions taken in this research practicum. These activities will be further discussed in the third chapter.
<table>
<thead>
<tr>
<th>Literature about Immigrant Parent Issues</th>
<th>Federal/Provincial Legislation</th>
<th>CFS Serving Immigrant Children and Families</th>
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<tr>
<td>- Culture conflicts</td>
<td>- Multiculturalism Act’s direction</td>
<td>- History of CFS and immigrants</td>
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<td>- Generation gap</td>
<td>- Child Welfare Act’s requirements</td>
<td>- Community-Based Early Intervention</td>
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<td>- Language differences</td>
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<td>- Little research about immigrant groups</td>
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<td>- Limited resources</td>
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<td>- Poverty</td>
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<td>- Discrimination</td>
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<td>- Integration stress</td>
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<td>- Decrease social supports</td>
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**The Study**

*Better Serving the Immigrant Children and Families: A Winnipeg Child and Family Services Study (BSICF)*

↓

**Research Practicum**

**Community-Based Programming Literature**
- Networking with the community
- Obtaining university ethics approval
- Developing an advisory group
- Hiring and training interviewers
- Developing interview questions and probes
- Back translating for other languages
- Conducting interviews and focus groups with first generation immigrant parents
- Analyzing data
- Developing an action plan

**Qualitative Research Literature**
- Counting
- Sources of literature yield following activities

---

**Key to understanding framework**

+ Add sections together
  Resulted in need for CFS study
↓ Led to research practicum
  Sources of literature yield following activities
CHAPTER THREE: RESEARCH PLAN

Manitoba child welfare agencies are currently going through major organizational changes. Ten years ago, the Aboriginal Justice Inquiry report recommended the establishment of a child welfare system specifically for and by the Aboriginal and Metis people. This recommendation, which was based on consultations with the Aboriginal and Metis community, is now in progress. It has been very encouraging to see that the community could have a voice in program development, and has strengthened our plan to use a community-based approach.

This section describes the intended research plan and the rationale behind each activity. The planning for the study included a preparation stage, and data gathering and implementation phases. The preparation stage consisted of activities necessary to be carried out prior to data collection. For instance, developing an advisory committee, hiring and training interviewers, obtaining ethics approval, translating and recruiting participants. The data gathering stage was concerned mainly with data collection (interviews and focus groups) and data analysis. In the implementation stage of the study, the findings were to be disseminated to interest groups such as the CFS Board of Directors and advisory group members. This was also the stage where we, the researchers, planned to meet with CFS staff to develop an action plan. The following is an outline of the activities planned at each stage:

Stage 1: Preparation

- Obtain ethics approval
- Develop advisory group
- Orient communities
- Recruit participants
- Hire and train interviewers
- Translate interview questions and consent forms

**Stage 2: Data Gathering**

- Carry out field interviews with first generation parents
- Supervise interviewers
- Gather and analyze interview data
- Conduct focus groups with other first generation parents
- Gather and analyze focus group data
- Final analysis

**Stage 3: Implementation**

- Develop action plan
- Disseminate findings

Sinh Nguyen, the CFS Community-Based Early Intervention social worker, and I were to divide responsibilities with my share to be those activities which would meet my practicum learning goals. Sinh was to handle all costs related to the study such as translating, interviewer pay and photocopying. My responsibilities included training and supervising the interviewers, obtaining university ethics approval, and facilitating the focus group and advisory committee meetings. Sinh and I were to work together to increase awareness of the study within the communities, to help recruit families and develop an advisory committee, and to analyze the data.

### 3.1. Stage 1: The Preparation Stage

**3.1.1. Advisory Group:** Literature shows that an advisory committee is a useful tool in community-based programming. It helps ensure culturally appropriate program development (Stevens, 1993; Stringer, 1996). The plan was to develop an advisory committee of representatives from the respective communities. Advisory group members
were to provide researchers with cultural feedback and ideas, and help recruit participants. Following Steven’s (1993) model, developing this committee was to be one of the first tasks undertaken after the research plan in terms of methodology and sampling was known so that advisory members had a stake early in the project. We would also have a better sense about who to recruit for the advisory group once the communities included in the sample were decided upon. Sinh Nguyen and I both have experiences in working with professionals from diverse cultural groups interested in serving immigrant groups. Consultations regarding who would be interested and be good advisory group representatives were to be held with these professionals to assist in identifying and recruiting members. Those interested in volunteering would be informed about the purpose of the study and the advisory group’s terms of reference (Appendix D).

Sinh Nguyen and I planned to meet with this group three times. In the first meeting the purpose of the study would be re-introduced and the intended research plan such as the sample composition was to be presented. We hoped too that we would receive feedback regarding the activities in the first stage such as hiring interviewers and recruiting participants. The second meeting was planned to be held after the interview findings were assembled. In this meeting, advisory group members would be informed about the progress of the study. The interview findings and the focus group plan would be presented and discussed. The final study findings were to be presented at the third meeting, after the focus group findings had been analyzed. It was also intended that at this meeting the action plan be developed conjointly.
3.1.2. **Community Orientations:** Since community orientations help increase interest in the study (Stevens, 1993), orientations were planned in the respective communities and organizations to a. increase project awareness, and b. ask for assistance in identifying and recruiting participants. It was intended that Sinh and I undertake these activities jointly because this would help me to refine my networking skills and increase my knowledge about the respective immigrant groups. To ensure that the orientations were culturally appropriate, advisory group members were to be invited to assist with the orientations as well.

3.1.3. **Sample:** A decision was made to interview first generation immigrant parents since literature shows that newer immigrant generations retain more cultural values from their home country (Isajiw, 1999). Since one of the complaints immigrant families have about CFS was a lack of understanding about and recognition of their cultures, it was important to include the group who was most likely to experience culture conflicts. Using the information provided by the Winnipeg Social Planning Council and Statistics Canada 1996 Census, Erika Wiebe, a CFS community worker, prepared a report on the community profile of Winnipeg’s West Central area. Wiebe’s (2000) report also shows that 36% of the population residing in the West Central area were immigrants. This area was therefore one of the largest immigrant populated neighborhoods in Winnipeg making culturally appropriate services more of a concern for those responsible for developing programs. The geographical boundaries were chosen for 2 other reasons: The CFS Community-Based Early Intervention and Prevention branch who initiated this study is
specifically assigned to this neighborhood; and CFS potential funders for future research and program development with immigrant groups are interested in this neighborhood.

The sample was to include Filipino, Portuguese, Salvadorian, Sudanese and Vietnamese first generation immigrant parents residing in Winnipeg’s West Central area. With the Sudanese community being the exception, the communities included were listed in the top 10 immigrant groups living in the West Central area (Wiebe, 2001). Sudanese community representatives and social service providers noted that many Sudanese families with children are coming to Canada. This community is growing and families are settling within the West Central geographical boundaries. Sinh also indicated that CFS social workers have expressed a lack of knowledge when working with families from the Sudanese communities, hence this community was also included (Appendix E shows a map of Winnipeg’s West Central area).

The sample was designed to include both newer communities and communities who arrived earlier. Literature shows that a majority of the Portuguese immigrants living in the Prairies, came to Canada before 1966 (Lamba, Mulder & Wilkinson, 2000). As for the Filipino and Vietnamese community, a majority of them arrived after 1966. The Sudanese and Central American are more recent arrivals (Lamba, Mulder & Wilkinson, 2000).

3.1.4. Recruitment Process: Participants were to be recruited by advisory committee members, community representatives and through community orientations. A University of Manitoba ethics policy restricts those involved in data collection (researchers and interviewers) from directly approaching parents to ask them to participate in the study.
due to a potential conflict of interests. It was important that Sinh Nguyen and I made this clear to community representatives and organizations when introducing the study and the need for participants. It was planned that Sinh Nguyen’s office phone number would be the line to call if families were interested to participate in the study.

3.1.5 Ethics: Although this study was approved by CFS, I needed ethics approval from the university since I was their student. Therefore, since the study involved human subjects, a proposal was to be submitted to the Joint Faculty Research Ethics Board (JFREB) at the University of Manitoba for ethics approval. Certain precautions were taken to comply with the university’s guidelines.

- Participants were to be informed about their rights to confidentiality and withdrawal from the study at any time.

- Participants were also to be reminded that there are no benefits in participating in the study.

- They also had to be informed that their participation would not affect their connection with CFS.

- Informed written consent was to be obtained from all participants.

- Data collected and written transcripts were to be kept in secure and locked filing cabinets at CFS for three years after the study was completed and reported. Sinh Nguyen, Mallory Neuman (Sinh Nguyen’s supervisor) and I were the only ones who would have access to these files. (See Appendix B for the interview consent form and Appendix C for the focus group consent form).
3.1.6. Interviewers: Since research shows that an interviewer who can speak in English and in the respondent’s language increases the quality of the data collected (Marshall & White, 1994), it was decided that Sinh Nguyen and I hire a bilingual interviewer for each community. It was planned that a poster with information about the available interviewer positions, requirements and responsibilities be advertised in immigrant social serving agencies, post secondary institutions and respective community centers. The advisory group was to be consulted in determining essential interviewer characteristics. Sinh Nguyen and I were to interview the applicants and select the best candidate. Morse and Field (1995) discuss the importance of preparing the interviewers beforehand to handle potential issues that might arise during the interviews. Hence, after the interviewers were hired, it was intended that I train them. This would give me the opportunity to refine my interviewer training skills. I was to follow an interviewer training manual which was to be adapted from the NCCYS manual. To do so required permission from the authors. After permission was granted, the plan was for me to revise the manual accordingly.

3.1.7. Translations: To address potential language barriers and to increase the quality of data, interview questions and consent forms were to be translated into Tagalog, Portuguese, Spanish, Arabic and Vietnamese (Marshall & White, 1994). Sperber, Dervellis and Bolhlede (1994) indicated that back translating ensures the meaning and accuracy of the original items, therefore interview questions and consent forms were to be back translated by another community translator. It was our plan that the interviewers would do the translations and community representatives would back translate. The
translations would not be done by professional translators since costs needed to be kept to a minimum.

3.2. Stage 2: Gathering Data

3.2.1. Interviews: The section “Qualitative Research and Immigrant Groups” in Chapter 2 shows the benefits of using qualitative interviews with immigrant groups for providing more thorough and detailed descriptions (Patton, 1984). The plan in this study was to have the hired and trained interviewers conduct interviews with first generation immigrant parents. Given how time consuming qualitative research can be, the number of communities to be included in the sample, and the amount of time and money we had to devote to this study, five interviews per community was the maximum we thought possible.

Interviewers were to be responsible for coordinating a time to interview the recruited participants. The parent who knew the family best was expected to participate and respond on behalf of his/her family since he/she could probably best answer the questions. As mentioned in chapter 2, written consent from the participants was mandatory. Hence, the interviewer was to complete the consent forms with the interviewee before proceeding with the interview. After written consent forms were obtained, interviews were to begin with several factual and non-threatening questions. The interviewer was to record the respondent’s answers on paper. The remaining questions were open-ended. To minimize translation costs, it was planned that interviews be done in English unless the parent preferred responding in their own language. Hence interviewers were to be provided with research questions in English and in the respective
language. I was to supervise the interviewers and collect the completed interviews from them. To ensure that the interviews were progressing well, I intended to regularly follow-up and communicate with the interviewers. Methods of communication were to be established using the tools most convenient for the interviewers such as email, phone and/or personal meetings. Again, responsibilities were assigned so that I could meet my learning goals which were to refine my interviewer training and supervising skills and to learn the skills involved in qualitative interviews.

3.2.2. Focus Groups: Since one of the disadvantages of qualitative interviews is a smaller sample size, a focus group with different first generation immigrant parents was to be organized in each respective community. Focus groups help strengthen the data collected from interviews by having more parents agree, disagree or add to the original information (Witkin & Altschuld, 1995; Stringer, 1996). Hence focus groups help ensure that the interview findings represent the respective communities. To ensure personal interaction between the focus group facilitator and participants, each focus group was to have 6-10 participants (Witkin & Altschuld, 1995). In the focus groups, the interview findings were to be shared with the participants for feedback. The interviewer was to also attend the focus group in case translations would be needed to address language barriers.

3.2.3. Data Analysis: At the end of the data collection, two types of data would need analysis: the interview and focus group data. In the interview data analysis, line-by-in coding was to be used since the literature reviewed showed that this was one of the most effective ways to begin the analysis (Padgett, 1998). Similarities and differences in the
coding were to be used to help create categories and themes (Marlow, 1993; Padgett, 1998). Since Sinh Nguyen’s skills were in data analysis, he was to lead this process. It was planned that we would meet before the data analysis was conducted so that he could explain the process to be undertaken. To increase the quality of data and to add further credibility to the findings, it was also decided that Sinh and I would analyze each interview separately and then compare our analyses for similarities in and across groups. These themes would then be shared with the focus groups.

3.3. Stage 3: The Development of an Action Plan

This was planned as the last stage in my research practicum. In this stage, Sinh and I were to meet to discuss the research outcomes with the advisory group and other stakeholders such as CFS Board of Directors, community groups and the CFS management team. The development of an action plan is CFS’ next step towards better serving immigrant children and families. Several meetings were to be held in order to develop this. The action plan was to be developed using Rubin & Rubin’s (1985) 4 step process (defining the problem, agreeing to goals, laying out solutions, and determining actions). Although Rubin & Rubin (1985) suggest that as many stakeholders as possible be invited to help develop the action plan, it was decided that advisory group members only would be invited for the first meeting. In this stage, I would be able to witness how research findings are applied within a social service agency. Hence, another implementation meeting with funders, CFS representatives and stakeholders was planned after the meeting with the advisory group. This meeting was not to be part of my research practicum experience. Nevertheless, the first meeting with the advisory group was to
enable me to witness and participate in a beginning process in which research findings were applied within a social service agency.

3.4. Summary

The research plan was based on the literature reviewed and the activities that I was to undertake were to be delegated according to my practicum learning goals. The next chapter discusses the implementation process and outcomes of these intended research activities.
CHAPTER FOUR: RESEARCH IMPLEMENTATION

Being a co-investigator in this study, I contemplated whether I should focus this chapter on the study’s findings, a task usually undertaken in a thesis, or on the implementation process and learning which is the basis of a practicum report. I was extensively involved in all research activities making my experience more like that of the researcher; however, since my involvement revolved around learning how to better do research. I decided to write this chapter focusing on my learning goals rather than the findings.

Before beginning, it is important to note that there were many areas of this research practicum that could be reported on. The similarities and differences between communities found in the interview and focus groups findings would be an interesting topic. The impact a qualitative research methodology had in increasing knowledge about immigrant groups was another potential area of discussion; others areas were working with a multicultural interviewer team, and the influence advisory group members can have on the research. However, my learning goals were to refine my interviewer hiring, training and supervising skills, develop skills in qualitative research with immigrant groups and to learn more about applying research findings. Hence, the discussion here is about the research process and issues involved in undertaking the following activities: a. interviewer hiring, training and supervising, b. interviews and focus groups, c. data analysis, d. developing an action plan, and e. working with a co-investigator. Although the focus of this chapter is not on the research findings, these will be interspersed throughout the chapter as an illustration of the process issues.
4.1. Interviewer Hiring, Training and Supervising

One of the activities outlined in the first stage of the research plan was to hire and train interviewers. Interviewers were selected in consultations with Sinh, advisory group members and myself. I was responsible for training them in qualitative interviewing and supervising them through this process.

As planned, the interviewer positions for BSICF were advertised in respective community clubs, immigrant-serving agencies, at CFS offices and in post secondary institutions at the (University of Winnipeg and University of Manitoba). Advisory group members, Sinh and I, developed posters which were used for the advertisement. Phone calls were also made to respective ethno-cultural organizations. For instance, I called the Portuguese community newspaper and informed the editor about the study and the interviewer positions. Although the editor did not offer to advertise the study at no cost, he volunteered to tell families. Another example was approaching churches such as the Filipino Evangelical Church. I met with the pastor and he agreed to inform his parishioners. Such activities assisted the project three-fold by a. helping increase project awareness, b. advertising the available interviewer positions, and c. recruiting parents to volunteer in the study.

Three to four resumes of interested applicants per community were submitted to Sinh Nguyen at CFS. More of these applicants learned about the available interviewer position through community representatives we contacted. A few of the applicants found out by reading the advertisements we posted. Sinh and I interviewed these applicants. Advisory groups described characteristics of a good interviewer beforehand. Applicants were therefore interviewed for their rapport building and interviewing skills, knowledge
about the respective community and experience in qualitative research as these were the skills and experience, the advisory group members, Sinh Nguyen and I agreed BSICF interviewers should have. In the Portuguese and Central American community, bilingual female university students were hired. In the Filipino, Sudanese and Vietnamese community, bilingual females employed full time in social service organizations were hired.

These interviewers were hired because they were the best candidates among those interviewed. We had difficulty in finding interviewers who had all of the skills, experience and knowledge we, the researchers, and the advisory committee were looking for (building rapport, interviewing experience, and knowledgeable about the respective community and qualitative research). Applicants were either knowledgeable and experienced in one area but not as knowledgeable and experienced in the others. For instance, one interviewer candidate was experienced in qualitative research but seemed to have limited rapport building skills. The literature reviewed, however, emphasized the importance of building trust with the communities. As researchers, we were also very concerned about interviewer’s abilities to obtain written consent from participants, to follow ethical guidelines, and to transcribe the data collected accurately. After some discussion, it was agreed that teaching someone how to build rapport with immigrant parents would be more challenging than teaching someone how to follow ethical guidelines. Hence, the decision was to hire interviewers with rapport building skills who seemed capable of learning the research methodologies. The interviewer training then became more important because interviewers had to be taught new information and skills.
Training the interviewers was the next step after they were hired. The selected applicants attended a one day training session which I led using an interviewer training manual I adapted (with permission) from the NCCYS manual (See Appendix F for outline of training). The training session included agenda items such as introducing the study and CFS, booking appointments, maintaining confidentiality, the interview process, probing and, terminating the interview. The last activity undertaken in the interviewer training was role playing the entire interview process from booking the appointment to terminating the interview. This was done to give the interviewers an opportunity to apply what they had just learned.

I felt the interviewer training went well. All the interviewers seemed to catch on quickly which was shown during the role plays. With practice, they role played interview activities correctly. Role playing the interview process seemed helpful in learning about conducting interviews. Issues addressed during the role-plays included coping with a distracted interviewee, booking appointments with parents with busy schedules and completing the consent forms when these were unfamiliar to interviewees. After the role plays, the interviewers felt more confident administering the interviews.

The interviewer manual was also very useful in training the interviewers. It kept the interviewer training session organized. All the interviewers said the training was helpful and valuable in terms of learning more about the study and the interview process. The interviewers said it was also nice to meet one other. They did not feel alone in the interview process and felt supported knowing others were interviewing parents as well.

Communication was maintained with the interviewers after the training. I was responsible for supervising them. Most contact was by phone and email which was more
convenient for the interviewers and myself. Interviewers kept me up to date with the
progress of the interviews and any issues they faced. Along with the issue we role played
above, interviewers also had difficulty contacting parents to book appointments and then
parents canceling appointments. I assisted the interviewers by suggesting ideas learned
from my own experience. For example, I recommended a strategy for reaching parents at
home. The idea was to call the parent at different times throughout the whole day. For
instance, 9:00am, 11:30am, 2:00, 5:00pm, and 7:30pm. Many immigrants work irregular
hours, therefore it is difficult to predict when they are home. Calling several times
throughout the same day, however, could annoy or “turn off” the parent from
participating if this person has call display. To avoid this from happening, the free phone
feature *69 blocks the phone number of the caller. This was used so the parent did not
know it was the same person calling.

This portion of the research practicum allowed me to refine my skills and
knowledge in interviewer hiring, training and supervising. I learned how the impact of
unwanted situations (difficulty finding appropriate interviewers) could be lessened with
activities such as interviewer training. Some data was lost due to the limited research
skills interviewers had in the area of probing. I think I should have emphasized the
importance of probing during the training much more than I did. More time should have
been spent on refining the interviewers’ probing skills. The interviewer training manual
did include a section on probing but I neglected to consider that this manual was
originally designed for a study using a quantitative approach and probing is not as
important in this approach. In qualitative research, probing is one of the tools often used
by interviewers to obtain in-depth information. Not withstanding that we could have had
more elaborated data, the decision made in hiring an interviewer with good rapport building skills turned out to be a positive one since all 25 interviews were conducted and rich information was collected.

4.2. Interviews and Focus Groups

In this study, interviews and focus groups were conducted with Central American, Filipino, Portuguese, Sudanese and Vietnamese first generation immigrant parents living in the West Central area. This section of the chapter discusses the change made in the intended research plan, the research process undertaken and my learning experience in conducting the respective activities.

4.2.1. Change Made to the Intended Research Plan

In the intended research plan outlined in chapter 3, one of the 5 communities included in the sample, the Salvadorian community was widened to include the Central American community to help facilitate recruitment. Although the Salvadorian community was included in the top ten families living in the West Central area, the advisory group and my practicum committee predicted difficulty in identifying and recruiting only Salvadorian families in the West Central area. They claimed that there were not many Salvadorian families living in this neighborhood. Sinh Nguyen and I consulted with a few Salvadorian representatives about this notion and they too agreed. Hence, as suggested by the advisory group and community representatives, we included the whole Central American community in the sample.
The difference between the 1996 Census data and the views of the community representatives regarding there being a sufficient number of Salvadorian families was interesting. The difference may have been due to the high mobility rates of new immigrants making the 1996 Census inaccurate. Six years later, despite the sample change from the Salvadorian community to Central American, great difficulty was experienced in recruiting participants. We were informed that this was partly due to the limited number even of Central American families living in the respective area. Hence, this imposes another possible limitation in this study. The top 10 immigrants groups identified in Wiebe’s (2001) report may therefore no longer apply. The 2001 Census, which was just publicized this spring, has more recent statistics but the research plan for BSICF was set before this information was released.

4.2.2 Participant Recruitment

Participants were recruited in a number of ways. Presentations were made in the respective communities, at CFS and immigrant-serving agencies. Advertising the interviewer positions helped build several contacts in the respective communities. These contacts were called and dates for presentations about the BSICF study were arranged. Other community representatives, social service providers and colleagues were also contacted to increase project awareness and recruit participants. Most of these people assisted in recruitment due to their interest in improving services for immigrant families. A few of them who Sinh Nguyen and I personally knew, assisted as favour to us. They were the ones who approached parents to participate.
A few of the social service providers we contacted asked if this study had any relation to the Aboriginal Justice Inquiry and the current changes occurring within CFS. We informed them that this study had no relation or connection with the Aboriginal Justice Inquiry except in that it’s purpose was to assess services provided by CFS to immigrant groups. In this way the study was related to CFS’ major organizational changes. The changes are based on recommendations developed using the feedback provided by Aboriginal communities. I think knowledge about this occurrence increased the interest demonstrated by several community people. I believe that this motivated them to assist us in recruitment since the current changes show that the community’s voices are heard.

Parents interested in volunteering in the study called Sinh at CFS. Advisory group members or community representatives also called with the coordinates of the parents they recruited. The names and contact information of the recruited participants were passed along to the respective interviewer to book an appointment. As for the focus group, the time, date and place more convenient for the majority of the participants was established immediately after the interview data was analyzed.

In this study, the composition of the sample included first generation immigrant parents from 5 cultural groups (Central American, Filipino, Portuguese, Sudanese and Vietnamese) living in Winnipeg’s West Central area. Participants were recruited using a snowball sample. The representatives recruiting the parents informed them about the study and what would be involved in participating. The parent interested in participating decided if he or she would like to be an interviewee or focus group participant. Recruitment efforts for interview participation stopped when 5 immigrant parents per
community were recruited. Parents were then recruited from each community to volunteer in the respective focus groups.

With respect to Filipino interview participants, four parents were recruited by an advisory group member and a pastor from a Filipino church recruited the fifth parent. As for the focus group, three parents were recruited by community representatives who we approached to assist us with recruitment. The other two parents were recruited by the advisory group. In the Central American community, the advisory group recruited one interviewee and one focus group participant. Several community representatives recruited the other participants. Recruitment for the Sudanese community was different. In the Sudanese community, the advisory group member recruited all the interviewees and 4 of the focus group participants. Recruitment in the Portuguese and Vietnamese community was also done by a few people. One of the churches we approached recruited a Portuguese interviewee. The advisory group and community representatives recruited the rest of the participants. As for the Vietnamese community, the advisory group member recruited an interviewee and community representatives recruited the other parents interviewed. The Vietnamese advisory group member informed us that his work schedule was busy at the time we were recruiting our interviewers. Hence, he did not approach as many participants as he could have. Nonetheless, when his workload lightened, he recruited four parents to participate in the focus group. Table A is a breakdown of this recruitment process.
Table A: Recruitment Process

<table>
<thead>
<tr>
<th>GROUP</th>
<th>INTERVIEWS</th>
<th></th>
<th></th>
<th>FOCUS GROUPS</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Advisory</td>
<td>Church</td>
<td>Community</td>
<td>Advisory</td>
<td>Church</td>
<td>Community</td>
</tr>
<tr>
<td></td>
<td>Group</td>
<td>Reps</td>
<td>Reps</td>
<td>Group</td>
<td>Reps</td>
<td>Reps</td>
</tr>
<tr>
<td>Central American</td>
<td>1</td>
<td>0</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Filipino</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Portuguese</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>2</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Sudanese</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Vietnamese</td>
<td>1</td>
<td>0</td>
<td>4</td>
<td>4</td>
<td>0</td>
<td>2</td>
</tr>
</tbody>
</table>

Recruitment for the Sudanese community was mainly done by the advisory group member because he knew many newcomer families. Furthermore, this is a newer immigrant group and many parents from this community could have been more acceptable to any projects that may potentially benefit them and their families than parents from the other immigrant communities. One advisory group member noted that immigrant families have been approached so many times to participate in studies that they became tired of participating. I believe that this loss of interest in participating in studies was due to participants not witnessing the benefits of their participation. This was something I learned from my research work experience with NCCYS. Someone from the Kurdish community informed me that many families from his community were no longer as willing to participate in research studies because they felt that their participation was not worth it. They did not see any benefits from the projects in which they were involved.

Networking with the community was a large part of the recruitment process. To maintain ethical standards, we relied on the advisory group, community representatives and the presentations we made in community organizations for participants. Follow-up
phone calls were made a. to ask if these community members had recruited any parents yet, b. to inform them that more participants were needed, and c. to remind them of the important role they played in the recruitment process. Networking with the community took a lot of time, patience and energy especially with the Central American and Portuguese group, resulting in delays in the project schedule. Gaining trust and interest from parents to participate in the study was a challenge in these two communities. The Central American and Portuguese advisory group representative and focus group participants informed us about the negative experiences families had with CFS. CFS’ negative reputation limited participation.

To address this recruitment difficulty, Central American and Portuguese community organizations were visited and contacted more often than the other three groups. In discussions with them, Sinh Nguyen and I emphasized the importance of the study and the benefits the findings could potentially have for immigrant families such as more culturally sensitive services. We also emphasized the confidentiality of their participation and responses.

Sinh and I found that although we reinforced our obligation to maintain confidentiality and the purpose of the consent forms, these were not enough to gain potential trust from a few parents from all the groups. I found that building rapport with parents was what convinced them that their responses would remain private and confidential. We did consult a few advisory members about our experience. They confirmed that immigrant parents do not trust legal documents due to some of the political corruption that has occurred in their home countries. Therefore Sinh and I concluded that these consent forms were not culturally relevant. Nevertheless, since
university ethics policy dictated that we complete the forms, we asked the bilingual interviewers to translate and explain the content to the parents. This helped address some of the form’s legalistic language, and comply with the university requirements. It did not address the cultural issues, and the different ways to achieve “real” consent in immigrant communities.

4.2.3. The Interviews

The interviewers conducted a total of twenty-five interviews with first generation immigrant parents, five interviews in each community (Central American, Filipino, Portuguese, Sudanese and Vietnamese). The interviews were conducted in English unless the interviewee preferred to do the interview in his/her own language using the translated questions. Table B, “Interview Participants”, shows that all Sudanese and Filipino interviews were held in English. One out of the five Portuguese interviews was conducted in Portuguese, and two out of the five Central American and Vietnamese participants preferred Spanish and Vietnamese respectively. The non-English interviews were recorded in the respective languages and then translated into English by the interviewer. We did not have enough resources to back translate the interview translations to ensure translation accuracy. Hence, we had no choice but to rely on the interviewers to do their best when translating the interview into English. Although, the importance of translating accurately was emphasized during the training and supervision, this was a limitation in the study since no formal precautions such as back translations were undertaken. We felt secure, however, that the translations were precise since no major issues had surfaced when the interview questions were back translated demonstrating that the interviewers
had precisely translated the interview questions into their respective languages. We therefore had to assume an accurate translation of the interviewees’ words.

Table B: Interview Participants

<table>
<thead>
<tr>
<th>COMMUNITY</th>
<th>GENDER</th>
<th>LANGUAGE USED DURING INTERVIEW</th>
<th>IF THEY HEARD OF CFS PRIOR TO INTERVIEW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
<td>Own Language</td>
</tr>
<tr>
<td>Central American</td>
<td>2</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Filipino</td>
<td>1</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Portuguese</td>
<td>0</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>Sudanese</td>
<td>2</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>Vietnamese</td>
<td>0</td>
<td>5</td>
<td>2</td>
</tr>
</tbody>
</table>

Since some of the interviewers were unskilled at probing, the interview data was not as rich as it might have been. Interviewers followed the interview questions and used the examples of probes provided. They felt incompetent to develop and use their own probes. Parents were hesitant when responding to the questions because the study was associated with CFS and many parents did not trust CFS. Unfortunately, the research questions were not piloted before the actual data collection began. Conducting at least one pilot study in each community would have prevented some of these problems from occurring. Nevertheless, sufficient interview data was collected and the focus groups provided additional feedback to the interview findings.
4.2.4. The Focus Groups

As planned, the interview findings were presented to focus group participants for feedback. Each meeting lasted for 2-2.5 hours. The same agenda was used in all the focus groups: welcome, introduction of the study and the purpose of the focus group, presentation of the findings and discussion. The focus group agenda was designed by Sinh Nguyen and I so that the participants were aware of the purpose of the study and their role to provide feedback. First generation immigrant parents living in the West Central area, other than those originally interviewed, participated in the focus groups held in each respective community. Table C lists the focus group participants.

Table C: Focus Group Participants

<table>
<thead>
<tr>
<th>COMMUNITY</th>
<th>GENDER</th>
<th>AWARENESS OF CFS BEFORE FOCUS GROUP</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>Central American</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Filipino</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Portuguese</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>Sudanese</td>
<td>6</td>
<td>1</td>
</tr>
<tr>
<td>Vietnamese</td>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>

Six to ten parents in each community agreed to participate in the focus groups but as shown above, the numbers of attendees were lower. The parents who attended provided feedback about the themes generated by the interview data. The majority of the feedback confirmed or elaborated our findings. The focus groups, however, gave us some information that was different from what we learned from the interviews. For example, we learned that some families were unhappy with CFS because of negative first hand
experiences they had with the agency. Such conflicting data were included in the final study findings which the “Data Analysis” section elaborates upon.

I facilitated all the focus groups as this was an area in which I wanted to gain experience. In the Vietnamese focus group, not all the participants understood English fluently. As a result, one of the participants who works as an interpreter volunteered to interpret that evening. Having English as a second language myself and relatives who cannot understand English very well, I knew to speak slowly and to use simpler words. I spoke in this manner in all the focus groups. In the Vietnamese focus group, I spoke slower to allow for interpretation.

Although I did not personally interview any of the participants, in facilitating focus groups with immigrants, I developed some of my qualitative interviewing skills. To elicit feedback from the participants, I used open-ended questions such as “What do you think of this finding?” and “Why do you disagree or agree with these recommendations?” I also probed for elaboration on some of the findings by asking questions like “How do you think the orientations should be conducted so that they are most effective?” Earlier in the chapter, I discussed how I did not place as much value as I should have on the area of probing during the interviewer training. My experience in facilitating the focus groups emphasized the importance of probing again. If I did not probe, I would not have obtained some of the information I did in the focus groups, for instance, understanding parent’s fears to lose face in the community re-enforced for me the importance of probing.

Paraphrasing was another tool I found myself to use a lot with immigrant parents. I have interviewing experience myself but I did not have to paraphrase as much. I believe
this is due to the majority of the participants I interviewed were Anglophone. I paraphrased a lot to ensure that the parents understood the question and that I understood their answer. I felt that paraphrasing worked in maintaining understanding between myself and the focus group participants. I was corrected a few times when paraphrasing their responses back to them and when I paraphrased the second time, they indicated that I understood.

Keeping the group discussion focused on agenda items was a challenge. Parents used personal stories as examples to strengthen the points they were making. For instance, under sub-theme, “Experience with CFS”, negative experiences were shared when discussing experiences with CFS. During such discussions, a parent would ask questions regarding the policies on apprehending children, however, answering this question often led to several other related questions leading the discussion away from the agenda items. As the facilitator, it was my role to ensure discussions remained focused especially since there were many findings to be discussed within a limited time frame. To fulfill this role, I reminded participants of the purpose of the focus group and the limited time we had available to discuss all the findings. I took precautions in ensuring that my comments were polite and avoided offending parents. I apologized for the tight agenda and Sinh Nguyen and I offered to meet with parents at another time to respond to their questions.

Encouraging participation from all parents was another skill I refined. There were always the talkative participant(s) and the non-talkative ones. To encourage equal participation, I would ask the parent who did not provide any feedback if he or she would
like to add anything before proceeding to the next topic. After presenting a finding, I would also sometimes ask the parents to provide their feedback, one by one.

4.3. Data Analysis

This section of the chapter focuses on the process undertaken in analyzing the interview and focus group data. Unfortunately, the scope of this report does not allow for an elaboration of the study findings.

As previously mentioned, the interviewers transcribed the interviews in English and both Sinh Nguyen and I received copies of all the transcripts to analyze independently. To avoid delay in completing the project, the interviews were analyzed as they were completed. This meant that interviews from the same community were not analyzed together. For instance, two Filipino interviews might be analyzed followed by a Sudanese and Vietnamese interview. Whether this had an impact on the analysis was unknown. I personally thought that it did not affect my analysis since I was careful in not letting previous data analysis influence the others.

To get a “feel” for the data, we read through the entire transcript before coding. We then re-read the transcript but this time we coded the data by identifying important bits of information and recording them at the left side margin. After the entire transcript was coded, we reviewed all the codes noting repetitive information and put topics into categories. Categories were then grouped together into themes. This process gave meaning to the information. To illustrate this, the following presents two of the sub-themes found, “lack of CFS knowledge” and “settlement pressures”, along with quotations from an interview.
The quotations provided in the first example were grouped under “don’t know about CFS” or “don’t know much about CFS”. Bits of information indicating that immigrant parents have little or no knowledge about CFS were found throughout the interviews.

Analyzing data was very time consuming and mentally exhausting. The first few interviews especially, were quite challenging. As more interviews were analyzed, the process became easier and faster. To ensure the quality of my analysis, I consulted my advisor. Her feedback was helpful because it gave me confidence that I was on the right track.

The most important lesson I learned in the process of analyzing data was how easy it was to let your biases affect the analysis. After a few hours of coding data, I caught myself using my words and not the interviewee’s. This could have become

| Lack of CFS Knowledge | “I didn’t even know about CFS until my friend ask me to take part in the study” |
| Settlement Pressures   | “It’s hard when you come to Canada. You don’t have nothing.” |
|                       | “People from back home think it’s good here but it’s hard. I can’t find a good job. I had a good job back home but here I work at the bottom” |
|                       | “When we come to Canada, we start from scratch.” |
problematic because interpretation is involved when using your own words leading to potential deviation from the interviewee’s responses. To ensure my biases would not affect the analysis. I took consistent breaks during the analysis to avoid fatigue and to keep focused. As well, I tried to keep the words used by the respondents in coding data.

In the second example, “settlement pressures”, in the chart above, the quotations were initially coded as “hard to find a job” and “starting from scratch”.

To ensure the quality of our analysis, we used a similar technique to Strauss & Corbin’s (1990) comparative analysis technique. In this technique, themes emerge from coding the raw data which is the inductive phase. Afterwards, a reverse procedure, the deductive phase, is undertaken where analysis begins with the theme back to the raw data ensuring the meaning is precise. This helps ensure the accuracy of the generalizations made in developing the themes based on the coded data. Following this procedure, we went back to the interview transcripts to ensure the themes we found were in accordance with the raw data. I was quite pleased since most of the themes I found still matched the information in the interviews.

After all of the twenty-five interviews, five from each community, were analyzed, Sinh and I met to compare our themes and to develop a consensus regarding the final interview findings. Many of the themes Sinh Nguyen and I found overlapped. There were a few, however, which did not. These differences were easily resolved by placing some of the information into related thematic areas. For example, one of the non-overlapping themes removed was child apprehension. This included information such as “CFS takes kids away”. This information was moved to the sub-theme, “Second Hand Knowledge” since parents indicated that taking children away were one of the things they had heard
about CFS. Since there were many themes found, Sinh Nguyen and I decided to develop less specific themes with more specific sub-themes. We found this helped us keep a lot of the information we collected. Linking themes together to create sub-themes also further organized the data. The major themes then had the original more specific themes subsumed within them as sub-themes.

One issue we faced during this stage of the analysis was agreeing which information to exclude from the findings. A lot of information is collected when using a qualitative methodology and it is not feasible to use all of it. Sinh Nguyen and I had a difficult time letting go of some of the information because it too was interesting and everyone’s words were meaningful to us. It was helpful to remind ourselves of the goals of our study. The omitted data would only be excluded for the CFS report but could be useful in future writings.

There was also some difficulty in terms of finalizing the way the major interview themes were worded. Since my practicum advisor is knowledgeable and experienced in qualitative data analysis, we decided to consult with her. The input my practicum advisor provided was used to settle any disagreement Sinh Nguyen and I had. The input was very valuable in that it helped clarify the emerging themes. Strauss & Corbin’s (1990) constant comparative analysis was also used after the interview findings were finalized to ensure that the themes and sub-themes were present in the data. Furthermore, focus groups strengthened and clarified interview findings by providing feedback. All of these helped maintain the quality of data.

The following were the final 3 themes along with their respective sub-themes emerging from the interviews and focus groups.
Table D: Research Themes and Sub-Themes

<table>
<thead>
<tr>
<th>THEME</th>
<th>SUB-THEMES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Knowledge about CFS</td>
<td>a. Lack of CFS Knowledge</td>
</tr>
<tr>
<td></td>
<td>b. Second-Hand Knowledge</td>
</tr>
<tr>
<td></td>
<td>c. Experience with CFS</td>
</tr>
<tr>
<td>2. Parenting Concerns</td>
<td>a. Cultural and language differences</td>
</tr>
<tr>
<td></td>
<td>b. Discipline</td>
</tr>
<tr>
<td></td>
<td>c. Parental roles</td>
</tr>
<tr>
<td></td>
<td>d. Settlement pressures</td>
</tr>
<tr>
<td>3. Recommendations</td>
<td>a. Orientations</td>
</tr>
<tr>
<td></td>
<td>b. Translated brochures, pamphlets and written materials</td>
</tr>
<tr>
<td></td>
<td>c. Culturally sensitive and bilingual workers</td>
</tr>
</tbody>
</table>

Theme 1: Knowledge about CFS

This theme referred to the participants’ knowledge about CFS. The majority of the interviewed parents knew little about CFS (Sub-theme 1). Several Filipino, Sudanese and Vietnamese participants were only made aware of CFS when they were approached to participate in the interview. Parents across all focus groups who were aware of CFS also indicated a lack of knowledge regarding CFS’ purpose, services and policies. In their opinion, similarly, most immigrant parents have limited knowledge about CFS. Several focus group participants, one Filipino, two Sudanese and two Vietnamese, were also unaware of CFS until they learned about the study.

Some participants had second-hand knowledge of CFS gained from neighbours, relatives, children’s teachers and the media. This information led to the second sub-theme. Many parents aware of CFS learned about the existence of the agency through stories shared by peers, co-workers or relatives, etc. One interviewed parent from the Filipino community said, “I am afraid of dealing with them. The only time I hear about
them is through the media and they are all not good complaints. They may not be true but it is the only information I get about them”. Some of the stories parents heard were based on children being apprehended and were usually negative. Some of the words parents used to describe CFS was “they take your child away” and “they break families”. Parents also associated CFS with the police. “I heard from a friend that CFS is a center where people and police take your kids away if you hit them”. In some of the transcripts, in fact, it was noted that the parent seemed hesitant and fearful during the interview due to the interviewer’s association with CFS. Focus group participants also agreed with the accuracy of this, increasing the credibility of the finding.

Although most of the information parents have about CFS was second-hand knowledge, there were several parents interviewed whose knowledge was based on first hand experience with CFS. Hence the third sub-theme, experience with CFS, emerged. It referred to the CFS knowledge immigrant parents acquired from direct experiences. For instance, one parent participated in an anger management program, another was a foster parent and a few had communicated with a CFS social worker. With the exception of the foster parent, the comments made by parents with first-hand experience were not as negative as the comments made by parents who had second-hand knowledge. Most of the comments made by parents with CFS experience were based on ineffective service delivery and the feelings of frustration such as “I didn’t know what to do anymore.” One parent said, “CFS is good. They have good intents but it doesn’t work.” Parents felt the organization itself meant well but the services provided were not effective. A few parents indicated a conflict in cultural values between themselves and their workers. For instance, workers did not place the same importance on retaining languages of origin and
immigrant parents did not value the importance of recreational activities as some of the workers did some social workers.

Several Portuguese and one Sudanese immigrant parent, however, disagreed with the conception that CFS had good intentions. Two Portuguese parents expressed feelings of anger and animosity with CFS and their services. They claimed that “CFS jumps to conclusions” and therefore apprehended children without properly assessing the situation. One parent emphasized that his child was apprehended based on false assumptions. Furthermore, his child was placed in a foster home and was unhappy there.

Theme 2: Parenting Concerns

The second major theme involved parenting concerns which immigrant parents from across all groups worried about. The “Experience with CFS” sub-theme highlighted the cultural differences between them and service providers. The same difference was found under “Parenting Concerns” but between immigrant parents and children. The first sub-theme under “Parenting Concerns” was cultural and language differences. One of the conflicting cultural values was around the Canadian value of children’s rights. In their home countries, children relied on their parents for shelter, food, education, etc. Parents complained that some children felt that they did not need their parents because of these rights they perceived they have. They talked back to them and threatened to leave them. Parents disclosed feelings of sadness due to such treatment from their children. One parent noted “Children have too much power and independence when they are not even old enough.” The parents interviewed also indicated that the children in their country were more respectful, hard working and disciplined than Canadian children. It seemed that the parents were worried about their children having more of the Canadian children’s
characteristics. “I am worried that my kid grow up here with too much freedom. The kids here are wild and disrespectful. They all talk back to their parents. In my country, that is not right. That is wrong.”

Another interesting example of cultural values conflicting was provided by a Vietnamese interviewee. This participant shared a story about his friend being accused of sexually abusing his son because he touched his son’s private spot. She informed us that a father touching his son’s private spot is an indication of his love. The child mentioned his father touching his private spot to his teacher and the teacher reported this to the police (according to the interviewee). The child was apprehended and the father had to attend court. This upset and worried the father because what he believed to be a sign of affection and pride was a sign of abuse in Canada. According to the interviewee, this story also scared the whole Vietnamese community.

The story about the father and son was another indication of immigrant parents’ lack of knowledge about the agency and their association of CFS with the police. CFS oversees child apprehensions yet the interviewee referred to them as the “police”.

Focus group participants strongly agreed that cultural and language differences were parenting concerns. Parents indicated that there were cultural values to which their children would no longer conform. For instance, in the Central American community, two females holding hands was a sign of affection and closeness. One focus group participant complained that her daughter would not hold her hand in public because of fear of being mistaken for lesbian.

An interesting focus group finding with the Portuguese parents was the feedback they provided regarding the generation gap. They informed us that major parent and child
conflict exists even in Portugal and that to a large degree, it was due to a difference in values. For example, parents living in Portugal were also concerned about their children staying out too late and going out too often. They also felt that their children were lazy, disrespectful and “out of control”. One focus group participant said she was just consoling her friend in Portugal who was crying because her teenage children talked back to her. Hence the Portuguese focus group suggested that parent and child conflict could be due more to the generation gap since there was similar conflict in both countries.

Language conflicts also concerned parents. Some of the participants’ children could only speak English creating communication barriers with parents whose English skills were underdeveloped. Parents and children also disagreed on the importance of retaining their cultural language. “My child does not care to speak Vietnamese. She is forgetting that she is Vietnamese.” The majority of parents would have liked their children to have the respective language skills but some of the children were not interested.

Discipline was another sub-theme. Discipline referred to measures undertaken by parents to show their children the difference between good and bad. The child’s development and well being were concerns for all immigrant parents. Teaching children right from wrong sometimes involved discipline. At times, the immigrant’s discipline methods conflicted with Canadian ones. In Canada, spanking was a form of physical abuse and was unacceptable. In some countries, however, spanking was accepted as a form of discipline. “In my country, you spank kids when their bad. It teaches them how to be good. We need to spank our kids.”
Parents both in the interviews and focus groups were concerned about Canadian discipline practices since they perceived most Canadian children to be “out of control” and “too independent”. Two parents from different cultural groups mentioned how their children learned about children’s rights and the role of CFS in school. They then used their perception that CFS will remove them from their families if their parents do not comply with their wishes to threaten their parents, around later curfews for instance. One parent noted that “Canadians don’t discipline their children enough”.

We also found some parents to be confused about appropriate disciplinary methods. I felt that this was an outcome of the methods used in their home countries conflicting with the accepted methods here in Canada. Parents were afraid of disciplining their children because of fear of their children being apprehended. “I know that you should not hit children because of CFS but a lot of times I talk to them or ask them to sit down or go to their rooms but it didn’t work. What should I do? How do I discipline my kids in this country?” This was a concern we found in all the groups.

The data also indicate that parents felt powerless, helpless and unrecognized. They felt confused on how to discipline their children and about their roles as parents. Parents felt that CFS, the police and teachers over ride their parental roles. This concerned some immigrant parents because in their countries, children were dependent on their parents and parents played the most powerful role in their children’s upbringing. “CFS and teachers makes parents feel powerless because our kids could just call them and report our parenting style and then we get in trouble even when we are the parents. In my home, no one tells me how to raise my kids. Of course I want to raise them good. What is my parent job then?”
The stress and pressure immigrant parents experience after arriving in Canada was the last sub-theme under parenting concerns. Several parents noted that their expectations of Canada as the land of opportunity, were not met. Parents believed that Canada would give them and their children a better life but hardship was still experienced. Two to three jobs were undertaken to eliminate monetary constraints. Parents often worked irregular hours leading to difficulty with childcare and adding to the stress they were experiencing. One parent said daycare would not be a problem back home due to the number of relatives available to take care of their children. In Winnipeg, this parent only had a few relatives who were also working and therefore could not assist with child care.

All focus group participants strongly agreed with the parenting concerns found in the interviews. However, focus group participants from across the groups felt concern about finding jobs were missing under “Settlement Pressures”. Immigrant parents complained that their education, skills and experience were not recognized in Canada and therefore they ended up with positions lower than those in which they were working at in their home countries. For instance, one Filipino focus group participant was a researcher in the Philippines and was now doing clerical work: “Back home, I had a good job. I was a researcher at the university. Here I am like an office assistant. Even if it’s for the government, I am like a secretary.” Why this concern came out in the focus groups and not in the interviews is not known. My guess is that the sub-theme, “Settlement Pressures” and the way it was defined to the focus group as stress and pressure immigrant parents experience when arriving in Canada, elicited this information more easily than in the individual interviews.
Theme 3: Recommendations to CFS

The last major theme emerging from the interviews was around recommendations to CFS with respect to better service delivery to immigrant groups. The recommendations included preventive activities CFS could undertake to address the concerns found in the study. These ranged from educating the community about child welfare to hiring bilingual CFS workers. The following discusses the recommendations made in more detail.

One of the recommendations made by the interview participants involved the need for orientations to inform the immigrant community about the Canadian child welfare system, the services CFS offers, the different discipline methods acceptable in Canada, their rights as parents and the policies regarding child apprehensions. Parent indicated that such orientations would help decrease the negative perceptions most parents have about CFS, increase the knowledge about CFS in the immigrant community and address some of the parenting concerns such as discipline and the confusion over their roles as parents. A complaint heard in all the focus groups was how children are educated about CFS and their rights but parents are not. Currently, immigrant parents do not receive any orientation on policies regarding child abuse, child neglect, etc. “I don’t know nothing about them. All I know is that they take kids away. They don’t even give the parent any information about them. That is bad. That is very bad.” Having received no information about CFS frustrated and offended parents when approached by them. In their countries, their relationships with their children were private and concerns were kept within the family. No agency told parents how to raise or discipline their children. There
was trust that parents’ actions were in the child’s best interest. In Canada, however, the well being of children and raising them was a more public concern. So parents are usually overwhelmed when CFS or teachers ask them with questions about their parenting or confront them with accusations about abuse.

Focus group participants indicated that orientations would be most effective if conducted as early as possible either in their countries before immigrants leave or during their first few days in Canada. These orientations could be held in groups of parents or families. Furthermore to keep the orientations culturally sensitive and relevant, parents suggested that people from their community conduct them. For example, a Vietnamese social worker should orient families coming from Vietnam. This would also help address language and cultural barriers.

Developing written materials such as brochures and pamphlets with information about CFS, their services, mandate and contact information and having them available in different languages was also suggested by many parents. Focus group participants emphasized that such materials should be easily accessible, by distributing them in places where immigrants go, for example, ethnic grocery stores, doctor’s offices, churches, community organizations and immigrant serving agencies. In doing so, awareness of CFS in the immigrant communities would increase.

The third sub-theme included the recommendation that culturally sensitive and bilingual social workers work with the immigrant communities whether in apprehending a child, assessing a parenting situation or conducting an orientation. This would help increase understanding between CFS and immigrant parents by attending to language and cultural barriers. However, it involved hiring and training community representatives
who were known, respected and could work with their own communities. One
interviewee said, “I can’t go because I have trouble speaking English. I don’t like it. I just
get mad because they don’t know what I say.” Another interviewee also noted that “It’s
better to have someone from your country. You can have an interpreter but how do you
know they are saying what you mean. Knowing my country and what I mean like my
beliefs is more than what a translator can do.” This parent implied that in order to
accurately interpret what the parent was saying, the interpreter must know and understand
his or her culture.

Focus group participants agreed that culturally trained workers were necessary,
but they also expressed some hesitation. Some, especially from the Vietnamese focus
group, informed us that there was a fear of losing face in the community by seeking help.
One Vietnamese parent said the issue is “How does one seek and receive support and
maintain their honour at the same time?” We learned that the severity of the problem
immigrant parents experience could affect their willingness to seek and receive help. If
the parents perceive their problem to be very severe, they would most likely be reluctant
to see a worker from their community out of pride and the fear of losing face. Parents
feared that they would be gossiped about despite assurances of confidentiality. One
parent said, “Even the walls have ears.” Focus group participants indicated that social
workers from their community would only be good and effective with handling minor
child and family problems such as disagreements about a curfew or going out on a
Saturday night. A child running away or getting pregnant were examples of major child
and family concerns which parents would have trouble disclosing to someone from their
community.
To find some resolution to this problem and still provide service needed, we asked parents to tell us how CFS could assist families with major family concerns. Parents were usually silent or admitted, they did not have answers. A few focus group parents did respond by saying that a worker not from their community could be more effective in this case, but only if the worker could fluently speak the respective language and was knowledgeable about the respective country’s values. This would address language and cultural barriers, and the fear of losing face decreases since the worker is not a part of the community. The question Sinh Nguyen and I had was whether such workers even exist and if so, would they be interested in a position with CFS. From our experiences working in the social service field, these ideal workers immigrant parents described were very rare.

4.4. The Development of the Action Plan

Gaining experiencing in the application of research findings within a social service area was one of my learning goals. To help me achieve this goal, it was planned that I participate in the development of an action plan based on the findings in CFS’s next step in better serving immigrant children and families. However, since project activities significantly involved more work and time than expected, it was decided by my advisor and I that the first meeting held with respect to developing an action plan would be my last research practicum experience. In this first meeting, the study findings were presented to the advisory group and a list of activities to be undertaken next was developed. Hence, I would not be involved in the entire process of developing an action plan to implement the findings. Nevertheless, participating in this meeting with the
advisory group gave me an idea of how findings are applied. This section discusses this meeting and my learnings.

To help me gain a better understanding of developing an action plan based on research findings, a guide similar to Rubin & Rubin’s (1985) four step planning process: defining the problem, agreeing on goals, laying out solutions and determining actions, was used to develop the agenda for this meeting. This section discusses this meeting with the advisory group using Rubin & Rubin’s (1985) process.

4.4.1. Defining the Problem

The meeting began by reminding advisory group members about the problem this study attempted to address. Based on CFS’ background with immigrant groups, the problem defined was that CFS was not effectively serving immigrant families. Reminding advisory group members about the background of the study ensured that members understood why this project was initiated.

4.4.2. Agreeing Upon Goals

After defining the problem, the main goal of the study, to learn ways CFS could better serve immigrant groups, was re-explained to the advisory group members. This section was similar to the previous one, “defining the problem” since the information presented all dealt with why this study was initiated. Nevertheless, both were presented to keep the members and their feedback focused.

4.4.3. Laying Out Solutions
In this step, the advisory group, Sinh Nguyen and I discussed activities to help CFS begin to change their process of serving immigrants. The list included presenting the themes found in the study to the respective policy makers such as the CFS Board of Directors, and to the social service providers themselves (the staff of CFS). Disseminating the study’s findings would help increase awareness of the problems and put forward suggestions for remedying them. A first step might be to implement the recommendations made in the study such as holding orientations and developing and translating brochures since participants said this would prevent situations where CFS has to intervene and would decrease the negative perception immigrant families have about CFS.

Since I will not be involved in the future meetings to further discuss the implementation of the findings, my experience in applying research findings to an agency was minimal. However, with the experience I did have, I learned first hand how complex changing services could be. Sinh Nguyen has been working in social services for over twenty years and from his experience, organizational and program changes take a very long time.

Theoretically, I knew how complicated and long it takes to change or even add social programs but participation and first-hand experience gave me a better understanding of the complexities involved. I felt that the meeting with the advisory group was long and productive. However, this meeting was a very small step towards change. I could only imagine how much work, time and patience would be needed in such an undertaking.
I also understood the rationale behind Rubin & Rubin’s (1986) suggestion to invite all stakeholders to the meetings. Gathering all at once would save time in informing stakeholders such as funders, directors, etc about the BSICF study and the goal of improving CFS services for immigrant groups. Furthermore, the list of activities would be more credible and realistic with other stakeholders’ input and feedback. For example, if funders informed us that CFS could not afford to hire and train new workers, then the action plan could focus on activities around gaining the resources needed to hire and train new workers.

In short, although the list we developed did not contain actual solutions so immigrant families would be better served, this was a step towards it.

4.4.4. Developing the Action Plan

My research practicum ended here, after an action plan was developed. Sinh Nguyen is now responsible for all future activities. Involvement in development of the action plan taught me the value of dissemination in terms of implementing change. It helped increase awareness of what and why something needed to be changed.

The action plan developed included activities that would lead to the development of the larger action plan. This mini or smaller action plan was developed so I could gain some experience. More discussions and consulting with other stakeholders were needed to develop the larger plan. Before presenting the details of the mini action plan developed, it should be mentioned that Sinh Nguyen and I have different responsibilities. As part of his duties for CFS, Sinh Nguyen was responsible for preparing a report to the agency. Since I was a co-investigator of this study, my MSW practicum goals, the
responsibility for preparing this practicum report was mine. The table below presents the action planned including the respective activities to be undertaken by Sinh’s. The rationale behind these actions is further discussed below.

Table E: The Action Plan

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<thead>
<tr>
<th>PLANNED ACTION</th>
<th>ACTIVITIES NEEDED TO BE UNDERTAKEN</th>
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| 1. Present the study to the Board of Directors | - Contact the Chair to discuss plan to present study to Board of Directors  
  
  - Prepare a presentation with an introduction to the study and its importance, the methodology used and the findings. |
| 2. Present the study to staff of CFS | - Submit Sinh Nguyen's report to his supervisor  
  
  - Inform supervisor of the intended meetings to discuss the study and to distribute copies of the report  
  
  - Coordinate a time and date for meeting |

The purpose in presenting the study to the CFS Board of Directors was to make them aware about existing parenting concerns and the recommendations regarding how CFS could help immigrant parents and families. Major organizational change would have to occur from the top which included the Board of Directors. Furthermore, decisions the Board makes affects the entire agency. Hence, their support and interest is essential in terms of achieving BSICF’s main goal of better services.

With respect to presenting the study to CFS staff, this was to help in increasing their awareness of immigrant parenting concerns. In doing so, it was hoped that social service providers become more culturally aware and follow some of the suggestions the
BSICF participants made. For instance, talking slower, using simple words when speaking with a parent whose first language is not English will assist in rapport building and understanding one another. Although major program or organizational change takes time, little things can be done to help improve the services. CFS workers becoming more culturally aware and sensitive are one of these.

4.5. Working with a Co-Investigator

Although working with a co-investigator initially was not one of my research practicum learning goals, it was an area in which I gained experience. One sometimes thinks that the workload involved in conducting a study decreases with an additional investigator. In a sense, this is true since investigators with different expertise can complement each other’s limitations. For example, when an investigator studying immigrant groups using a qualitative approach is an expert in conducting qualitative research has limited knowledge about working with immigrant groups, it would be in the investigator’s best interest if he or she partnered with another researcher/colleague who is knowledgeable about immigrant groups. Nevertheless, challenges arise when teaming up with one or more investigators. In this practicum, I was a co-investigator with Sinh Nguyen. I decided to include a section on working with a co-investigator to discuss the challenges and issues associated with collaboratively conducting this study.

In all projects, our credibility as researchers is at stake. Learning to trusting each other’s skills, knowledge and experience was therefore the first issue faced. Since Sinh Nguyen and I had never worked together, we were unaware of each other’s strengths and weaknesses. Most project activities were undertaken by both of us. However, due to the
amount of work involved in the study, it was more time efficient that we conduct some activities individually. We had to therefore trust each other in fulfilling our assigned responsibilities. For instance, Sinh Nguyen was responsible for translations. I had to trust him to conduct the translations so that the original meanings were maintained. I was responsible for adapting the interviewer training manual so that the training was thorough and effective. Sinh Nguyen had to therefore trust that I would adapt the manual accordingly.

The steps involved in building trust between researchers and between the researchers and the communities were similar. Time, patience, and understanding were needed for each. As the study progressed, I became less hesitant and uncertain with the research activities which were Sinh Nguyen’s responsibility. To use the process in comparing our interview data analysis as an example, I asked Sinh many questions at the start regarding the categories into which he had organized the data. Therefore, in the beginning of the data analysis, there was more time spent together as co-researchers. As the study progressed, I learned to trust Sinh Nguyen’s skills, experience and knowledge and he learned to trust mine. Hence having two co-researchers was more time effective as when we could work more independently as well.

Sinh Nguyen was a CFS employee and I am a graduate student thus making our goals somewhat different. Sinh was more interested in learning about the groups’ recommendations as to how CFS could address child and family concerns. I, on the other hand, was more focused on the research methodology due to my research practicum goal of gaining experience in using a qualitative methodology. This sometimes led to conflicts of interest. For instance, although the study was funded by CFS, I, as a student, was
governed by university policies and guidelines. As a result, certain ethical precautions had to be undertaken such as finding locked filing cabinets to store the data at CFS, creating more work and expense.

Sinh Nguyen and I consulted with knowledgeable and credible third parties for feedback about issues we could not agree on. For instance, earlier in this chapter, in conducting interviews and focus groups, it was noted that Sinh and I consulted with my advisor to help us agree on the major themes of the study. My advisor was also consulted about issues of research methodology. Sinh Nguyen’s supervisor was consulted when questions pertained to CFS, such as budget; and advisory group members were consulted about community issues and questions. This process worked very well since disagreements were always solved thereafter.

Maintaining honest communication prevented conflicts from occurring and it helped build trust and understanding. Sinh Nguyen and I debriefed after every activity. We provided each other feedback and input about activities we undertook. After facilitating the first focus group, Sinh informed me that I sometimes talk too fast and reminded me of the importance of talking slower with immigrant groups. This feedback was helpful in terms of achieving my learning goals which, in this case, was refining my skills in working with immigrant groups.

In sum, being patient and honest, maintaining open and frequent communication, and debriefing often contributed to a good working relationship.

4.6. Conclusion
One of the most important things I learned in this practicum was the necessity of building trust. Trust affected all relationships, between the researchers, participants and community and agency stakeholders. All of these relationships were vital to the success of the study. Trust from the participants was needed in order for them to participate honestly and openly; trusting each other’s skills and work was needed between Sinh Nguyen and I; support and trust provided by the advisory group members also helped keep the project culturally appropriate.

Certain methods could be used as catalysts to help speed up the process of building trust with the respective communities. In this practicum, advisory group members helped gain trust from the communities and they assisted with translations and helped increase the awareness of the study. The also informed us of ways of building rapport with the interviewees.

In short, implementing the research allowed me to strengthen the skills I developed from the New Canadian Children and Youth Study such as interviewer training and supervising. Through hands-on experience, I also gained skills in selecting and training interviewers, supervising interviewers to administer interviews, conducting focus groups with immigrant groups, analyzing qualitative data, developing an action plan, and working with a co-investigator. In addition, my social networks and rapport with immigrant groups has increased. Undertaking this research practicum with CFS has been a beneficial and valuable experience.
CHAPTER FIVE: DISCUSSION

One of the study’s objectives was to learn more about immigrant child and family concerns. In the research, some parenting concerns were identified such as family conflict due to differences in values, confusion over acceptable discipline methods and parental rights. A qualitative approach was used to collect information since the literature reviewed demonstrated that this approach was appropriate with immigrant groups. The study helped CFS better serve immigrant children and families by identifying areas in which they were more likely to require support. Using a qualitative approach helped strengthen the literature reviewed and meet my learning goal of obtaining qualitative research skills.

5.1. The Achievement of the Study Objectives

The objectives of this study were to learn a. the concerns some immigrant groups have in terms of child and family service delivery to them and their families, b. how CFS can address these concerns, and c. how CFS can establish a partnership with immigrant communities. These objectives were achieved. Moreover, there were other findings as well, such as the limited knowledge immigrant parents have about CFS.

Although there were only a small number of families who used the services provided by CFS, they shared some important concerns regarding child and family service delivery. One of these was that CFS services “did not work”. The difference in language and culture limited communication and understanding between service providers and service users. For example, one focus group participant said his child was apprehended under false pretenses. He was accused of abusing his child when his actions
were for the best interests of his child’s future. He emphasized how important his children were to him and that he would never hurt them. The ability of social service providers to understand immigrant parents culturally and verbally is therefore very important.

How CFS could address the concerns identified by participants, whether they had previously used CFS services or not, was also identified in the study. Translating written materials, hiring bilingual workers from their community and training CFS staff about the importance of being culturally sensitive and considerate were recommended. Parents also suggested that workshops be provided teaching workers how to become culturally sensitive and appropriate. Workshops could be developed in partnership with the social service organization and respective community representatives. Attending community events to meet families also helped build trust and “a feeling” for the respective cultural group.

An issue that emerged from some focus groups, particularly the Filipino and Vietnamese ones, was the “fear of losing face”. Immigrant parents noted that they fear to be “gossiped” about in their community preventing them and others from using services available especially if the worker was from their community. However, some participants indicated that parents would see a worker from their community but the worker must be trustworthy (maintain confidentiality) and not judgmental. This was identified as an immigrant parent’s ideal worker emphasizing the importance of trust between the service provider and service user.

The information collected also brought insight to the third research objective, how CFS could establish a partnership with the immigrant community. Reaching out to
immigrant parents informing them about CFS and about what their children learn in school about CFS was recommended. Children are educated in schools about CFS and contacting CFS in the event of abuse, but parents receive no information about the agency or its polices. Training representatives from the community to orient immigrant families about child welfare in Canada and having CFS meet with community leaders to develop programs were also recommended by the parents. In doing so, there is more likelihood that trust would be established and the programs developed would be culturally appropriate and relevant.

Many study participants had no experience with CFS and several had no knowledge about the agency. These parents therefore indicated that they could not answer some of the interview questions especially those bout their concerns with CFS and how CFS could help with these concerns. Nevertheless, immigrant parenting concerns such as cultural and language conflicts, and confusion regarding parental rights were identified by these participants. This information could help CFS better serve these families since the areas they were likely to require support with were identified.

A lack of knowledge about CFS meant that many families were not aware of the services available to them. This was an issue because families who can benefit from such services were not using them. Hence, one of the things learned to serve immigrant children and families was to increase the awareness and knowledge about CFS and the availability of their services. Parents noted that increasing such knowledge would help prevent child and family problems from occurring. They would not have hit their children if they knew it was unacceptable in Canada. Many participants emphasized the importance of prevention. Preventive activities such as orienting new arrivals about CFS
and the rights of children and parents, would help immigrant parents understand the actions undertaken by CFS, decrease the negative perception many families have about CFS and generally improve the relationship between CFS and immigrant parents.

Another possible factor we learned that shed light about the underuse of Child and Family Services, was the negative reputation the agency has in the community. According to community representatives, advisory group members and individual and focus group participants, CFS was seen very negatively in the community. Parents aware of CFS believed it to be an agency which “takes kid away” and “breaks families”. Thus feelings of anxiety, fear and distrust were associated with CFS. In the finding, sub-theme “Second Hand Knowledge”, it was demonstrated that this negative perception was due to the information immigrant parents gain from sources other than CFS. Parents interviewed who had experience with CFS, however, noted that CFS has good intentions. Therefore, the perception some parents who dealt with CFS had was not starkly negative. Hence, increasing first hand knowledge of CFS with immigrant families was recommended to counteract CFS’ negative reputation. This could be done by distributing brochures and pamphlets to immigrant serving agencies, churches, community clubs, restaurants, and other places to which many immigrants go.

In short, the BSICF research project helped us learn about the concerns of immigrant parents, about child and family service delivery to them, about how CFS could address these concerns and how partnerships could be established. Although CFS is going through major organizational changes, the findings of this study could be used to emphasize the value of prevention and the need for culturally appropriate services not just for Aboriginals and Metis but for immigrant groups as well. This study gathered
enough information from the parents who participated about their concerns and how they
could be addressed by CFS. Furthermore, the concerns this study found were similar to
the concerns identified in the consultations held in 1990 and 2001 with immigrant
parents, community representatives and social service providers from different cultural
groups than the five included in this study and living outside Winnipeg West Central
boundaries. These similarities indicate that the same concerns are continuing within most
immigrant groups and in all areas of Winnipeg.

Addressing the concerns found in all the consultations using the recommendations
in this study could be applied by CFS to help them better the immigrant community. CFS
is changing from a private organization to a government department. Both the Board of
Directors and the governance of the agency are being revamped. Since these changes are
currently in progress, it is difficult to predict how CFS and the Community-Based Early
Intervention Program, which initiated this project, will end up. However, major
organizational changes present a great opportunity to incorporate the ideas of the
immigrant community. The plan Sinh Nguyen has to approach the CFS Board of
Directors is a good one. I feel that he should inform the Board members as soon as
possible in order that they acknowledge the immigrant community’s concerns in their
planning to change the structure of the organization.

To end this section, I feel that the interview questions were fine. They seem to
have provided the Community-Based Early Intervention Program with the information
they needed to take action. Later in this chapter, under “Contributions Made to Existing
Literature”, I do discuss some follow-up questions that could have been useful.
5.2. The Evaluation of my Learning Goals

In a practicum, one learns by practicing a skill. The root word in practicum is “practice”. In the 1987 Edition of the Webster Dictionary, page 288, practice is defined as “to study and exercise one’s skill so as to win greater command.” To practice a circus act and to practice a violin were used as examples in the Dictionary. In my case, practicing my skills in research meant to refine and further develop them. Conducting the BSICF study with Sinh Nguyen allowed me to achieve my learning objectives which were to refine my interviewer hiring, training and supervising and networking skills, to develop research skills using a qualitative approach and to learn how research findings could be applied. This research practicum was a success. How I achieved these learning goals was discussed throughout this report. In addition to meeting my research practicum learning objectives, my social networks in the Central American, Filipino, Portuguese, Sudanese and Vietnamese community, as well as my knowledge about these groups increased. My knowledge in effective service delivery with respect to immigrant children and families also increased. For instance, I learned the importance of having bilingual workers. It increases communication and understanding between the worker and service user. I also learned that the fear to lose face prevents some immigrant parents from utilizing services and therefore this fear must be addressed.

To evaluate the achievement of my own learning goals, I received feedback from my co-investigator (Sinh Nguyen), advisor (Esther Blum), interviewers and advisory group members. Unfortunately, no formal feedback forms were used. This is something I should have included in the study. Nevertheless, although informally, my co-investigator and advisor provided me their input on my practicum progress. Based on their opinions
and my own, all of my learning goals were achieved. The goal of gaining experience in applying research findings within an agency was probably the goal least achieved. Refining the skills I gained from my current research work, networking with the community and interviewer hiring, training and supervising, was probably the goal best accomplished.

I met with my co-investigator, Sinh, regularly. We debriefed after each activity undertaken in the study. For example, we would meet twice a week when we were in the midst of recruiting participants. During our meetings, I updated him about the consultations I had in the community and summarized some of the conversations I had with community representatives. He was also in the room with me during some conversations with community contacts. Sinh gave me feedback about how I was doing in terms of reaching my practicum goals. For example, he noted that networking skills came easily to me. The majority of the parents were recruited for the study due to my networking efforts. Data analysis, however, was one area Sinh felt I had challenges. Before I analyzed the interviews, I met with Sinh to review the analysis procedure to be taken. I asked Sinh many questions indicating my lack of skill and confidence. After the first few interviews were analyzed, Sinh and I met to briefly compare our findings. We discovered several differences and so we questioned each other’s process. To help ensure our accuracy in analyzing the data, we also consulted with my advisor. After analyzing a few more interviews, we met again. This time there were rarely any differences suggesting that we were both on track in term of analyzing data. Sinh also mentioned that the questions I asked him decreased as the study progressed. He perceived this to be the result of greater learning and self confidence.
I met with my advisor bi-weekly to update her on the progress of the study. I showed her examples of the work I was doing, for instance, copies of the interview transcripts and my analysis. Her feedback was probably the most useful. Sometimes I felt unsure and hesitant about the way I conducted certain activities such as facilitating the focus group and analyzing the interviews. Her assurance and clarifications helped me feel more secure and confident about my expertise.

The interviewers were aware that I was a graduate student and so I also asked for feedback with respect to how I trained and supervised them. They all indicated that the training was very thorough and helpful. They felt that I was approachable and easily accessible. They also found the feedback or suggestions I shared with them to be useful. Since none of the interviewers indicated their increased skills in the area of probing or paraphrasing, I asked them if they thought the training should have spent more time on these. All of them indicated that it would have been helpful. This makes me question their thoroughness when I initially asked them to evaluate my training and supervision. Formal, more specific and confidential evaluation forms could have been more useful to learn about my competence in training and supervising.

From the conception of my practicum proposal, I kept a journal containing my feelings, experiences, questions and personal evaluations about my practicum. At least once a month I would read my past entries. It amazed me to see how far I had come. In an entry I wrote about two months before the completion of my practicum, I indicated how far away completing and presenting my practicum seemed. I was losing patience. I was always used to being on the go: recruit participants; collect information; analyze data. It has taken me this long to understand the comments Sinh and some of the advisory
members made about seeing me mature and develop in the last year. I learned not to worry so much and to be patient because it does all turn out at the end; this study is an excellent example.

Although I used no formal evaluation tool, I feel that my learning goals were met especially in developing qualitative research skills. I know this because there are some things I would do differently in a similar study due to the experience I gained in this practicum. Firstly, I would spend more time on training interviewers how to probe and paraphrase. I would also pre-test the questionnaire myself with an immigrant parent from my culture. If such a pre-test had been conducted, I would have realized the importance of probing and paraphrasing earlier in the study. This would have resulted in data and perhaps more time allotted to data analysis. Hence, we may not have had to interview as many parents. Although the number of parents interviewed would be lower, the information obtained would be much potentially richer and more informative.

5.3. Study Limitations

Although the findings provided us information about how CFS could provide better services for immigrant groups, they were subject to several limitations. One of the limitations in this study was the sample composition. First generation immigrant parents from the Central American, Filipino, Portuguese, Sudanese and Vietnamese community living in the West Central area were recruited as study participants. Hence, other generations such as second or third generation immigrant parents and other communities and immigrants living outside the West Central area were not represented in the study. As
a result, the research does not include the experiences of immigrants from other ethno-cultural groups, which may or may not be similar.

Another limitation in the study was that the interviews conducted in the respondent’s language were not back translated. The interviewers translated these respective interviews into English since back translations were not undertaken. The quality of the translations was subject to the interviewer’s skill. Sinh and I, however, had confidence in the interviewers’ translation skills. The meaning of the interview questions they translated matched the back translated version indicating that the original translations to be accurate.

Parent recruitment did not include any formal precautions to ensure diverse representation of parents creating another limitation in the study. We did, however, approach different organizations within a community, for example churches of different denominations and religions. We also informed advisory group members of the importance of including parents of different genders, socio-economic status, educational level and length of time in Canada. Due to the university ethics policy, the community-based approach of the study and resource constraints, Sinh and I had no choice but to recruit parents without using any formal precautions.

Another limitation in the study was the interviewers limited skill in probing. This may have lessened the information collected from the parents interviewed. If interviewers were more skilled in probing, more in-depth information would have likely been collected. Hence, this is probably one of the largest limitations in this study since it impacts the data directly. To remedy this in future studies, interviewers selected should be trained or already have more probing skills.
Although this study was successful in answering the questions CFS had, the study was still subject to limitations. If the interviewers were more skilled at probing, I think this would decrease the limitations this study was subjected to. The other limitations such as the composition of the sample and participant recruitment would be a limitation in the study despite any precautions undertaken.

5.4. Contributions Made to Existing Literature and Past Consultations

There were many similarities between the findings of this study and the literature reviewed ranging from issues of immigrant integration and underemployment to qualitative research and research partnerships. The participants in the study and the literature reviewed both demonstrated integration to be a stressful experience. Some of the concerns found in the literature reviewed such as underemployment and conflicting cultural values also concerned the parents involved in the study. The concerns identified in the consultation held in the past by CFS were also found in this study. The findings of this study therefore contribute to existing literature by strengthening and reinforcing it. This section discusses some of the similarities found between our findings, the literature reviewed, and the past projects conducted by CFS with immigrant groups and community representatives. This portion of the report also highlights some of the study’s strengths.

5.4.1. Integration Stress

“Settlement Pressures”, one of the sub-themes of the findings, supported Beiser’s (1997) and Harker’s (2001) conception that integration was a stressful experience due to barriers immigrants face. Participants in this study complained about not finding
affordable childcare having limited support networks, trouble finding jobs, not having their credentials accepted and not learning about Canadian “laws and policies”. All of these were among the integration barriers identified by Beiser (1997) and Harker (2001). Furthermore, several participants indicated that they felt they had “to settle in Canada as soon as possible.” Settlement was usually associated with earning enough money to live comfortably.

The impact settlement pressures have on the health of immigrant parents was not discussed in the interviews and focus groups. However, nonverbal language showed that these pressures were associated with an abundance of stress. For instance, participants raised their voices and frowned when discussing daycare issues. Participants also sighed when talking about limited social networks. There were also much discussion and feedback among focus group participants when the sub-theme, “settlement pressures”, was presented.

Participants shared several ideas to help decrease settlement pressures that were not discussed in the literature reviewed. Childcare was more of an issue for immigrant families who do not have elders living with them or family and relatives in Winnipeg since extended family usually assisted with childcare. For example one parent did not experience any childcare issues because her in-law who was older and retired, was living with the family and cared for the children during the day while she and her spouse were at work.

Childcare was also more of an issue for newer immigrant groups, such as the Sudanese group, and for recent arrivals who have limited networks in Canada. A few parents noted that they did not know where to access affordable childcare. One parent
explained how they have many relatives back home who they could ask to assist them with childcare at a very low cost and sometimes, at no cost. In Canada, they do not have as many relatives and do not know as many people who they can ask to care for their children. The decrease in social networks was a major contributor to the difficulty experienced in having children cared for. This supported Health Canada’s (1999) finding that immigrants usually encounter decreased social networks contributing to integration stress. One Filipino focus group participant immigrated to Canada and knew no one. She shared stories of the hardships and stress she went through “getting used to Canada” such as finding her way around the city and getting a valid driver’s license, alone. She also said having family and friends who were living in Canada would have been helpful.

The similarities found between this study and the studies on integration suggest that the participants of this study have some similar concerns to those identified in the literature. The literature reviewed, however, also indicates that these issues create a gap between mainstream organizations and immigrant groups (Health Canada, 1999; Stevens, 1993). Factors contributing to the stress immigrant parents experience when integrating in Canada is therefore important for CFS to consider since addressing these issues would help close the gap.

5.4.2. Conflicting Cultural Values

The literature reviewed demonstrated immigrants to be underusers of social programs (Baker & Benjamin, 1995; Kincheloe & Steinberg, 1997). In this study, the fear of losing face by using CFS services prevailed among Filipino and Vietnamese focus group participants. The Vietnamese focus group indicated that despite the availability of
services and programs, most parents from their community would not use the services
even if they needed it because they were afraid of their community gossiping about their
problems and incapability of solving them on their own. One participant claimed
Vietnamese parents must overcome these fears and learn how to accept help and support
without losing honour in order to allow CFS to serve them. This shed some light in the
literature reviewed about immigrants underusing social programs. Kirst-Ashman & Hull
(1997) also found that the value of self-sufficiency prevented Asian immigrants from
using social services.

Sinh Nguyen and I asked focus group participants how CFS could get families to
use services which would be of benefit to them. The parents responded with little
information. One parent noted that this process would take a long time and that the
process would be very complex because the fear to lose face was culturally imbedded. A
few parents suggested hiring culturally sensitive and bilingual workers who were
trustworthy in maintaining the confidentiality agreement. An idea Sinh Nguyen and I
suggested for future research was to further explore Asian values which hinder service
use and to determine how services can be delivered so they benefit them.

Differences in cultural values leading to parent and child conflict were evident in
many studies (Isajiw, 1999; Manitoba, Culture, Heritage and Citizenship, 1998; Prostl,
1995 and Stevens, 1993). The sub-theme, “cultural and language differences”, reinforced
some of this literature reviewed. For example, in the BSICF study, parents related that
their children disagreed with them about education, the value of respect and the
importance of being fluent in their native language. Some children do not even speak
their native language causing decreased communication when parents lack English skills.
An interesting finding that supported and added to the literature reviewed was the Portuguese acknowledgement that similar child and family concerns were occurring in Portugal. This implied that child and parent conflict may be more due to generation differences than cultural and identity differences as stated by Isajiw (1999) and in the Manitoba Culture, Heritage and Citizenship (1998) study. Examining child and parent concerns in a family’s respective country of origin and comparing these to the Canadian immigrant experience for this country was a suggestion to shed light on the question of generational vs. cultural conflict.

5.4.3. Underemployment in Immigrant Groups

Health Canada (1999) discussed issues immigrants have with their credentials not being recognized. One of the findings in the sub-theme, “Settlement Pressures”, was how immigrant parents’ job expectations were not met. Study participants complained that their education and experience were not recognized in Canada thus re-enforcing the data in Health Canada’s (1999) study. Although Health Canada (1999) did not discuss the relationship between underemployment and parenting, Sinh Nguyen and I felt that the complaints the participants had about not being able to find a good job was related to Yalnizyan’s (1998) finding that a majority of immigrants work in jobs with irregular hours, lower pay and fewer benefits. Since their credentials were not recognized, immigrants were left with no choice but to take the jobs with less pay, irregular hours, etc. Being employed in such jobs becomes a parenting concern because literature showed that irregular hours were associated with higher job stress and less leisure time with the family.
5.4.4. Qualitative Research and Research Partnerships

The literature reviewed shows that community-based programming was beneficial when working with immigrant groups. This was one of the strengths in the study. Advisory group members and community representatives ensured that the research methods undertaken in the study were culturally appropriate by providing feedback and suggestions. For instance, the input regarding the importance of interviewers having rapport building skills increased the quality of data collected as discussed in the previous chapter. Hence, this study supported Steven’s (1993) and Stringer’s (1996) argument for community-based programming with immigrant groups.

Data from the semi-structured interviews and focus groups highlighted the effectiveness of qualitative research methods with immigrant groups, which was another strength in the study. Bilingual interviewers, translations and open-ended questions ensured cultural sensitivity and appropriateness and helped increase understanding, communication and trust with the participants. In turn, this assisted in maximizing the quality of data. Focus group participants confirmed the themes which emerged from the interviews re-enforcing the accuracy of the findings. The literature on qualitative research, particularly Marshall & White’s (1994) study on bilingual interviews and translations, supported our experience and emphasized the impact that addressing language and cultural barriers can have on the quality of data.

5.4.5. Winnipeg Child and Family Services and Immigrant Groups
This study was successful too in obtaining valuable information regarding immigrant child and family concerns and how CFS could address them. As discussed earlier in this chapter, the consultations held in April 2001, the Multicultural Parenting Education Project and this BSICF study identified similar concerns with respect to CFS. Many immigrant families were not aware of CFS, and the families who knew about the agency had negative perceptions. Despite the information gathered earlier, we still conducted extensive interviews so we could learn the thoughts and views of first generation immigrant parents in more detail. The 1990 Multicultural Education Project involved Laotian, Latin Americans and Vietnamese parents living in the NorthEast area of Winnipeg. The consultations held in April 2001 involved community representatives and social service providers from diverse cultures living in Winnipeg. Nevertheless, similar concerns were identified not with standing that the cultural groups, generations, years and areas the parents were living in differed. In addition, social service providers who worked closely with immigrant groups identified the same concerns.

5.4.6. Summary

All of the above demonstrated connections between the study and the literature reviewed. The following table provides an overview of the similarities between the findings of this study and the literature discussed in the second chapter.

Table F: Literature Review/Past Projects and BSICF’s Findings Similarities

<table>
<thead>
<tr>
<th>Reference</th>
<th>Literature Review</th>
<th>Research Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beiser (1997)</td>
<td>Integration is a stressful experience due to barriers</td>
<td>Settlement pressures exist and are stressful and difficult</td>
</tr>
<tr>
<td>Harker (2001)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kirst-Ashman &amp; Hull</td>
<td>Self-sufficiency values hinder</td>
<td>Fear of losing face in</td>
</tr>
<tr>
<td>(1997)</td>
<td>social service use by Asian groups</td>
<td>Vietnamese and Filipino focus groups inhibit use of CFS</td>
</tr>
<tr>
<td>Health Canada (1999)</td>
<td>Credentials not recognized</td>
<td>Job expectations not met because credentials are not recognized</td>
</tr>
<tr>
<td>Isajiw (1999)</td>
<td>Cultural and linguistic conflicts are common in families.</td>
<td>Differing parent and child values leading to conflict</td>
</tr>
<tr>
<td>Marshall &amp; White (1994)</td>
<td>Bilingual interviewers and translations increase the quality of data.</td>
<td>Bilingual interviewers and translated questionnaires etc. also increased quality of data</td>
</tr>
<tr>
<td>Multicultural Parenting Education Project (1990) April Consultations (2001)</td>
<td>Immigrant families do not trust CFS. Many families do not know about CFS. CFS workers do not understand immigrant families due to language and cultural differences. Immigrant families are not happy with the services provided by CFS.</td>
<td>Lack of knowledge about CFS. Many immigrant parents have a negative perception of CFS. CFS services “do not work”. CFS needs more workers who understand parents verbally and culturally.</td>
</tr>
</tbody>
</table>

The similarities found between the literature reviewed and this study helped increase the importance of our study since existing literature and previous consultations supported our findings. The similarities also suggest that the literature pertaining to immigrant groups is useful. As a whole, there were no additions that this study made to the literature reviewed or the consultations held in the past. Had we acknowledge the literature and past projects when the interview questions were being developed, this might have enabled us to obtain more detailed information from the parents to add to the current knowledge base. For example, interviewed parents could have been asked to provide feedback about the child and family concerns learned from the Multicultural
Parenting Education Project or the consultations held in April 2001. This led to a realization of how I have to learn to trust and use other findings. Nevertheless, this was not my study so I did not make the final decisions regarding the research plan. However, I should have noticed this opportunity to elaborate on current findings, gain new information and informed my co-investigator.

5.5. Conclusion

Despite the limitations, the objectives of this study and my research practicum goals were achieved. CFS gained information in how they can better serve immigrant children and families, and I refined and developed my skills. In addition to these achievements, the knowledge base about immigrant groups was strengthened. The next chapter discusses the lessons I learned in conducting this study.
CHAPTER SIX: LESSONS LEARNED and RECOMMENDATIONS

My intent in sharing the lessons I learned is to assist others in their service development, research and social work education endeavors with immigrant groups. I discuss my suggestions in each of these three areas separately.

6.1. About Practice

The following recommendations are based on this study’s findings pertaining to social service organizations, social workers, and other social service providers serving immigrant groups.

6.1.1. Sensitivity and Acknowledgement of Immigrant Concerns

Immigrant children and parents have concerns that non-immigrant children and families are not likely to experience (cultural and language barriers, underemployment, settlement pressures). Acknowledging these concerns and experiences is important when providing services to them. I strongly recommend that orientations be provided in schools where the parents and children are both invited so they receive the same information about CFS. In addition, parenting classes developed by CFS and a representative from the respective community to educate parents about their rights and culturally appropriate discipline methods could help prevent CFS interventions.

6.1.2. Attention to Linguistic and Cultural Communication

Although most immigrants speak English, they do not know the language well enough to understand a social worker whose first language is English. In this study,
participants indicated that workers should speak slowly using simple words. Providing examples to further clarify sentences was also suggested. Mainstream workers must also become culturally sensitive. This can be done by learning about and respecting the client’s cultural values and beliefs. For instance, a worker telling an immigrant parent who is upset about her child not coming home that he or she is living in Canada now and shouldn’t be so strict, makes them feel like their values are being undermined. Workers need to listen to the parents, help children understand what their parents are going through and assist parents and children in developing a solution together.

6.1.3. **Orientations and Prevention**

Increasing community and immigrant family knowledge about child welfare policies and CFS and its services could be accomplished by distributing translated brochures and other CFS information in places where many immigrants go such as immigrant serving agencies, churches, restaurants, grocery stores, etc. This information can also be given to new arrivals and then followed up at later settlement intervals. Orientations about Child Welfare and CFS policies, discipline and parental and child rights are also suggested. These orientations could be led by community representatives or co-led by a CFS and community representative. The community representatives would have to be trained and oriented by CFS so that they, in turn, can orient others.

6.2. **About Research**

In this section, my recommendations are based on my practicum experience and directed towards other individuals who are interested in conducting research with
immigrant groups. I found research with immigrant groups to be complex due to language and cultural barriers. Careful preparation is therefore needed to ensure that project activities are culturally appropriate and relevant so that quality data is collected.

6.2.1. Involvement of the Community

When conducting research with immigrant groups, the researcher first needs to learn about the respective community to ensure that the research plan is culturally appropriate, relevant and sensitive. Advisory groups made up of community representatives help ensure this. In this study, committee members assisted us by providing feedback about their own groups. For example, they informed us about the importance of interviewers having rapport building skills. They also warned us about the negative reputation families have about CFS and how this might influence the participation and responses.

The advisory group and community representatives are also helpful in participant recruitment. These individuals can help us build rapport and trust, just by association with them. Parents trusted us researchers because people whom they know and respect trusted us. Despite the negative perception some people from the community had about CFS, parents agreed to be interviewees or focus group participants. Hence, involving the community is strongly recommended.

6.2.2. Benefits of Qualitative Research

Qualitative research gathers high-quality data by allowing researchers to explore more in-depth what the target community feels. Response categories are not pre-
determined which is important because it allows respondents to express their own feelings. Literature shows that immigrants are often mis-represented in research studies. Their concerns are often generalized as being similar to the mainstream community when often times they are different. Hence, there is not enough reliable information about immigrants to create pre-determined categories as in quantitative studies, in order for the responses to be valid.

Despite our small sample sizes in each of the communities, recruiting enough immigrant parents was a challenging and time consuming undertaking. Difficulty recruiting participants is therefore important to acknowledge in research because of its effect on the intended sample size. Quantitative studies or survey research usually have many participants included in their sample. Hence, this must also be considered when developing the research plan.

6.2.3. *The Importance of Translations and Back Translations*

Translations and back translations can help ensure that the original meaning of the translated words is maintained. Furthermore, translated written material helps build rapport with the target community by showing that considerations are being made for different linguistic fluency. Written materials in different languages demonstrate that the researchers care and want to make sure that participants understand the material. Studies involving immigrant respondents should consider such undertakings because addressing language barriers help increase the quality of data. Having consent forms available in the respondent’s language is also very important. Ethically, it is wrong to have someone sign a consent form if they do not understand it. Hence, a recommendation is to educate the
University Ethics Committee about the needs to explore ways how ethic policies could be appropriate for immigrant groups.

6.2.4. Preparation in Terms of Time and Funding

Addressing cultural and language barriers such as translations/back translations, hiring and training bilingual interviewers and forming advisory groups is very time consuming and expensive. In this study, building rapport with the community and gaining their trust delayed the original research schedule. In fact, I found networking with the community to be the most time consuming project activity due to follow-up phone calls, waiting for community people’s responses, updating them on the progress of the study, etc. Hence, I recommend that researchers and students partake in a research practicum. This will benefit both parties: students gain hands-on experience in applied research and the researchers receive a research assistant to work with.

6.2.5. Attention to Existing Literature

As discussed at the end of the previous chapter, if the findings from past studies and consultations were used as a guideline in this one, more detailed information could have been collected to elaborate upon what was already known. Hence one of the lessons learned is to pay attention to existing literature and to recognize their findings more by building upon them. This will help build new information to better work with immigrant groups.
6.2.6. The Benefits of Combining Data Collection Tools and Co-investigating

The tools included in this study to gather information about how CFS could better serve immigrant groups complemented one another. A usual disadvantage for the quantitative mindset is the smaller sample size. Focus groups helped augment the quality of information. Hence, I learned the value of combining individual interviews with focus groups together. The quality of the data is increased. Hence I recommend other researchers to combine data collection tools where the strengths or advantages of one tool addresses the weaknesses or disadvantages of another and vice versa.

I also recommend working with a co-investigator especially in qualitative research. Findings based on the efforts of more than one person’s analysis increase its quality. In addition, although I found working with Sinh to be more time consuming, having a co-investigator opened resources for me. Since Sinh has been working in the social service area and with immigrant groups for many years, he knew many people and many people knew him. My association with him helped me build rapport with some of the community representatives I approached for assistance in recruiting families. In addition, the networks I already built in the community outside this study also helped him gain their trust because of his partnership with me. Hence, I recommend co-investigators with different skills and experiences to work together.

6.2.7. The Importance of Piloting

Piloting the interview questions should have been included in our study. Pilots help identify any issues that may occur during interviews. If Sinh and/or I had piloted the interview questions with a first generation immigrant parent from our own culture, we
would have realized how important probing was. This is a reminder for other researchers to pilot your data collection tools.

6.3. About Social Work Education

The following recommendations are for social work educators. Effectively serving immigrant groups can be achieved in many ways. One of the ways is to educate future practitioners, researchers, etc. about the concerns immigrants face and the importance of addressing these concerns in service delivery, program development and research.

6.3.1. Preparation of Students to Work with Diverse Immigrant Groups

Preparing students to work with immigrants from different countries can include offering courses, workshops, readings or lectures on cultural diversity and anti-racism. These will help increase cross-cultural understanding and highlight the need for being culturally sensitive. The participants involved in the BSICF study emphasized the importance of experiential learning and how no one could fully understand another culture. Hence, cultural guidelines and input from the target groups should be considered when developing these courses, workshops, etc. Involving representatives from the community to teach about cultural matters may be more effective.

6.3.2. Knowledge Needed About Immigrant Concerns

The first recommendation cannot occur without this one. To reach out to all groups in Canada’s diverse population one must be creative and often pave new ground.
Hence it is important for educators to update themselves on cross cultural issues and practices. This can be done by attending conferences, reading respective literature, engaging in community activities and undertaking research with immigrant groups. Hiring immigrant students as research assistants and working closely with them can also help educators to understand the benefits and issues involved in working with the immigrant population. For instance, the student can offer valuable feedback regarding their specific immigrant group, a function similar to that which advisory group members provided for the research project. The researcher and assistant may also face cultural differences which can give both the opportunity to experience these issues first-hand.

6.4 Recommendations for Future Research

Most of the questions CFS had were answered. There were several follow-up questions, however, which would have provided them with more information. The following are recommendations for future studies examining how CFS can better serve immigrant groups. It is recommended that interviews or focus groups be held to collect answers to these questions.

- What characteristics should the community representatives assisting with developing and conducting orientations have?
- How else could immigrant parents be encouraged to attend orientations? Two ideas already put forward from our study include making attendance mandatory and warning parents of the extreme consequences of not complying with Canadian child welfare policies.
• What do immigrant parents need to know about child rearing in Canada? These questions would add to the knowledge about how CFS could better serve immigrant groups.

• How can the “fear to lose face” be overcome so that immigrant parents receive the support they need?

• How could university ethics policies be culturally appropriate and relevant?

6.5. Conclusion

There were lessons learned in the achievement of this study’s objectives that apply to social work practice, research and education. My experience in participating in this study gave me a fuller appreciation of these learnings which I will take with me in my future endeavors. In addition, the rapport I have built with the respective communities will be of benefit to me when working with them in the future. This study has given me ideas for future research too. Whether I end up as a researcher, educator or practitioner, or all three, this undertaking will help me better serve immigrant groups.
CHAPTER SEVEN: FINAL COMMENTS

Undertaking this research practicum with Winnipeg Child and Family Services enabled me to achieve my learning goals. In addition to my learning goals, I gained the opportunity to experience working with a co-investigator. This would not have occurred if I was a lone investigator conducting thesis research. Working with an agency also allowed me to become acquainted with organizational policies and build professional networks. In addition, this research practicum helped an existing agency. Due to Sinh’s busy schedule, conducting this study himself would not have been possible without my time and effort.

Completing this report made me reflect on my experiences further. I felt that my knowledge and skill in conducting qualitative research with immigrant groups had definitely improved. In the beginning of the study, I was nervous and unsure about analyzing data since I had no past experience to rely on. I had experience in other project activities therefore I felt more comfortable and confident in undertaking other related tasks. I understood qualitative data analysis theoretically but first-hand experience gave me a fuller understanding. I also learned to value qualitative research. Initially, I felt that findings based on a small number of people were not as useful. However, this study resulted in similar findings with the literature reviewed and the consultations held by CFS in the past. This small group of immigrants could identify how others in their community felt. I would like to end by encouraging others interested in research to undertake a research practicum instead of a thesis. It is a good opportunity to apply your skills and knowledge and to develop new and unexpected ones.
REFERENCES


Winnipeg Child and Family Services
Reaching Out to the Newcomer Children and Families

1. The following questions are about your knowledge of Child and Family Services.

   a. How did you first hear about Child and Family Services? Please check the appropriate boxes.

      [ ] Friends  [ ] Family  [ ] School
      [ ] Social worker  [ ] Church  [ ] Counselor
      [ ] Brochure  [ ] Newspaper  [ ] TV/Radio
      [ ] Community Center  [ ] Doctor/Nurse  [ ] Hospital
      [ ] Neighbor  [ ] Work  [ ] Daycare
      [ ] Other: ____________________________________________________________

   b. Have you ever talked to anyone from Child and Family Services?

      [ ] No  [ ] Yes

   c. Have you ever joined any of Child and Family's programs or meetings?

      [ ] No  [ ] Yes

3. Tell me what you know about Child and Family Services?

   Probes:
   a. Are you happy with (what you know about) Child and Family Services?
   b. Is there anything you dislike (about what you know) about Child and Family Services?
   c. Do you know anyone who knows or uses Child and Family Services?
   d. Would you tell your friends or family to go to Child and Family Services?
   e. Do you have any questions about Child and Family Services?

4. Are there worries or problems that you and your family have that you think Child and Family Services might be able to help you with?

   Probes:
   a. What do you and your family argue about or disagree on?
   b. Is there a different way Canada raises children than in your home country?
   c. Can Child and Family Services help you better if they spoke in your language?
   d. Can Child and Family Services help you better if the person you were speaking to is ___________________?
5. Child and Family Services is interested in working with your community to help them solve problems and worries you and other families may have. Tell us how Child Family Services and the _________________ community work together to help the families that have just arrived in Canada?

Probes:
   a. Do you think it is a good idea for Child and Family Services to work together with the _________________ community?
   b. Would your community like to work with Child and Family Services?
   c. How do you think the _________________ community can help Child and Family Services help you and your family?

6. What would you tell Child and Family Services to get other families from your community to be interested in working with Child and Family Services?
Appendix B

Interview with Newcomer Children and Families
CONSENT FORM

Research Team
Joyce Cabigting, University of Manitoba, MSW Student 944-4129
Sinh Nguyen, Child and Family Services (CFS) 944-4129

The purpose of this study is to identify a. how can Child and Family Services better help you and your family and b. how can Child and Family Services work together with your community. This study is by Winnipeg Child and Family Services and a student from University of Manitoba doing in her Masters in Social Work (MSW).

This interview will take approximately 45 minutes to one hour. The interviewer will ask you questions on your opinion about CFS and how they can help you, your family and other families who have just arrived to Canada. There are no right or wrong answers. The interviewer will write down all your answers on paper and your name will not be on any of the papers. Everything you say is private and confidential. The answers from the interview will only be used for this study. Once we have gathered the ideas from all of the interviews, we will have a discussion group with other parents from your community but no one will know you participated in the interview. All the consent forms and papers with your answers will be kept in a locked filing cabinet at Winnipeg Child and Family Services and will be destroyed after the study is completed and reported.

If you feel uncomfortable answering a question, you do not have to answer it. There will be a question asking you to describe worries and problems you and your family may have. If this question makes you upset, the interviewer will give you some names and places you can go to talk with someone. You can also stop the interview at any time or decide not to continue. The help you might need from Child and Family Services now or in the future will not be affected whether or not you complete this interview.

We hope that your answers will help make Child and Family Services more useful for the immigrant community. You will not receive any money for doing the interview. If you are interested in knowing the final results of the interviews, or if you have any questions, please contact one of the research team members listed above. If you prefer, you can also phone Mallory Neuman, the Supervisor of the Early Prevention Program at CFS at 944-4007, or Professor Esther Blum, my advisor at the University of Manitoba, Faculty of Social Work at 474-8350.

I, ___________________________________, have read and understood the above information and agree to participate in the study.

_________________________________ __________________________
Signature of Participant Date

_________________________________ __________________________
Witness Date
Focus Group with Newcomer Communities
Consent Form

Research Team
Joyce Cabigting, University of Manitoba, MSW Student 944-4129
Sinh Nguyen, Child and Family Services 944-4129

The purpose of this study is to identify a. the views, concerns and issues newcomer children and families have with Child and Family Services (CFS), b. how CFS can address these concerns and issues, and c. how can CFS work in partnership with newcomer children and families. Three interviews were already conducted to help identify these three areas. The purpose of this focus group is to examine the interview results and provide feedback and additional information concerning the three areas. Four other focus groups are being conducted with other communities. The results of this study will be used to develop a plan of action in how CFS can better serve newcomer children and families. This study is being conducted by CFS in partnership with a graduate student from University of Manitoba, faculty of Social Work.

The focus group will take no longer than two hours. The facilitator will first present the interview findings. She will then ask you to provide feedback and additional comments you would like to add in the three areas examined during the interview. Feedback and comments will be recorded on a flip chart. The results will then be analyzed and presented to CFS and the community advisory committee. Your name will be kept anonymous.

Your input and participation is strictly private and confidential. Consent forms and all records will be kept in a lock filing cabinet at CFS. They will be destroyed seven years after the study is completed and reported. If you are interested in obtaining the final results, or if you have any questions, please contact one of the researchers at the number listed above, or Mallory Neuman, Supervisor of the early prevention programs at CFS, at 944-4007.

I, ________________________________ , have read the above information and agree to participate in the focus group.

________________________________________ ______________________
Signature of Participant Date

________________________________________________ __________________________
Signature of Facilitator Date
Better Serving Immigrant Children and Families: 
A Winnipeg Child and Family Services Study

Advisory Group
Terms of Reference

Composition: Representatives from target communities who are knowledgeable about the target communities, CFS and other services for children and family.

Meetings: There will be two to three meetings, which is estimated to last 1 to 1.5 hours.

List of Functions: Below is a list of functions defining the terms of reference for the Advisory Committee.

- Advise on interview process
- Advice on focus group process
- Assist with recruiting immigrant parents from target communities
- Assist with interpretation of findings
- Assist with development of an action plan
- Advise on dissemination of results

Contact Persons:
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521 Tier Building  835 Portage Avenue
University of Manitoba  Child and Family Services
Winnipeg, Manitoba  Winnipeg, Manitoba
R3T 2N2  R3G 0N6
Phone: 474-8350  Phone: 944-4129
Fax: 474-7594  Fax: 944-4250
Email: mj_cabigting@hotmail.com  Email: snguyen@gov.mb.ca
Appendix E

Map of the Winnipeg’s West Central Area
Outline of the Interviewer Training Manual

Section 1: General

1.1 Project Title
1.2 Project Description

Section 2: Building a Good Relationship

2.1 Interviewer/Respondent Inter-Relationship
2.2 Promoting Respondent Receptiveness
2.3 Introductory Interview Techniques
2.4 Minimizing Refusals

Section 3: Conducting the Interview

3.1 The Interview
3.2 Probing for Information
3.3 Keys to Effective Listening

Section 4: Handling Delicate Situations

4.1 Guidelines for Tactful Interviewing

Section 5: Interviewer Safety

5.1 Safety Tips for Managing Personal Safety
5.2 Strategies When Safety is Threatened

Section 6: Procedures for Making Contact with Families

6.1 General Procedures
6.2 Before Going to the Respondent’s Home
6.3 After Visiting the Respondent’s Home

Section 7: Open-Ended Questions