INTRODUCTION

Going to school is usually an exciting, yet, anxious time for most preschool children. Between 5 to 10 percent of children experience extreme anxiety about going to school (Murray, 1996). In these children, it brings dread and panic. They may suffer from a paralyzing fear of leaving the safety of their parents and home. Pilkington and Piersel(1991:290-303) estimated that 80 percent of young children experience difficulties adjusting to elementary school. A general reluctance to go to school is the most frequently cited difficulty. The child may complain of headache, sore throat, stomach-ache, diarrhea and beg to stay at home. If forced to attend school, such children often show shyness, will cry, throw tantrums, withdraw, or cling to their parents as they leave (Felner, 1984:133-169).

Most theories about school phobia emphasize a link with separation anxiety and caregiver-child attachment issues. Most young children who display school phobia seem to panic from the thought of leaving home, rather than actually being in school (Topolski, Hewitt, Eaves, Silberg, Meyer, Rutter, _Pickles, and Emily Simonoff, 1997:15-28). However, some children do fear some aspect of school (Last, Francis, Hersen, Kazdin, & Strauss, 1987:653-657). Pilkington and Piersel (1991:290-303) suggested that school phobia is a normal avoidance reaction to an unpleasant, unsatisfying, or even hostile environment. Most children with school phobia fear some aspect of the school situation, as well as the physical separation from their caregiver and home.

Children who have not attended preschool often find the transition to school very challenging (Cotton and Faires- Conklin, 1989:1-20). Participation in preschool is believed to promote cognitive development and school success. Spence-Boocock (1995:3) wrote that attending preschool helps low-income children to narrow the achievement gap separating them from more advantaged children. Well-designed preschool programs can assist in a child’s emotional development, social skills, and reduce “the inequalities based on racial, ethnic, social class or gender differences.”

The acculturation and assimilation of minority and immigrant children into the U.S. school system is a challenging process. It is important to understand the variety of factors which impact on these children as they try to fit into the mainstream education system. To help minority children succeed in the school setting, an awareness of the unique differences of each culture is important. A review of the hegemony inherent in the dominant U.S. culture reveals some of the barriers that influence the adaptation to school for these minority children. Interventions designed to ease the minority child’s transition to the school environment deserve attention and further development.

ATTACHMENT PATTERNS IN PRESCHOOLERS

Four patterns of attachment have emerged over the years (Bowlby, 1973, Shouldice and Stevenson-Hinde, 1992:331-348):

(1) The Secure Pattern develops over time when the child’s needs are met by a warm, responsive caregiver. The child learns to express needs clearly, confidently, with the expectation that these needs will be met. The child develops a secure self-image and knows that he or she can cope with various situations. This type is the least likely to develop separation anxiety as a preschooler.

(2) The Avoidant Pattern develops when the child’s needs are usually met by rejection from the caregiver. The child learns to suppress basic needs and the emotions that these needs elicit (anger, anxiety, sadness).

(3) The Ambivalent Pattern emerges when the child’s needs are responded to inconsistently by the caregiver. The child learns to over-express needs to attempt to get a response. Such a child
often demonstrates anger, crying, sadness, and separation anxiety. The child has a negative sense of self, feels unable to cope, and may appear helpless at times.

(4) The **Controlling or Disorganized Pattern** develops when the caregiver is unable to provide any parental control for the child, or in some way is frightened by the child or is frightening to the child. The child feels unable to approach the caregiver for support when frightened. The child becomes controlling, or behaves in an illogical, disorganized way with confused, fearful behaviors.

Shouldice & Stevenson-Hinde (1992:331-348) found that children varied on a continuum of feelings of security ranging from too closed (avoidant) to too open (ambivalent). Children who were balanced in their sense of personal security demonstrated a secure pattern of attachment,(Flakierska-Praquin, Lindstrom, and Gillberg, 1997:17-22).

**THE ACCULTURATION AND ASSIMILATION OF MINORITY CHILDREN**

Every child who goes to school must make a transition from home culture, to school culture (Ogbu, 1993:483-506). The transition involves adjusting to new cultural and language behavioral requirements, new social relations, and new styles of thinking. Minority children face compounded challenges as they adapt to the school environment and the mainstream culture.

About one million immigrants move to the United States each year, close to a third illegally. Immigrant children are the fastest growing cohort of the U.S. population under 15 years of age (Lamberg, 1996). Young immigrant children, entering school for the first time, experience added stress as they adjust to a new school, new culture and strange country.

Ogbu (1995b:271-297) identified six kinds of cultural and language challenges that immigrants and other minorities encounter as they begin school: (a) cross-cultural misunderstanding, (b) language and communication barriers, (c) differences in conceptual knowledge, (d) differences in teaching and learning styles, (e)cultural hegemony, and (f) differences in cultural frames of reference.

Acculturation occurs when a person or family from one culture learns the values, skills, and behaviors common to the new culture (Heras & Revilla,1994:129-137). This is often a stressful process for everybody involved. Assimilation or the process of becoming accepted into the host culture without discrimination is also a task for minority children to accomplish (Patel, Power & Bhavnagri, 1996). This usually means that the child has replaced native beliefs, values, and customs with those of the new culture. Many minority children have been socialized to resist assimilation into the dominant "white" culture. This resistance is often interpreted by school officials as disruptive, and indicative of cognitive and affective disturbances. The dominant American culture seems to support the notion that immigrant and minority children do not adjust well to public schools, perform poorly, and drain taxed resources. These children often need to adjust to a hostile, even discriminatory school environment (Ogbu, 1991:433-456).

**CULTURAL DIFFERENCES IN PRESCHOOLERS RESPONSES TO SCHOOL**

Ogbu (1995a:189-205) described culture as a peoples’ way of life. "People behave, think, and feel in ‘cultural worlds,’ and each human population lives in a somewhat different cultural world" (Ogbu, 1995a:192).

Cultures all have a unique frame of reference or ideal way to be or behave. This includes ideal attitudes, beliefs, preferences, practices, and symbols. For instance, mainstream white Americans emphasize competition as a means of climbing the career ladder. Filipinos, on the other hand, use group cooperation to achieve the same goal. Different cultures have various ways to view the world through their system of language, mathematical concepts and customary behaviors. Ogbu (1993:483-506) calls these primary cultural differences. Cultural differences can cause intense challenges when trying to work in the same environment. Primary and secondary cultural differences may contribute to a minority and/or immigrant child’s anxiety about attending school (Ogbu,1993:483-506). Misunderstandings and inappropriate behaviors are common.

Secondary cultural differences arise over time when two or more cultures live side by side (Ogbu, 1993:483-506). Negative cultural differences may occur when one culture becomes subordinate to
another through conquest, colonization, exile, immigration, minority or refugee status, slavery, persecution, social movements, or trading relations. The cultural frame of reference of the subordinate group then becomes not only different from the dominant group: it becomes oppositional to it. If members of the subordinate group choose to cross cultural boundaries or act like members of the dominant group, anxieties occur.

RESPONSES COMMON TO NON-IMMIGRANT CHILDREN

Children from all cultures experience anxious symptoms as they begin school. Rogeness, Cepeda, Macedo, Fischer, and Harris (1990:199-206) found that children with separation anxiety had higher heart rates and blood pressure than children without anxiety. Mainstream children with school phobia came from families with a higher incidence of neurosis, had not separated from their parents much in infancy and early childhood, and seemed passive, dependent, and over-protected, (Blagg, 1987; Kahn, Nursten, and Carroll, 1981; Last, et al, 1987:653-657). These children were mostly female, and from families of low socio-economic status.

Separation anxiety in non-immigrant minority children, such as Native American children, is often linked with the cultural socialization given by parents or other social agents. An African American or Native American child may have been taught to regard white people as "the enemy." Since most public schools are founded and maintained by white, mainstream members, the prospect of attending may be too overwhelming for some minority children. African American children are taught that "acting white" means that they are trying to disassociate from their race. An oppositional identity pattern still exists, especially in low-income black neighborhoods (Ogbu, 1992:355-383). The preschoolers are pressured from two distinct sources. The school expects acculturation to the school culture. The birth culture expects loyalty to its cultural frame of reference. Pulled in two directions, many minority children become school phobic.

AFRICAN AMERICANS

Black American children may experience anxiety, fear, ambivalence and/or affective dissonance about going to school (Fordham and Ogbu, 1986:176-206). Often, they view attending school as "being white," and a threat to their cultural identity. "Black Americans, in particular, have witnessed many events in their history that have left them with the feeling that they simply cannot trust white Americans and their institutions" (Ogbu, 1990:49). Trust in the schools and school personnel is important for a minority child's healthy adjustment to school. Half of African American children live in families with incomes below the poverty line (Lubeck, 1994:153-172). Many of these children have uneducated parents. Minority parents may well feel alienated from the school system (Calabrese, 1990:148-154). Calabrese summarized that minority parents felt strong concern for their children’s education, but did not feel comfortable or welcome in the school system. They felt the schools offered little hope to them or their children. School officials only contacted the parents to report negative occurrences, and projected low expectations for the child’s school success. Witherspoon (1987:155-161) argued that schools, the primary instrument of cultural assimilation, failed to meet the needs of most minorities, especially urban black children.

Teachers of African American students have complained that they are too loud, disrupt everything, do not try in school, and are never on time (West, 1986:175-181). Ogbu(1993:483-506) described different behaviors and attitudes that black children avoid because these behaviors are considered to be "white." These behaviors ranged from speaking standard English to being on time. African American preschoolers usually speak in a nonstandard English vernacular, that is frowned upon in school but supported in the black community (Craig and Washington, 1994:181-190). The black culture has adapted to American culture by adopting coping strategies for survival in a dominant white society. "They have long learned that one key to survival and self-betterment ... is through favoritism, not merit. They also learned that the way to solicit favoritism is to be dependent, compliant, and manipulative" (Ogbu, 1991:439). African American children's behavior at school often included high absenteeism, reluctance to do classwork when present, and disruptive behaviors in the classroom. He summarized that black parents seemed to be teaching their children ambivalent and contradictory beliefs and attitudes.
Native American preschoolers have similar challenges to their school adjustment in mainstream schools (Robinson-Zanartu and Majel-Dixon, 1996:33-54). Native children are often characterized by lack of class participation and with a lag in English language development, (Arbess, 1981:1-15). American Indian parent involvement with public education system is historically low. Yet, Native parents voiced deep concern for their children’s education, and wanted to be involved. "The American Indian cultures are not cultures of apathy. ‘I am important in the education of my child’ was the single most consistent statement of agreement" (page 47).

Native children are traditionally taught from an early age to learn by patient observation, not to talk to adults in new situations unless spoken to, and to assume that people in positions of power are meant to anticipate the needs of dependent people (McLaughlin, 1994:47-59). Native preschoolers do not demonstrate the same level of social skills as white preschoolers (Powless and Elliott, 1993:293-307). Assertiveness, joining in discussions, and cooperation were less visible to teachers and parents of these Native children. Native children with school phobia would appear quiet and withdrawn, and refrain from participating in classroom activities. Not talking, or choosing words wisely is valued in most Native cultures. Powless and Elliott described one young girl who clutched at her mother’s skirt, as she tried not to cry.

Child rearing in Native communities is often labeled as permissive by other cultures. Children are allowed to explore their environment with few boundaries (Arbess, 1981:1-15). Classroom confinement could seem very foreign to a young Native American child. A diagnosis of withdrawal and aimlessness could be hastily made, without considering cultural norms (Robinson-Zanartu and Majel-Dixon, 1996:33-54). Native children tend to be strong visual-spatial and kinesthetic learners at school-entry age, but less developed verbally. Teachers need to make minority parents feel at home in the school. This will help the child adjust more easily, and reduce behavioral problems such as separation anxiety, aggression, and withdrawal (Dixon and Fraser, 1986:272-275).

Responses common to immigrant children

Immigrant minorities have moved to the U.S. more or less voluntarily. They initially occupy the lowest rung on the occupational ladder, lack political power, and have low prestige (Ogbu, 1993:483-506). Often, they find their menial position to be much better than what they would have "back home." Their reference group is their own peers back in their "homeland" or in immigrant neighborhoods. These groups tend to trust dominant group members more than other minority groups do, or at least acquiesce in their relationship with them.

Immigrant children must adjust to new values, norms, and patterns of interactions that may conflict with their initial patterns of socialization. They are told by their parents to learn the English language and the cultural behaviors required at school in their new country. Often, immigrant children must deal with feelings of isolation, discrimination, and low self-esteem as well as the desire to remain in the safe confines of the home. Often, these children will demonstrate behaviors common to depressive states, coupled with anxiety as they enter school (Ogbu, 1995a:189-205).

Phillips (1978) found that almost 50 percent of Mexican, Black, and Anglo-American children tested showed stress symptoms in relation to academic achievement and school relations. Variables that increased stress in these children included not feeling liked by classmates, not getting along with their teacher, or being made fun of. Poverty, language barriers, and cultural isolation affect many minority children, including immigrants (Hernandez, 1995:1-14).

Hispanic children: Mexican & Cuban

About 41 percent of the immigrants in the U.S. are from Latin America. Many live in poverty, have little education, no health insurance, and are at high risk for health problems (Lamberg, 1996). Few quality preschool programs are available in Latin America. Most Latino immigrant children enter school for the first time into elementary school (Spence-Boocock, 1995).
Mexican immigrant children are taught to respect their elders, work for collectivity, and promote interdependence and family unity (Delgado-Gaitan, 1993:409-427). Parental authority enforces a distance, children are not allowed to speak during adult conversations. An authoritarian way of parenting is common. By the time they are seven years old, working-class immigrant children are expected to assume a great deal of responsibility for the good of the family. Parents want their children to become respectful and cooperative people. During the preschool years, parents are able to exert a strong influence on their children. As their children enter school, parents may fear that their children will become too Americanized and lose their native language and culture.

Any dishonor or shame that may occur for one member is considered a reflection on the entire family. Hispanic families often value stoicism and self-control. Children may internalize this pressure to maintain the family honor, and repress their feelings and fears by withdrawal and shyness.

**ASIAN CHILDREN**

East Asia and the Pacific Rim have some of the world’s most developed nations, educationally and economically (Spence-Boocock, 1995:1-23). In Japan, Singapore, South Korea, Hong Kong and Taiwan, most children attend preschool by age three. The Chinese place great value on education. Early childhood education is viewed as an important step in assuring academic success, and to develop sharing and cooperation. Japanese parents send their children to preschool to "facilitate the development of group-oriented, outward-facing sense of self" (Spence-Boocock,1995:17). The preschool focus is on education, while free play is frowned upon.

Asian parents do not usually communicate praise verbally, but do voice their confidence in their children’s abilities by expressing higher expectations. Asian children who do not feel they are able to perform well academically, may internalize feelings that they are not "good enough." These feelings can add to their anxiety about school and the new culture.

Asian children are usually raised in an authoritative way, with the father often making most of the family decisions. Education is highly valued, and children are pressured to perform from an early age. Limited expression of emotion is encouraged, which may promote shyness and withdrawal in Asian preschoolers with separation anxiety.

Ogbu (1995b:271-297) described the usual behavior of immigrant Chinese parents to not get involved in their child’s school activities. School personnel often interpret this as apparent lack of interest in the child’s education. In their homeland, parent involvement is not expected or encouraged. Teachers are seen as the educational experts, and it is not appropriate in Asia to question educational practices. Chinese parents do however expect their children to work hard, learn to speak, read, and write English and fit in with American culture. Cultural and language differences are viewed as barriers to overcome, and they guide their children to effectively cross these cultural boundaries. Most Asian immigrants truly want to achieve the goals of emigration. A child may be told to repress honest feelings of being different, in favor of adopting the majority culture’s ways. "They perceive the need to learn to behave like mainstream white Americans at school and work in order to achieve the goals for which they came to the United States" (Ogbu,1995b:285). Many Chinese immigrants manage to live in two separate institutional worlds, in adapted indigenous Chinese institutions (after-school cultural schools and lessons, ethnic temples, medicine, media), and in white-controlled mainstream institutions (public school, political system, business world).

Filipino-Americans are currently one of the largest Asian subgroups in the U.S. Filipino parents raise their children to be dependent, in need of social approval. The interests of the individual are secondary to the interests of the family (Heras and Revilla, 1994:129-137). Families tend to encourage dependency and frown on assertiveness in a child (Wladis-Hoffman,1988:99-122).

**ASIAN INDIAN CHILDREN**

In India, only 50 percent of the children enrolled in school complete their first year (Spence-Boocock, 1995:1-23). Child labor and the inequality of female children are two factors influencing school attendance. Education at all levels, including preschool, is a critical challenge in India. Even
with intensive program planning, such as the government initiatives, only about 12 percent of India’s children benefit from early childhood assistance.

Punjabi Indians speak Punjabi, have arranged marriages, practice the Sikh, Hindu, or Muslim religion and males wear turbans. They still retain these behaviors but also try to learn some aspects of North American culture and to speak English. Punjabi parents tend to teach their children that they are guests in a foreign land, and must tolerate any prejudice (Ogbu, 1993:406). They place the responsibility of doing well in school on the children themselves. Punjabis rarely blame the educational system for the child’s difficulties. Children are taught to do their best and to hold themselves accountable for their failures. This in itself, can cause anxiety behaviors in children.

A strict hierarchy exists in Indian families. Children tend to bond closely with their mothers, who concede to the decisions of their husbands. Often, marriages are arranged as a financial and social contract between two families. The extended family is important to Indians, and often live within the same household. Individualism is not the traditional norm in this culture.

EUROPEAN CHILDREN: RUSSIANS

In the early ’90s a new wave of Russian immigrants moved to the U.S. These people are very family oriented, and often live with extended family members. Education, family, and cultural activities are values which are passed onto children from an early age (West, 1986:175-181).

Russian Americans are hard working and have little tolerance for people who do not embrace this value. They tend to be self-reliant and independent. Men are the key decision-makers in the home, while women often suffer from low self-esteem. This may contribute to feelings of separation anxiety in both children and mothers, as school starts. Also, many Russian Americans report feeling displaced and isolated in the U.S. Russian women may substitute their children for nonexistent friends, which further impacts on healthy attachment-separation behaviors in their children.

INTERVENTIONS TO HELP MINORITY CHILDREN

Before a plan of treatment can be established, it is important to carefully assess the child’s patterns of behavior and the circumstances that trigger these behaviors (Phelps, Cox, and Bajorek, 1992:384-394). These authors reported no significant differences in behaviors based on gender, race, or socio-economic status. Immigrant children however, are adapting to a strange, new culture, which could influence their behaviors of avoidance and withdrawal. This difference would not be due to ethnic background, but linked to the acculturation process itself. When a child demonstrates a reluctance to be separated from parents in a variety of situations, a definite diagnosis of separation anxiety can be made. If the child reserves reluctance for the school situation, true school phobia is a more accurate diagnosis. "The focus of treatment for school phobia is enablement of the child to confront and deal with the school situation; the focus of treatment for separation anxiety is enablement of the child to separate from the attachment figure and increase independent behavior" (page 391).

Interviewing young children poses difficulties in assessment. Young children, under six years of age, often express their fears through crying or other observable actions. It is challenging to elicit verbal information about fears from this age group. If the minority child does not speak English well, an interview would likely be refused.

The most common treatment for school phobia is to return the child to school, by force if necessary (Blagg, 1987). This treatment method is called a flooding technique, requiring the child to move immediately into the feared situation and remain there. This method of intervention is hard on any child, but particularly so for the minority and immigrant child. Native Americans were forced into residential schools in the first half of this century. They were stripped of their culture, and forced to live like "white folk" (Ogbu, 1991:433-456). Memories of this process have been passed on to further generations. Forcing an Indian child to attend school could be met with extreme resistance from the child’s family.
The magnified effect of being in a strange country, belonging to a minority sector of the population, possible discriminatory influences, and the transition to school life can be extremely overwhelming to these immigrant children. Immigrant children would respond much more favorably to a gradual, paced initiation to the feared environment. Knox (1989) describes how 49 students who had been forced into school later exhibited definite limitations in development and muted achievement behaviors.

Modeling techniques have been used successfully to help young minority children overcome separation anxiety and school phobia (Phelps, Cox, and Bajorek, 1992:384-394). By watching another minority child deal with the school situation either in person or on film, the child may gradually develop some confidence in attempting to do the same. Culturally specific models could prove helpful to minority and immigrant children. Participant modeling, where the child moves through the adaptation phases of school acceptance, guided by a therapist, has proven to be the most effective modeling treatment for school-related anxieties. Modeling also works well for children with separation anxiety. The modeling of independent behavior in a variety of settings, would be included in the treatment, (Aliotti, 1992:272-287).

A variety of cognitive-behavioral techniques have been used for separation anxiety and school phobia (Flakierska- Praquin,1997:17-22). These treatments are based on the premise that behavior will change when beliefs and perceptions about separation and school have been altered. Using cognitive restructuring, the child learns to substitute adaptive thoughts about school for maladaptive ones. Combined with social skills strategies, and a multi-cultural classroom focus, this method of treatment could help minority students to deal with their fear as well as adapt to the school culture. For separation anxiety, cognitive- behavioral approaches could include statements about the child’s ability to act independently, yet still maintain a sense of cultural identity.

Behavioral therapy shows promise, as well. A family-school behavior treatment model has been used to successfully help non- immigrant children to adjust to school, after five weeks of treatment(Hamilton,1994:149-152). This is accomplished by increasing the child’s ability to confront and cope with the feared stimulus (Phelps, Cox, and Bajorek, 1992:384-394). If combined with empowerment strategies to help minority children to feel some positivity about themselves, perhaps the children could come to enjoy going to school. It is important to work directly with the family, in a caring and positive way (Dixon and Fraser, 1986). Teachers from a child’s own ethnic group have helped shy, withdrawn children learn to participate and freely express themselves in class (Arbess, 1981:1-15).

CONCLUSION

Children from many cultures exhibit symptoms of school phobia and separation anxiety. A variety of theories indicate that the root of this problem is usually the degree of attachment and separation developed between the child and their parents. True fear of school is demonstrated in some cases.

Immigrant and other minority children are more likely to combine fear of school in a new culture, with a disturbed attachment pattern at home. Interventions are needed to successfully treat all children with schoolphobia. Intense interventions are necessary to help immigrant children to not only adapt to school, but fit into a strange new culture. More research is needed to discover sound ways to ease the immigrant child’s fears and to comfortably integrate into the educational system.

U.S. mainstream society and the public school system contribute to the low cognitive and academic performance of minorities. Minority children are not expected to perform at the same level as Euro- Americans. They interpret rules and practices in school differently than whites do, and they view classroom subjects as impositions that do not necessarily meet their educational needs. It is harder for parents of minority children to accept, internalize, and follow the public school rules. Movements toward creating multicultural classrooms are occurring in many U.S. schools, which may help ease minority and immigrant children into the public school system.

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