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The Relations between Sleeping Arrangements, and Cultural Values and
Beliefs in First Generation Chinese Immigrants in Canada

by

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Department of Psychology

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DEDICATION

To my parents, my husband and my children

ABSTRACT

The purpose of this study was to examine the relations between cultural values, social norms, and beliefs related to co-sleeping with the sleeping arrangements of first generation Chinese immigrants in Canada. The participants were 162 first generation Chinese immigrants from four Canadian cities who had children ranging from 2 months to 71 months ($M = 37.9$, $SD = 18.06$). Participants completed a questionnaire measuring their cultural values and beliefs, value of parenting roles and family, value of romantic relationships, and beliefs of sleeping arrangements. Parents indicated their sleeping arrangements (i.e. where child slept and with whom the child slept). Participants were also asked to draw a picture of their bedroom(s) which indicated the location of the child's and/or parent's bed, and the distance between the two beds. Results indicated that 77% Chinese parents in this study co-slept with their pre-school aged child, whereas only 23% parents let their child sleep in their own bedroom. Among the co-sleepers, half of the children slept in their parent's bed, and half of them slept in their own bed, which was either attached to the parent's bed or separated from the parent's bed. The mean distance between the parents' bed and the child's bed was 21.15cm ($SD = 42.74$) for co-sleeping families, and 502.8 cm ($SD = 188.69$) for solitary sleeping families.

Using stepwise regression analysis, the relations between demographic factor, space availability, values, norms, and beliefs, on the one hand, and sleeping arrangements, on the other, were examined. Personal beliefs about sleeping arrangements, including cultural beliefs of independence and interdependence, beliefs of marital quality, and beliefs of solitary sleeping, influence sleeping arrangements. Parents' length of residency in Canada, child's age, and bedroom numbers also influence sleeping arrangements. The findings have important implications for researchers and health professionals in terms of sleeping arrangements in the larger socio-cultural context.

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CHAPTER 1 INTRODUCTION

Background

Sleeping arrangements between parents and their young child has become a popular topic in the past few decades. The question of “who sleeps by whom” has received attention in different areas such as sociology, anthropology, psychology, and health and medicine (Caudill & Plath, 1966; Mead, 1949; McKenna, 1996; Shweder, Jensen, & Goldstein, 1995).

Children’s sleeping arrangements are decided by caregivers who consider all aspects relevant to sleeping, such as place, time or sleeping position. Most importantly, when sleeping practices is considered in a specific culture, cultural influences need to be taken into account. Most cross-cultural research on sleeping practices focus on descriptions of the cross-cultural differences in sleeping arrangements, the advantages of co-sleeping, and the disadvantages of co-sleeping (Lozoff, Wolf, & Davis, 1984; Jorch & Schleimer, 1998). Few studies have explored whether co-sleeping is a choice based on cultural values and beliefs. The current study focuses on this issue by examining the sleeping arrangements of first generation Chinese immigrants in Canada. Immigrants are exposed to at least two different cultures: the host culture and their home culture, as a result, their behaviors may be influenced by two different cultures. By looking at potential factors that might influence

Chinese immigrants' choice of sleeping arrangements with their young child, we may find an answer to the question "is sleeping arrangement a choice based on cultural values and beliefs?"

Sleeping Arrangements

There are two different types of sleeping arrangements: co-sleeping and solitary sleeping. Co-sleeping generally refers to parents sleeping with their young child in the same space. Solitary sleeping refers to a child who sleeps alone in his/her bedroom at a very young age or even since he/she was born. Solitary sleeping is popular in North American, whereas co-sleeping is practiced predominately in Asian countries (e.g., McKenna, 1993; Small, 1998). Welles-Nystrom (2005) proposed four types of sleeping arrangements. If a child sleeps with his/her parents in the same sleeping space all the time, it is called full co-sleeping. If the child sleeps with his/her parents some of the time, it is considered partial co-sleeping. If the child does not share a sleeping space with his/her parents, the sleeping arrangement is called no co-sleeping. No co-sleeping is similar to solitary sleeping in other studies (Rothrauff & Middlemiss, 2004). Welles-Nystrom proposed an additional type of sleeping arrangement called night wandering, an activity in which the parent or child changes from one bedroom to another during the night.

Co-sleeping

Co-sleeping has various definitions in different studies. Most studies operationally define co-sleeping based on the following questions: where do family members sleep, how often do they co-sleep, when do they start to co-sleep, and why. Co-sleeping usually follows two patterns: adults and the child sharing a bed, or the child sleeps in his/her own bed/crib with parents sleeping in the same bedroom. Sometimes, co-sleeping also includes the sleeping arrangements with other family members (e.g., siblings, grandparents) or caregivers (e.g., live-in babysitter). How often parents or other adults co-sleep with the child is also important in determining if a sleeping arrangement is co-sleeping. If parents share a sleeping space with their child every day or on a regular basis, it is usually considered co-sleeping.

Co-sleeping is not a unitary construct (McKenna, 2000). Mandansky and Edelbrock (1990) distinguished two different patterns of co-sleeping. According to Mandansky and Edelbrock (1990), reactive co-sleeping is a pattern of co-sleeping when some parents sleep with their children in reacting to child's sleeping problems which is considered more dominant among North American parents. Reactive co-sleeping often occurs during toddler years when children are old enough to express their will. Parents often show unsatisfactory feelings toward their sleeping arrangements (Ramos, 2003). Non-reactive or

intentional co-sleeping, by contrast, is initiated by parents at an early age, even from birth. Intentional co-sleeping is more related to personal or cultural reasons compared to reactive co-sleeping (Mandansky & Edelbrock, 1990). Reactive co-sleeping parents differ from intentional co-sleeping parents in terms of their beliefs and acceptance of co-sleeping (Ramos, 2003). Intentional co-sleeping parents usually show greater satisfaction with their sleeping arrangements than reactive co-sleeping parents.

Co-sleeping is a common practice in non-Western countries (McKenna, 1993; Morelli, Rogoff, Oppenheim, & Goldsmith, 1992; Small, 1998; Welles-Nystrom, 2005). However, studies have found that parents in some European countries also choose to co-sleep with their young child. For example, one study showed that most Swedish children (72%) co-slept with their parents (Welles-Nystrom, 2005). Most Swedish parents tend to agree with the following beliefs: (1) a child needs a safe place to develop; (2) co-sleeping is normal; (3) a child is considered an individual with certain rights.

Solitary Sleeping

Solitary sleeping refers to a sleeping arrangement in which a child sleeps alone in his/her own bedroom. In North America, most children sleep in their own bedrooms after 3-6 months of age (Morelli, et al. 1992). In some

cases, the child returns to co-sleeping with his/her parents after a period of solitary sleeping (Germo, Chang, Keller, & Goldberg, 2007).

In North America, many medical doctors, especially pediatricians suggest that parents have their young child sleep in a separate bed to prevent Sudden Infant Death Syndrome (SIDS) (Alexander & Radisch, 2005). North American parents also choose solitary sleeping based on their emphasis on independence (Morelli, et al. 1992).

Controversy about Co-sleeping

People have different views about co-sleeping. On the one side, people who support co-sleeping believe that it benefits both children and parents. Parents can get a good night sleep by co-sleeping with young child (Sears & Sears, 1993). Co-sleeping is also considered a method to promote breastfeeding by increasing breastfeeding frequency and duration (Ball, Hooker, & Kelley, 1999; Stein, Colarusso, McKenna, & Powers, 1997). Co-sleeping has been associated with healthy child development, including better health and confidence (Caudill & Plath, 1966; Morelli et al, 1992). On the other hand, people who support solitary sleeping believe infant stress is associated with co-sleeping. Subsequent negative effects are also expected on infant's development (Hunsely & Thoman, 2002; Spock & Rothenberg, 1992). Other criticisms about co-sleeping include the possibility of raising more sleeping

problems (e.g., bedtime struggles), safety consideration, and night waking (Lozoff et al., 1984; Madansky & Edelbrock, 1990). However, Keller and Goldberg (2004) challenged the claim that co-sleeping is associated with sleep problems such as night waking. They found that night waking was viewed as a sleeping problem only by reactive co-sleepers but not by intentional co-sleepers.

Medical doctors believe that co-sleeping increases the risk of smothering and Sudden Infant Death Syndrome (SIDS) (Alexander & Radisch, 2005). However, other researchers argue that co-sleeping could decrease the risk of Sudden Infant Death Syndrome (SIDS) (McKenna, Mosko, & Richard, 1997). Studies show that room sharing was not related to SIDS, but solitary sleeping and unsafe bed-sharing increases the risk of SIDS (Blair et al. CESDI SUDI Research group, 1999).

The second controversy about co-sleeping focuses on the topic of children's independence which is related to cultural values and will be discussed in detail in the following section.

Culture and Sleeping Arrangements

Childrearing values and practices including sleeping practice between parents and child, sleeping behaviors, and potential problems are shaped by parental beliefs and cultural values. Parents' cultural values and beliefs may

play an important role in choosing sleeping arrangements. Emphasis on independence and interdependence might be the most important factor when discussing sleeping arrangements in the context of culture. For immigrants, the interaction between sleeping arrangements and acculturation also needs to be addressed. Finally, social norms alone may influence the choice of sleeping arrangements or alongside with other cultural values or beliefs. In the following section, the above factors will be discussed in detail.

Independence and Interdependence

Independent self-construal is defined as a bounded, unitary, and stable self that is unrelated to the social context (Markus and Kitayama, 1991). It comes from a belief about uniqueness (e.g., Johnson, 1985). Interdependent self-construal is defined as a flexible and variable self that is intertwined with others of the same group or society. People with interdependent self-construal define themselves connected to the social context and other members in society. People with interdependent self-construal are more likely to focus on the connections with other, sense of belonging, and to maintain harmony with social context (Markus & Kitayama, 1991; Singelis, 1994). It has been suggested that general parental belief systems are shaped by cultural values. Whereas parents in small-scale and other non-Western cultures use close body contact and effective tuning to promote more social sensitivity and group

oriented tendencies in rearing their child, western parents try to promote independence and autonomy of their child (Wolf, Lozoff, Latz, & Paludetto, 1996).

With respect to the types of sleeping arrangements, co-sleeping is not common among middle- to upper-class U.S. families (Lozoff et al., 1984; Mandansky & Edelbrock, 1990, Keller, 2008). The independence of their children has been a major consideration for many middle-class U.S. parents who choose solitary sleeping. They believe that co-sleeping fosters children's dependence on the parents (Brazelton, 1990; Ferber, 1986; Morelli, et al. 1992; Stein et al., 2001). Morelli et al. (1992) interviewed 18 Caucasian middle-class U. S. families and found that 58% of families let their babies sleep in a separate room at the age of three months. By six months, 80% of families let their babies sleep in a separate room from their parents. More than two third of families (69%) reported that promoting their child's development of independence and self-reliance as the reason for letting their babies sleep alone. One study has shown that sleeping in a separate room is helpful in attaining this goal (Morelli, et al. 1992). Parents who believe solitary sleeping is helpful in children's development of independence also tend to believe that if independence is achieved in the domain of sleep, children will also be

independent in other domains related to children's development (Keller & Goldberg, 2004).

Contrary to the popular belief that co-sleeping fosters children's dependency on parents, researchers found that co-sleeping might actually promote independence. One study found that co-sleeping children were more self-reliant (e.g., able to dress oneself) and socially independent (e.g., make friends by themselves) during preschool (Keller & Goldberg, 2004). Sleeping in close proximity to the mother promotes mother-infant attachment and a sense of independence and security in children (Jackson, 1999; McKenna, 1996; Sears & Sears, 1993; Sears, 1999; Stein et al. 1997). According to attachment theory, secure infant-parent attachment and emotional security at an early age helps to develop a child's independence later in life (Ainsworth, Blehar, Waters, & Walls, 1978; Bowlby, 1969).

Some Western parents (e.g., Sweden) believe that co-sleeping can enhance children's autonomy and security rather than negatively affect them (Welles-Nystrom, 2005). One study found that co-sleeping mothers were more likely to support their children's autonomy (Keller & Goldberg, 2004). This is different from the common belief that co-sleeping may cause children to be overly dependent on parents. According to Brazelton (1992), being independent during the daytime could be a compensation of dependence in the evening.

Keller and Goldberg proposed that co-sleeping parents may offer other opportunities to exercise their children's independence in areas besides sleeping routines. Thus, the relation between "sleep arrangements, parenting values and styles, childrearing practices, and parent's goals for their children" (Keller & Goldberg, 2004, p. 383) need to be further studied.

There is little empirical data to support that solitary sleeping is linked with children's independence and co-sleeping is linked with children's dependence. The meaning of independence is also questionable (Keller & Goldberg, 2004). Most studies concerning the relationship between sleeping arrangements and independence/dependence have focused on the development of the child and most studies were conducted among Caucasian families. Few studies have explored the relationship of independence/interdependence in sleeping arrangements within a cultural context. Little is known about how Asian parents, who have different expectations about interpersonal relationships among family members, view the relationship between sleeping arrangements and interpersonal relationships. Asians, compared to Westerners, are argued to be group-oriented and sensitive to social relations (Keller, 1997). Even the most modernized Chinese people still behave in accordance with social norms and expectations of others in the social context (Yang, 1981b). This study will investigate how Chinese immigrants view interdependence

within a Western setting, and how this view in turn influences their sleeping arrangements.

Social Norms

Social norms are considered important factors in understanding human social behaviors (Fishbein & Ajzen, 1975; Staub, 1972; Triandis, 1977).

Cialdini, Reno and Kallgren distinguished two types of social norms:

descriptive norms and injunctive norms (Cialdini, Reno, & Kallgren, 1990;

Cialdini, Kallgren, & Reno, 1991). Descriptive norms help people understand

what is usually considered an adaptive behavior in that situation. Injunctive

norms refer to what people approve or disapprove within culture and social

context. One study showed that American parents who practice co-sleeping are

often considered people who are violating cultural norms (Hanks & Rebelsky,

1977). However, it is not clear how social norms influence the decision of

sleeping arrangements of Chinese immigrants. Do they follow their own

Chinese norms or Canadian norms? This study will explore how descriptive

social norms play a role in the sleeping arrangement of Chinese immigrants.

Acculturation

Although several cross-cultural studies have been carried out comparing the sleeping arrangements of families in industrialized and non-industrialized countries (Super & Harkness, 1986; Rothrauff, Middlemiss, & Jacobson, 2004),

little research has examined the sleeping arrangements of families undergoing a transition as a result of immigrating to a new cultural context. Cultural changes that result from intercultural contact are termed “acculturation” (Redfield, Linton & Herskovits, 1936). Many theories have been proposed to explore the changes (e.g., in values, identity) that take place during the acculturation process. There are two different theoretical models of acculturation, dimensional and domain-specific (Arends-Toth & Van de Vijver, 2003). According to the dimensional model, acculturation is considered a linear process of moving from one culture to another. Linear models of acculturation represent acculturation as a process of choice between two cultures: the original culture and the receiving culture (Berry, 2001). There are two kinds of linear models: uni-dimensional models and bi-dimensional models. Uni-dimensional models assume that strengthening one’s tie to a culture weakens the ties of the other culture (Andujo, 1988; Simic, 1987; Ullah, 1985). In contrast, bi-dimensional models represent acculturation as a two-dimensional process, in which both the relationships with the original culture and the new culture must be considered. These two relationships may be independent of each other (Phinney, 1990). According to the bi-dimensional model, acculturated individuals have either strong or weak ties with both their original culture and the majority culture. Immigrants need to acquire cultural competence in order

to live in two different cultures at the same time (LaFromboise, Coleman, & Gerton, 1993).

Domain-specific models are based on the assumption that people have different preferences to maintain original culture and adapt to the receiving culture in different life domains (Kim, Laroche, & Tomiuk, 2001). When immigrants try to adapt to a new culture, they may experience different rates of acculturation across domains and situations. For example, they may accept values and practices of the receiving culture in their work environment much more quickly than that of private domains. They may also choose to adapt to the receiving culture in the interpersonal relationships in public domain (e.g., classmates, colleagues), and simultaneously conserve values of original culture in their romantic interpersonal relationships (e.g., marriage). Different rates and levels of acculturation in different domains suggest that immigrants can possess two different cultural value systems and can switch between the two cultural value systems depending on the social setting. Many researchers have found that immigrants' cultural orientation varies across domains and situations. For example, Arends-Toth and Van de Vijver (2003) found that Turkish-Dutch prefer to adapt to Dutch culture more in public domain than in the private domain (e.g., home). Clement and Noels (1992) also proposed a situated approach to examine ethnic identity. They found that bicultural individuals

were able to switch identity as required by different situations and social norms. Bicultural individuals showed different identity tendencies in different domains (i.e., private domain vs. public domain).

A domain-specific acculturation framework is perhaps most relevant to the examination of sleeping arrangements. Co-sleeping is a popular childrearing practices in Chinese society that takes place within the private domain. According to domain-specific acculturation model, it is possible that Chinese immigrants would adapt their practices to suit Canadian culture in the public domain of work or school, but choose to maintain Chinese childrearing practices such as co-sleeping in the private domain of home and family life.

That said, it is possible that there may be some acculturative change even in the private domain. Keller and Goldberg (2004) found an interesting similarity between Asian Americans and European Americans in terms of sleeping arrangements, such that 44% of Asian American families practice solitary sleeping, which is similar to European American families (40%). Asian American mothers and European American mothers did not differ in terms of their attitudes toward solitary sleeping and maternal autonomy support. The authors suggest that a possible explanation for this similarity could be because Asian American mothers have been “acculturated” to adopt the (European) host cultures’ practice, beliefs and attitudes on sleeping arrangement. This study,

however, did not have a large sample of Asian American mothers, and so Keller and Goldberg only did a descriptive analysis to contrast Asian Americans with other groups. The present study will attempt to extend this research by examining immigrant Chinese-Canadians in greater depth to see if they maintain Chinese sleeping practices or adopt Canadian ones.

Marital Quality, Parenting Attitudes, and Sleeping Arrangements

Sleep is a form of social behavior in many societies (Worthman & Melby, 2002). In such contexts, co-sleeping is expected and integral to foundational relationships and emotional patterns of family life (Welles-Nystrom, 2005; Yang & Hahn, 2002). Marital quality and parenting attitudes have received much attention. Research on marriage has used different terms such as marital quality, marital satisfaction, or marital adjustment. Consequently, different measurements have been used to interpret marriage (Spanier & Cole, 1976). Most studies used marital quality as a general term to evaluate the progress of marriage and its relationship with different sleeping arrangements¹. Parenting attitudes include parents' attitudes toward having children and how they value children.

Most studies about sleeping arrangements within the family context have focused on marital quality. Researchers found that many parents are ambivalent about the relationship between co-sleeping and the quality of their

¹ The current study will examine marital quality in relation to sleeping arrangements.

marriage. Some parents think that co-sleeping does not negatively affect marital quality and accept co-sleeping. Klackenberg (1982, 1987) concluded that co-sleeping is too common to be a predictor of later marital difficulties. Studies showed that both mothers and fathers think that co-sleeping is not a barrier to their marriages. Ball, Hooker and Kelly (2000) found that fathers did not consider their co-sleeping infants to be intruders in the marital bed. Alternatively, some parents think that if they co-sleep with their young child, they may lose their private space as a couple, and therefore, they choose solitary sleeping. One reason against co-sleeping that couples cite is the concern that a child may interfere with marriage and adults' night-time activities (Shweder et al., 1995). According to Shweder and his colleagues, sleeping arrangements is a social practice related to the moral ideals of a cultural community. They asked people from Oriya, India, and North America to rate the importance of moral principles related to sleeping arrangements. They found that the moral preference for Indians included incest avoidance, protection of the vulnerable, female chastity anxiety, and respect for hierarchy. The moral preference for North Americans included incest avoidance, the sacred couple, and children's autonomy. Although both groups rated incest avoidance as the most preferred principle, North Americans showed a higher preference for the sacred couple which refers to the need for co-habiting adults

to sleeping together and alone in order to maintain emotional intimacy and sexual privacy. The preference of sacred couple indicated greater emphasis on life as a couple than as parents. This in turn explains why North Americans are less likely to co-sleep with their young child. Parents who perceived that their child has a sleep problem reported lower marital satisfaction and lower quality of marital life (Germon et al., 2007). Reactive co-sleeping parents reported lower parental satisfaction (Ramos, 2003).

Parenting attitudes play an important role in parents' choice of sleeping arrangements. Researchers have observed a positive relationship between marital quality, and parenting attitudes and practice (Cox, Owen, Lewis, & Henderson, 1989; Grossman, Eichler, & Winickoff, 1980). According to Goldberg and her colleagues, child-parent relationships and husband-wife relationships are interdependent of each other and are important consideration within the dynamic family system. Good marital quality is positively related to parental attitudes and beliefs (Goldberg & Easterbrooks, 1984). Other researchers also found that Hong Kong parents with positive attitudes toward their marriage also showed positive attitudes toward the parent-child relationship and the value of children (Shek, 1996).

Co-sleeping is a common sleeping practice in Chinese families, where most decisions are achieved through family discussion and consensus

(Rothrauff et al. 2004). How do Chinese parents think about the relationship between co-sleeping, marriage quality, and family life? Do they choose co-sleeping based on their cultural values, or based on their attitudes of marital quality and parenting? How do attitudes of marital quality and parenting influence Chinese parents' choice of sleeping arrangements? Is it possible that Chinese parents may have different perceptions of marital quality and parenting attitudes which may be influenced by their cultural values and beliefs? Answers to the above questions will provide us with a deeper understanding of co-sleeping from a cultural perspective.

Socioeconomic Status (SES), Space, and Sleeping Arrangements

Socioeconomic status and space availability also affect sleeping arrangements. Socioeconomic status (SES) is based on family income, education level, occupation and social status and participation in social institutions (Demarest, Reisner, Anderson, Humphrey, Farquhar, & Stein, 1993; Oakes & Rossi, 2003). Researchers have shown that SES influences the choice of co-sleeping arrangements (Brenner et al., 2003; Lozoff et al., 1984). Co-sleeping in North America is commonly reported among Black families and families with lower socioeconomic backgrounds (Lozoff, Wolf, & Davis, 1984; Brenner et al, 2003). Lozoff's study showed that 70% of urban African-American preschoolers were co-sleepers, compared to 35% of

Caucasian preschoolers (Lozoff et al., 1984). However, most studies of the relationship between sleeping arrangements and SES have mainly focused on groups such as Caucasians, African-Americans, and Hispanic Americans. The influence of SES on sleeping arrangements among Asian immigrants remains unclear.

Space structure and space availability are related to SES. Families with lower SES may have limited space for sleeping. Although lower SES is related to co-sleeping in some ethnic groups, researchers have shown that space is not crucial in determining sleeping arrangements in many countries. Caudill and Plath (1966) compared sleeping arrangements of Americans and Japanese. The study showed that space availability did not influence the choice and practice of co-sleeping whereas socialization and identity were related to co-sleeping. Japanese parents report that co-sleeping makes them feel closer to their child and makes their child feel more secure. Americans, however, report that sleeping separately is a better choice for children because this will help children become independent. Plath suggested that the high rates of co-sleeping reflect well-nurtured family bonds rather than lack of sleeping space or sexual impulses. Other researchers show that space availability may play a role when parents choose to co-sleep with their child. According to Li and his colleagues, factors associated with Chinese parents' choice of co-sleeping include child's

age, family size, space availability, and parent's attitudes towards co-sleeping arrangements. Parents were more likely to share their bed/room with their children if the child was young, family size is large, child did not have their own bedroom and if parents displayed positive attitudes towards co-sleeping (Li, Jin, Wu, Jiang, & Shen, 2009). Housing may be a problem for some Chinese families living in crowded cities. Space availability may influence parents' choice of co-sleeping. However, the impact of space availability on sleeping arrangements of Chinese immigrants is not clear at this time.

The Current Study

The current study examines the sleeping arrangements of Chinese immigrants in Canada, and the factors related to their sleeping arrangements. Based on the review above, this study explores various factors related to the sleeping arrangements of a sample of Chinese immigrants that include cultural values and beliefs, marital quality, attitudes toward parenting, and socioeconomic status.

Rationale for the Current Study

Childrearing has been considered as one of the practices influenced by cultural values and beliefs. Sleeping arrangements, one childrearing practice, needs to be studied in the context of cultural values and beliefs. Although previous research on sleeping arrangements in the context of culture may have

focused on comparison of sleeping arrangements among different ethnic groups and different cultural goals of independence and dependence for children development and their relationship with sleeping arrangements, many issues remain unclear in cross-cultural research area of sleeping arrangements.

First, there is a lack of research about sleeping arrangements of Chinese immigrants in Canada. Previous studies have offered descriptions of sleeping arrangements of different cultural groups, such as Caucasians, Europeans, Asians, African Americans, and Asian Americans, but little is known about minority groups in Canada. According to Statistics Canada (2001), about 20% of Canada's population was foreign born. Chinese Canadians are the second-largest visible minority group in Canada, comprising 3.9% of the Canadian population in 2006 (Statistics Canada, 2006). Chinese parents in China usually choose to co-sleep with their children. Nearly half of school-aged Chinese children (5 to 12 years old) still co-slept with their parents (40.1%) (Li et al. 2009). Although co-sleeping is common among Chinese families in China, it may not apply to Chinese Canadian families because they differ in their exposure to cultural value systems and practices. The lack of attention on the sleeping arrangements of Chinese Canadians from a cultural perspective calls for more research.

Second, cultural values and beliefs, marital quality and parenting attitudes were related to sleeping arrangements in different ways. However, more issues in this broad area remain untouched by most researchers. One major issue is whether cultural values and beliefs influence sleeping arrangements directly or through other factors such as personal beliefs about sleeping arrangements. Furthermore, how different cultural experiences influence decisions on sleeping arrangements has hardly even been touched. When there is contact between two different cultural groups, acculturation to the host culture may occur and individuals may act differently depending on the setting. Studying the sleeping arrangements of immigrants who are exposed to two distinct cultures at the same time will help shed light on sleeping arrangements from a cultural perspective.

Finally, previous studies have explored many practical factors (e.g., safety, breast-feeding, children's development) related to sleeping arrangements. Yet, no study has explored how these factors relate to sleeping arrangements among Chinese Canadians. How do these factors contribute to Chinese Canadian parents' decisions about their sleeping arrangements with their young children? The current study will investigate the relationships between sleeping arrangements and these practical factors in addition to cultural values and beliefs.

To this end, two objectives are established for this study. The first objective is to examine demographic characteristics of sleeping arrangements between parents and preschool-aged children among first generation Chinese immigrants in Canada. The second objective is to explore the relations between cultural values and beliefs, attitudes about co-sleeping, attitudes about marital quality, attitudes toward parenting, and practical considerations (e.g., safety and feeding) with the sleeping arrangements of Chinese immigrants in Canada.

The findings of this study will contribute a better understanding of sleeping arrangements among Chinese immigrants and the factors related to sleeping arrangements of Chinese immigrants. This study will also extend the research area of co-sleeping by focusing on cultural values and beliefs as possible factors in determining sleeping arrangements in general.

Research Questions

The current study will address five research questions established based on the two objectives stated earlier.

Research Question 1: What are the sleeping arrangements among Chinese immigrants?

To answer this question, the demographic characteristics of sleeping arrangements between Chinese immigrant parents and their preschool-aged children will be explored.

Research Question 2: How do demographic and space factors influence sleeping arrangements?

Studies showed that lower SES is related to co-sleeping in some ethnic groups, whereas space is not crucial in determining sleeping arrangements in many countries (Brenner et al, 2003; Caudill & Plath, 1966). It is unknown how SES and space availability would affect the decisions made by Chinese Canadians regarding the sleeping arrangements with their young children. This study will try to explore the demographic variables of parents and children that will influence the sleeping arrangements of Chinese Canadians. The influence of space availability on the decision of sleeping arrangements will also be explored.

Research Question 3: Do cultural values and beliefs, and social norms influence sleeping arrangements?

The cultural values and beliefs include Chinese culture orientation, Canadian culture orientation, and self aspects. The social norms include Chinese social norms about sleeping arrangements and Canadian social norms about sleeping arrangements. How Chinese immigrants perceived Chinese social norms and Canadian social norms related to sleeping arrangements will be explored.

Research Question 4: Are values, including those pertaining to family, children, and romantic relationships related to sleeping arrangement?

Childrearing practices, including sleeping arrangements, are influenced by many factors. Values about family and children may play important roles in childrearing practices. When parents think about sleeping arrangements, they may take into account their values about family and children. If they highly value the importance of family and children in their life, will this influence their decision of sleeping arrangements? The study will try to answer this question by exploring the relations between parents' values of family and children and whether or how those values related to their sleeping arrangements.

As stated earlier in this Chapter, most studies about sleeping arrangements within the family context have focused on marital quality. This study will extend this topic by studying the relations between general attitudes about romantic relationships and sleeping arrangements.

Research Question 5: Are beliefs about the effects of sleeping arrangements, which include beliefs regarding interdependence, independence, marital quality, and children development, related to sleeping arrangements?

Some cultural values and beliefs influence childrearing practices more than others. Interdependence and independence, according to many

researchers, are related to different sleeping arrangements in different cultures. Parents from the western culture emphasize the development of independence of their children, as a consequence, they choose not to co-sleep with their young child. On the contrary, Eastern parents who emphasize the development of interdependence of their children will more likely to choose co-sleeping. Chinese-Canadians live within two different cultures, how will the two different cultural values and beliefs reflect on their beliefs about the sleeping arrangements, and how will those particular beliefs related to sleeping arrangements influence Chinese-Canadians' decision and practice of sleeping arrangements, this will be explored using a sample of Chinese immigrants with preschool aged children. Meanwhile, the relations between the beliefs about marriage and sleeping arrangements will also be studied.

CHAPTER 2 METHODOLOGY

This study has two objectives: (1) to examine characteristics of sleeping arrangements of Chinese Canadians (2) to explore factors associated with the sleeping arrangements of Chinese Canadians. This chapter presents the following: (1) participants; (2) procedure; (3) materials; and (4) questionnaire translation procedure.

Participants

Participants of this study were 162 first generation Chinese immigrant parents with preschool-aged children. They were recruited from Edmonton (77.8%), Calgary (19.8%), Vancouver (1.2%), and Toronto (1.2%). Average age of participants was 36.05, ranging from 25 to 48 years ($M = 36.05$, $SD = 4.22$). 80.9% were female and 19.1% were male. Only one person in the household participated. Most participants were married (97.5%) and well-educated (96.3% had a bachelor degree or a higher degree). All participants were born in China, 98.8% of participants considered their cultural background as Chinese and 0.06% as Chinese and Canadian. One participant did not answer this question (0.06%). Most participants immigrated to Canada from mainland China (89.5%); however, some participants lived in other Western countries (e.g., countries in North American and Europe) for some time before moving to Canada (10.5%). The mean age at which participants

arrived in Canada was 29.9 years ($SD = 4.46$). At the time of this study, families have lived in Canada for 2 months to 14.5 years ($M = 5.6$ years, $SD = 31.88$). For those who have stayed in countries other than China and Canada before immigrating to Canada ranged from less than one year to over 12 years ($M = 2.97$ years, $SD = 3.19$). The target children included 71 boys and 90 girls, ranging in age from 2 months to 71 months ($M = 37.9$, $SD = 18.06$). Table 1 and 2 summarize detailed demographic information of participants and their children.

Table 1. Demographic Characteristics of Parents

		N	%	M	SD
Age (N=161)		161	—	36.05	4.22
Gender (N=162)	Male	31	19.1	—	—
	Female	131	80.9	—	—
Marriage (N=162)	Single	3	1.9	—	—
	Married	158	97.5	—	—
	Other	1	0.6	—	—
Education (N=162)	High school	2	1.2	—	—
	Technical/Trades Training	4	2.5	—	—
	College/University diploma	22	13.6	—	—
	Bachelor	74	45.7	—	—
	Master	44	27.2	—	—
	Ph D	16	9.9	—	—
Formal Education Years finished (N=158)		—	—	17.10	2.78
Age when first came to Canada (N=160)		—	—	29.90	4.46
Length of Residency in Canada (in months, N=160)		—	—	67.53	31.88
Lived in country other China and Canada (N=162)	Yes	17	10.5	—	—
	No	145	89.5	—	—
Working experience in Canada (N=162)	Yes	134	82.7	—	—
	No	28	17.3	—	—

Table 2. Demographic Characteristics of Children

		N	%	M	SD
Age in month (N=161)		—	—	37.92	18.06
Gender (N=161)	Boy	71	43.8	—	—
	Girl	90	55.6	—	—
Major caregiver (N=159)	Both parents	14	8.6	—	—
	Mother	65	40.1	—	—
	Father	1	0.6	—	—
	Daycare	29	17.9	—	—
	Grandparents	50	30.9	—	—

Procedure

Participants were recruited by contacting Chinese communities, daycares, and listserv (e.g., Chinese Students and Scholars' Association at the University of Alberta) and through snowball sampling. Participants were screened for the following criteria: (1) immigrated to Canada from Mainland China; (2) have pre-school aged children; and (3) can speak Mandarin and read simplified Chinese.

Families were contacted by telephone, email, or in person to confirm their willingness to participate in the study. There was a paper version and an electronic version of the questionnaire. Consent forms and questionnaires were given to families, either by dropping them off in person or through email, depending on participants' preference. The paper version of the consent forms and questionnaires were picked up upon completion. For the electronic version, the consent form was on the first page in an excel file. Participants were asked to read the consent form before proceeding to the next page, which contained the questionnaire. Advancing to the next page was considered an indication of their consent. Participants were asked to send the completed consent forms and questionnaires back to the researcher via email. The paper versions of the consent were immediately separated from the questionnaires, and the electronic

versions of the consent forms and questionnaires were saved as separate Excel files upon receiving them to maintain confidentiality.

A total of 224 questionnaires were distributed. 162 questionnaires were returned. The questionnaire return rate was 72.3%. All questionnaires were in Chinese. Participants received \$20 in cash or as a gift card for their participation.

Materials

Demographic and Sleeping Arrangements Questionnaire

The Demographic and Sleeping Arrangements Questionnaire consists of two parts. Part one of the questionnaire consists of questions about parents' demographic background. Part two consists of questions about children's demographic background and sleeping arrangements.

There are sixteen questions in Part one. It includes questions about parents' age, gender, marital status, education, occupations in China and Canada, length of residency in Canada, and/or length of residency in countries other than China and Canada, language usage, and ethnic background.

Participants were asked to rate their competence in reading, understanding, writing and speaking English on the Self-Evaluation of English Competence scale. The Self-Evaluation of English Competence scale was developed by Clément (1980) to measure participants' subjective evaluation of their English

competence. Answers ranged from 1 (not at all) to 7 (fluently). A high score indicates positive self-evaluation of English competence. The Cronbach alpha for the Self-Evaluation of English Competence scale was 0.93.

Part two consists of twenty-two questions about children's demographic background and sleeping arrangements, which include child's age, gender, care-giving information, house structure, household income, and sleeping arrangements. Questions relating to the social and physical aspects of sleeping arrangements were asked (e.g. where the child sleeps or who sleep(s) with the child). Co-sleeping parents answered questions concerning how often they co-slept and why they chose to co-sleep. Co-sleeping parents were also asked about their plan for eventually transitioning their co-sleeping child into the child's own bedroom. Information about the physical sleeping arrangements was collected by asking co-sleeping parents to draw a picture of their bedroom. Parents were asked to indicate the approximate distance between the two beds if their beds were not attached to each other. A picture of bedroom was shown to the parents as an example (see Figure 1).

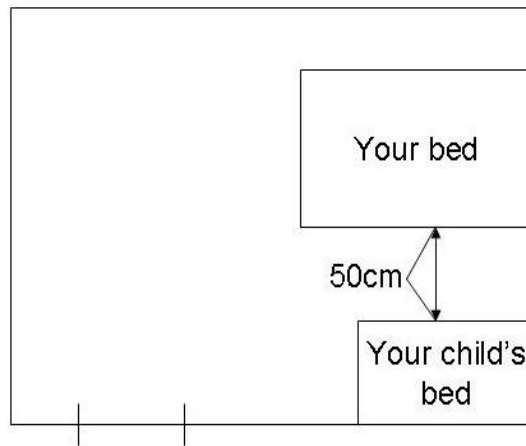


Figure 1. Example of Picture Shown to Co-sleeping Parents

Non co-sleeping parents were shown Figure 2 and then asked to draw a picture of both their bedroom and their child's bedroom. Parents were asked to indicate the approximate distance between their beds and their child's bed as in the picture.

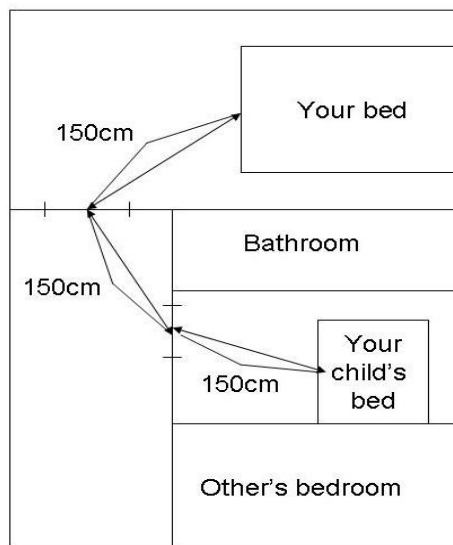


Figure 2. Example of Picture Shown to Non Co-sleeping Family

Asian Value Scale-Revised (AVS-R, Chinese Version)

The Asian Value Scale-Revised (AVS-R), a revised version of the Asian Values Scale (AVS), was designed to measure Asian cultural values (Kim, Atkinson, & Yang, 1999). The Asian Value Scale-Revised consists of 25 items to which participants respond on a 4-point scale ranging from 1 (strongly disagree) to 4 (strongly agree). There were 12 reversed items in AVS-R. AVS-R score can be obtained by averaging the scores on the items. High scores indicate strong endorsement of Asian values. Cronbach's alpha for AVS-R was 0.56 for 25 items. When reversed items were excluded, Cronbach's alpha for AVS-R was 0.66 for 13 items. Therefore, reversed items were excluded in the questionnaires.

Vancouver Index of Acculturation (VIA, Chinese Version)

Vancouver Index of Acculturation (VIA) was designed to measure one's level of acculturation with the mainstream culture (e.g., North American culture) and with the heritage culture (e.g., Chinese culture). VIA has been used to measure acculturation in different groups (e.g., immigrants and sojourners) and among the general American and Canadian populations (Ryder, Alden, & Paulhus, 2000). According to Ryder *et al.* (2000), VIA has high internal consistency within various cultural groups on the heritage dimension (Cronbach alpha coefficients: .91 ~ .92) and high reliability on the mainstream

dimension (.85 ~ .89), as well as high concurrent validity. VIA is an effective instrument for assessing acculturation among Chinese populations in bidimensional models (Ryder *et al.*, 2000).

The traditional Chinese version of VIA was converted into simplified Chinese for this study. The simplified Chinese version of VIA or VIAC consists of 20 items. There are two subscales in VIAC: Mainstream and Heritage. Each subscale contains 10 items. The mainstream subscale (even-numbered items) measures participant's identification with North American culture (e.g., "I often participate in mainstream North American cultural traditions."). The heritage subscale (odd-numbered items) measures participant's identification with Chinese culture (e.g., "I often participate in Chinese cultural traditions."). Responses to items ranged from 1 ("strongly disagree") to 9 ("strongly agree"). Two subscores can be obtained by averaging the scores for each subscale. The Cronbach's alpha for the whole VIAC, for the mainstream subscale and the heritage subscale of VIAC were 0.83, 0.80, and 0.84 respectively.

Relational, Individual, and Collective Self-Aspects Scale (RIC10)

The Relational, Individual, and Collective Self-aspects Scale (RIC10) (Kashima & Hardie, 2000) was developed to measure three dimensions of self-aspect: relational self, individual self, and collective self. Relational self

refers to “an interpersonal orientation that emphasizes relationship closeness, intimacy, and affiliation as well as self-definition based on significant personal relationships” (Kashima & Hardie, 2000, p. 28). Individual self refers to the conception of oneself as autonomous and unique with a clear boundary from others (Markus & Kitayama, 1991). Collective self derives from one’s membership in his or her social group or social categories (Hofstede, 1980; Triandis, 1995).

RIC10 consists of ten questions. Each question consists of three options that reflect the three self-aspects (relational self, individual self and collective self). Participants were asked to rate each option or statement in terms of how much of the statement was true or not true of themselves, or like or not like something the participants would think, do, or feel. A 7-point Likert scale was used, ranging from 1 (“not like me, not true of me”) and 7 (“like me, very true of me”). Subscale scores can be obtained by averaging the scores of each subscale. The Cronbach’s alpha for relational self, individual self, and collective self subscales were 0.73, 0.72, and 0.78 respectively.

Family Values Scale (FVS)

The Family Values Scale (FVS) was designed to measure one’s value of the attainment and experiences of family formation and family interactions (Touliatos, Perlmutter, & Straus, 1990). One study found that dichotomous

variables derived from FVS were related to age, marital status, life cycle stage, and employment status. It is also reported that family values interact with marital status in predicting life satisfaction among 45 to 64 year old participants.

FVS consists of three statements, each of which having five possible responses, ranging from 1 (“strongly disagree”) to 5 (“strongly agree”). High scores indicate strong family values. FVS scores are obtained by averaging scores from the individual items. Cronbach’s alpha of FVS was 0.64.

The Value of Children Scale (VOC)

The Value of Children Scale (VOC) was designed to measure one’s beliefs and values about having children. VOC consists of questions for conducting a cross-cultural interview (East-West Population Institute, 1975). Interviews based on the VOC have been conducted cross-culturally in six different countries to reveal unique cultural values regarding childrearing.

VOC consists of 45 items. There are nine subscales: (1) Continuity, tradition, and security; (2) Parenthood satisfactions; (3) Role motivations; (4) Happiness and affection; (5) Goals and incentives; (6) Social status; (7) External control; (8) Costs of children; (9) Decision-mindedness. Of the nine subscales, only three subscales were relevant to this study: (1) Role motivations (VOC-R); (2) Parenthood satisfactions (VOC-P); and (3) Happiness and

Affection (VOC-H). VOC-R includes five items regarding values of becoming parents (e.g., “It is only natural that a woman should want children.”). VOC-P includes three items regarding how satisfied people are with being parents (e.g., “Just the feeling a parent gets of being needed is enough to make having children worthwhile.”). VOC-H includes three items regarding people’s feeling about being parents (e.g., “A person who has no children can never really be happy.”). Responses ranged from 1 (“strongly disagree”) to 7 (“strongly agree”). Three subscale scores were obtained by averaging scores for each subscale. Cronbach’s alpha for VOC, VOC-R, VOC-P, and VOC-H were 0.81, 0.65, 0.50, and 0.69 respectively.

Value of Parenting Roles (VPR)

The Value of Parenting Roles Scale (VPR) was developed for this study. It measures how Chinese parents value the parenting role and whether they enjoy being parents (e.g., I enjoy being a parent).

VPR consists of 17 items, including 5 reversed items. Response to each item ranged from 1 (“strongly disagree”) to 7 (“strongly agree”). VPR scores were obtained by averaging the scores of each item. High scores indicate that participants value the parenting role and enjoy being parents. Cronbach’s alpha for VPR was 0.81.

Value of Romantic Relationships (VRR)

The Value of Romantic Relationships Scale (VRR) was developed for this study. It measures how much people value romantic relationships (e.g., “Maintaining a good romantic relationship with my spouse is very important to me.”).

VRR consists of 11 items. Participants indicated their level of agreement from 1 (“strongly disagree”) to 7 (“strongly agree”) on each item. A high mean score indicates that the person values romantic relationships. Cronbach’s alpha for VRR was 0.79.

Refinement of the Beliefs of Sleeping Arrangements Scale (BSA)

The Beliefs of Sleeping Arrangements Scale (BSA) consists of 48 items that measure different beliefs relating to sleeping arrangements: (1) Practical Considerations (e.g., “Sleeping with my child makes feeding easier.”); (2) Health and Safety (e.g., “It is much safer if my child sleeps in a separate bedroom.”); (3) Psychological Development (e.g., “Sleeping with my child creates a good relationship between my child and me.”); (4) Independence (e.g., “Sleeping in his/her own room from a very young age is good for a child to be independent.”); (5) Interdependence (e.g., “Letting my child sleep in my bedroom or my bed helps my child to become aware of the importance of interpersonal relationship.”); (6) Parenting Satisfaction (e.g., “Sleeping with my

child is a way of enjoying being a parent.”); (7) Parenting Responsibility (e.g., “I am responsible to take care of my child by letting him/her sleep besides me.”); (8) Marriage Quality (e.g., “I will not let my child sleep in my bedroom/bed because I want to have a private life with my partner.”). There were six paired items (co-sleeping vs. solitary sleeping) in each category.

A series of exploratory principle component analyses were conducted on all items of the original BSA scale. The results indicated 3 sets of items reflected independence, interdependence, and marriage satisfaction were distinct from the other items and each other. The items of independence, interdependence, and marriage quality were removed from the analysis and the remaining items were analyzed. The original beliefs of sleeping arrangements scale was divided into three scales. A description of each of these scales follows.

Cultural Beliefs about Sleeping Arrangements (CBSA)

The Cultural Beliefs about Sleeping Arrangements Scale (CBSA) consists of 6 items. It measures how parents view the relationship between sleeping arrangements and the values of independence and interdependence. Exploratory factor analysis revealed that two factors from CBSA explained 58.71% of the total variance. The two factors were (1) beliefs about sleeping arrangements and independence; and (2) beliefs about sleeping arrangements

and interdependence. Factor loadings for items regarding these two factors are presented in Table 3.

Responses to each item in CBSA ranged from 1 (“strongly disagree”) to 7 (“strongly agree”). Two subscores were obtained by averaging the scores on the items in each subscale. Cronbach’s alpha on the Independence subscale and Interdependence subscale were 0.63 and 0.59 respectively.

Table 3. The Cultural Beliefs about Sleeping Arrangements Scale
Factor Loadings

Items	Factor Loadings	
	Factor1	Factor2
<i>Factor1: Sleeping arrangement and independence</i>		
Child can develop a sense of independence if they have their own bedrooms.	.872	
Sleeping in his/her own room from a very young age is good for a child to be independent.	.730	
My child is an independent person, he/she needs his/her own space to sleep or play.	.661	
<i>Factor2: Sleeping arrangement and interdependence</i>		
Sleeping with parents/caregiver in the same bedroom/bed allows child to know who he/she can rely on.		.830
Sleeping in the same bedroom/bed with parents/caregiver makes child have the feeling of belonging to the family.		.827
My child is too young to be independent, he/she doesn’t need his/her own space to sleep or play.	-.331	.435

Note. Loadings < .30 were not reported.

Sleeping Arrangements and Marriage Quality Scale (SAMQ)

The Sleeping Arrangements and Marriage Quality Scale (SAMQ) consists of 7 items. SAMQ measures how parents view the relationship

between sleeping arrangement and marriage quality. SAMQ score can be obtained by averaging the scores on the items. Two items were reversed-scored. A high SAMQ score indicates that parents think solitary sleeping is important to quality of marriage. Cronbach's alpha for SAMQ was 0.80.

General Beliefs about Sleeping Arrangements Scale (GBSA)

After the items of the Cultural Beliefs about Sleeping Arrangements Scale and the Sleeping Arrangements and Marriage Quality Scale were removed from the Beliefs about Sleeping Arrangements Scale, 30 items were left for further principal component analysis to decide what factor(s) may compose the General Beliefs about Sleeping Arrangements Scale. The principal component analysis with oblimin rotation produced a 4-factor solution, which explained 48.51% of total variance. Six items were deleted due to cross loading. The final version of GBSA consists of 24 items which were divided into four subscales. The four subscales were labeled as: health and well-being (HW), beliefs about solitary sleeping (SS), social and emotional development (SE), and feeding (FE). The factor loadings for the 24 items composing of these four factors are presented in Table 4.

Table 4. The General Beliefs about Sleeping Arrangements Scale Factor Loadings

Items	Factor Loadings			
	Factor1	Factor2	Factor3	Factor4
Factor1: <i>Health and Well-being (HW)</i>				
Letting my child sleep in my bedroom or my bed is good for my child's physical health.	.772			
Letting my child sleep in my bedroom or my bed is good for my child's psychological development.	.752			
I am responsible for taking care of my child by letting him/her sleep besides me.	.740			
Sleeping with my child is a fulfilling way to nurture my child.	.726			
When my child and I sleep in the same room or same bed, we both can get a better sleep.	.692			
Letting my child sleep in my bedroom or my bed decreases the danger of smothering and sudden infant death syndrome (SIDS).	.489			
Factor2: <i>Solitary Sleeping (SS)</i>				
Even my child sleeps in a separate room, I still can keep a close eye on him/her.		.711		
I feel happy to see my child's sleeping face when he/she is tucked up snugly in his/her own bedroom.		.656	.319	
I can be responsible enough for taking care of my child even though he/she sleeps in his/her own bedroom.		.648		
Even though my child sleeps in a separate bedroom, he/she still can get my help whenever he/she needs me.		.558		
Sleeping in a separate room is good for my child's physical health.		.543		
I can enjoy parenting better if my child sleeps in a separate bedroom.		.510		
Letting my child sleep in a separate bedroom does not compromise the emotional tie between my child and me.	-.308	.492		
Letting my child sleep in his/her own bedroom is good for my child's psychological development.	-.325	.408		

Table 4. The General Beliefs about Sleeping Arrangements Scale Factor Loadings
(Cont.)

Items	Factor Loadings			
	Factor1	Factor2	Factor3	Factor4
Sleeping with my child is not necessarily helpful to create a good relationship between my child and me.		.387		
Factor3: <i>Social and Emotional Development (SE)</i>				
I feel happy to see my child's sleeping face besides me when I wake up in midnight.		.315	.702	
Sleeping with my child is a way of enjoying being a parent.			.639	
Sleeping with my child creates a good relationship between my child and me.			.591	
Sleeping with my child is a very important way to create a good emotional bond between my child and me.			.565	
Sleeping with my child will make it easier for my child to find me when he/she needs help.			.536	
Factor4: <i>Feeding (FE)</i>				
Sleeping with my child makes feeding (e.g., breastfeeding, bottle feeding) easier.	.337			.771
Sleeping in different rooms makes feeding (e.g., breastfeeding, bottle feeding) easier.				-.630
If the child is next to me, he/she doesn't have to cry a lot before he/she can be fed.			.400	.580
Sleeping with my child makes feeding (e.g., breastfeeding, bottle feeding) harder.				-.344

Note. Loadings < .30 were not reported.

Responses to each item on GBSA ranged from 1 (“strongly disagree”) to 7 (“strongly agree”). GBSA Subscores can be obtained by calculating the means for the four subscales. Cronbach's alpha for BSA overall, health and well-being (HW), beliefs about solitary sleeping (SS), social and emotional

development (SE), and feeding (FE) were 0.66, 0.84, 0.77, 0.80, and 0.50 respectively.

Perceived Social Norms of Sleeping Arrangements Scale (PSNSA)

The Perceived Social Norms of Sleeping Arrangements Scale (PSNSA) was developed for this study. It consists of 10 items and is used to measure how Chinese immigrants perceive the prescriptive norms of sleeping arrangements of Chinese and Canadians. The prescriptive norms of sleeping arrangements included what Chinese and Canadian communities, friends, and family members think about sleeping arrangements.

Principal component analysis with varimax rotation was used to examine the factor structure of PSNSA. The analysis produced a 3-factor solution, which explained 55.44% of the total variance. These 3 factors were: perceived Canadian social norms of sleeping arrangements (PCASA), perceived Chinese Social norms of solitary sleeping (PCHSS), and perceived Chinese social norms of co-sleeping (PCHCS). The factor loadings for the 10 items composing of these three factors are presented in Table 5.

The final version of PSNSA consists of 10 items. Responses to each item ranged from 1 (“strongly disagree”) to 7 (“strongly agree”). PSNSA subscores can be obtained by calculating the means of the three subscales.

Cronbach's alpha of PSNSA overall, PCASA, PCHSS and PCHCS were 0.61, 0.66, 0.61, and 0.58 respectively.

Table 5. The Perceived Social Norms of Sleeping Arrangements Scale
Factor Loadings

Items	Factor Loadings		
	Factor1	Factor2	Factor3
Factor1: Perceived <i>Canadian social norms of sleeping arrangement (PCASA)</i>			
Most of my Canadian friends think parents should sleep with their children.	.754		
Most of my Canadian friends think children should sleep in a separate bedroom from adults.	-.739		
Canadians in general think parents should sleep with their children.	.661		
Canadians in general think children should sleep in a separate bedroom from adults.	-.642		
Factor2: Perceived <i>Chinese social norms of solitary sleeping (PCHSS)</i>			
Most of my Chinese friends think their child should sleep in a separate bedroom from adults.		.845	
Chinese in general agree that children should sleep in a separate bedroom from adults.		.743	
My family members think that I should let my child sleep in a separate bedroom.		.581	
Factor3: Perceived <i>Chinese social norms of co-sleeping (PCHCS)</i>			
Most of my Chinese friends think parents should sleep with their children.			.796
Chinese in general agree that parents should sleep with children.			.707
My family members think it is better for me to sleep with my child.			.664

Note. Loadings < .30 were not reported.

Open-ended Questions

Five open-ended questions were asked in the demographic information section and at the end of the questionnaire.

The parents were asked why they co-slept with their young child at certain age. Parents were also asked when they plan to move their child to his/her own bedroom: “If your child sleeps with you or the grandparent(s) (either in the same bed or in different beds but in the same bedroom), at what age do you plan to move your child to his/her own bedroom? _____ year(s) _____ month(s) old.” Parents were asked to further specify the reason(s) for moving their child to his/her own bedroom at a particular age: “Please specify why you want to move your child to his/her own bedroom at the age indicated above.” At the end of the questionnaire, the parents were asked about their expectations about their child’s development, “What do you expect about your child’s development (e.g., to be a happy person, to be academically successful)?” Finally, the last question explores reasons for co-sleeping that was not covered in our measurement: “The purpose of our study is to study why parents choose to sleep with their children. There might be some issues or reasons that we didn’t include. Please provide any thoughts and/or comments related to this question in the space provided below.”

Questionnaire Translation Procedure

All scales in the questionnaire, except the Vancouver Index of Acculturation (VIA) and the Asian Value Scale Revised (AVS-R) which are available in Chinese versions, were translated into simplified Chinese. Back-translation was used to eliminate problems that may rise during the translation process (Su & Parham, 2002). Six researchers were involved in the translation and back-translation process. Two of them were native English speakers. Four of them were Chinese-English bilinguals, who spoke Mandarin as their native language. The Chinese-English bilingual researchers passed the Test of English as a Foreign Language (TOEFL) and studied at the University of Alberta for two or more years. All six researchers were graduate or undergraduate students at the University of Alberta.

The first step of the translation was to ask two native English speakers to proofread the English version of the questionnaires for clarity. Next step, the English items were translated into Chinese by one bilingual researcher. Then, the two bilingual researchers compared the English version and the Chinese version of the questionnaires to ensure that the translation did not change the meaning of each item from the original English questionnaires. The two bilingual researchers also made necessary changes in the Chinese translation for clarity. The next step, a fourth bilingual researcher back-translated the

Chinese questionnaires into English again. The final step was to ask the two native English speakers to review and compare the back-translated questionnaires (in English) and the original English version.

CHAPTER 3 RESULTS

This chapter presents the major findings of the study. Results are presented in two sections. The first section presents results regarding characteristics of sleeping arrangements of Chinese immigrants, including demographic information relating to sleeping arrangements and the characteristics of different sleeping groups. The second section presents results regarding factors relating to sleeping arrangements and how those factors influence sleeping arrangements among Chinese Canadians.

Data Screening

Before proceeding to any type of data analysis, the original data were checked for accuracy and missing values. Appropriate sample was also chosen based on the definition of co-sleeping in this study.

Frequencies and descriptive information of all variables were computed using program SPSS 16.0. Responses to questionnaire were within the acceptable ranges (e.g., 1-9). Missing values were distributed randomly. Cases with missing values were excluded from the data set.

There were 162 participants in the original data and 148 participants were included in the final analysis. They were chosen based the definition of co-sleeping and solitary sleeping in the current study. Therefore 14 participants who reported that their child co-slept with grandparents and siblings were

excluded from this study. The analysis reported hereafter was based on data from 148 participants who met the criteria of the study.

Characteristics of Sleeping Arrangements of Chinese Immigrants

An Overview of Sleeping Arrangements among Chinese Immigrants

Sleeping arrangements were measured by asking parents where their child slept and with whom they slept. In terms of co-sleeping, 77% of parents reported that they co-slept with their child. Only 23% reported that their child were solitary sleepers. Among the 114 co-sleeping children, 58 slept with parents on the same bed, 56 slept in the parents' bedroom but in their own bed or crib. Table 6 summarizes descriptive information of co-sleepers and solitary sleepers.

Table 6. Descriptive Information of Sleeping Arrangements (N=148)

	N	%	
Co-sleepers	in parents' bed	58	39.2
	in parents' room in own bed	56	37.8
Solitary sleepers	34	23	
Total	148	100	

Co-sleeping frequency during the nighttime and daytime was also measured by asking the participants how many day(s) they co-slept with their child in one week. Two questions were asked: (1) how often does your child sleep with you in the same room? (2) If your child naps, do you also sleep with your child during nap time? For the first question, 60.1% of the parents slept

with their child everyday during night, 21.1% of parents slept with their child 1 to 6 days a week during night, 18.2% never co-slept with their child during night. Co-sleeping during daytime naps was different from nighttime sleeping. Nearly half of the parents did not co-sleep with their child during nap-time. This difference may be because of the following reasons: (1) children are at daycare or day home and are not at home; (2) Parents work, and at which time, children are under the care of grandparents or other caregivers. Table 7 summarizes detailed information of co-sleeping frequency for all participants.

Table 7. Co-sleeping Frequency of All Participants (N=148)

	How often does your child sleep with you in the same room?		If your child naps, do you also sleep with your child during nap time?	
	N	%	N	%
Never	27	18.2	66	44.6
1 day/week	7	4.7	17	11.5
2 days/week	6	4.1	16	10.8
3 days/week	4	2.7	5	3.4
4 days/week	6	4.1	7	4.7
5 days/week	2	1.4	4	2.7
6 days/week	7	4.7	6	4.1
7 days/week	89	60.1	27	18.2
Total	148	100	148	100

Welles-Nystrom proposed four types of sleeping arrangements which include full co-sleeping, partial co-sleeping, no co-sleeping (i.e., solitary sleeping), and night wandering (Welles-Nystrom, 2005). There was no night wandering reported in this study. The other three types of sleeping arrangements were distinguished based on the nighttime co-sleeping frequency

presented earlier. If parents slept with their child 7 days a week during night time, they are considered full co-sleepers. If parents slept with child at least once a day in a week but not 7 days a week during night time (i.e., 1~6 days a week), they are partial co-sleepers. If parents never slept with their child within a week during night time, they are solitary sleepers. Frequencies of the three types of sleeping groups are provided in Table 8.

Table 8. Frequency of Three Sleeping Groups (N=141)

	N	%
Full co-sleepers	89	63.1
Partial co-sleepers	25	17.7
Solitary sleepers	27	19.1

The distance between the parents' and children's beds was obtained by asking parents to draw a picture of their bedroom settings. The bedroom settings were coded in two ways. We first indicated whether the child slept with their parents in the same bedroom or different bedrooms. The results show that 74.3% of the families let their child sleep in the parents' bedroom, whereas 25.7% let the child sleep in the child's own bedroom. Then, we indicated the bedroom setting of co-sleeping families. Among the families whose child slept in the parents' bedroom (N=107), more than half of the children slept in parents' bed (54.2%), 14% slept in a different bed, which was attached to the parents' bed, and 31.8% slept in a bed that was separated from the parents' bed.

The distance between the parents' bed and the child's bed ranged from 0 cm to 900 cm ($M = 114.50$, $SD = 211.36$) for 129 families that reported the distance. For these co-sleeping families, the distance between the parents' bed and the child's bed ranged from 0 cm to 300 cm, the mean distance was 21.15 cm ($SD = 42.74$). For solitary sleeping families, the distance between the parents' bed and the child's bed ranged from 150 cm to 900 cm, the mean distance was 502.8 cm ($SD = 188.69$).

Child's Gender, Age, Caregiver and Sleeping Arrangements

Children's age and gender of co-sleepers and solitary sleepers were examined. Age of co-sleeping children ranged from 2 months to 71 months. The average age of co-sleeping children was 34.98 months ($N = 114$, $SD = 17.51$). Age of solitary sleeping children ranged from 10 months to 70 months. The average age of solitary sleeping children was 47.65 months ($N = 34$, $SD = 18.38$). The results show that parents tend to co-sleep with younger children ($t = 3.659$, $df = 146$, $p < .00$). Among co-sleeping children, more than half of them were girls (58.8%) and less than half were boys (41.2%). More than half of solitary sleeping children were boys (51.5%) and less than half were girls (48.5%). There was no significant difference between genders among different sleeping groups.

Co-sleeping children were also divided into three groups according to their age: infant, toddler, and preschooler². Infant included newborns to 18 months old children. Toddler included children from 19 months to 36 months old. Children 37 months or older were classified in preschooler. Frequencies and percentages of the three co-sleeping groups are presented in Table 9.

Table 9. Three Age Groups of Co-sleepers (N=114)

	N	%
Infant (0-18 months)	12	10.5
Toddler (19-36 months)	47	41.2
Preschooler (37 months and older)	55	48.2

Caregiver information was also collected by asking parents who were child's major caregiver. According to parents' answer, five categories of caregivers were established in this study: parents, mother, father, daycare, and grandparents. For both co-sleepers and solitary sleepers, most children were taken care by mother and grandparents. For co-sleepers, nearly half of the children were taken care of by their mother. Most solitary sleeping children were taken care of by grandparents or sent to daycare. Table 10 presents caregiver information of different sleeping groups.

² The criteria for dividing age groups was established by referring to the following source: *Caring for your baby and young child : birth to age 5*. Steven P. Shelov, editor-in-chief ... [et al.]. New York : Bantam Books, 1993.

Table 10. Caregiver Information of Co-sleeping and Solitary

Sleeping Children				
Caregiver	Co-sleepers (N=112)		Solitary Sleepers (N=33)	
	N	%	N	%
Both parents	8	7.1	3	9.1
Mother	52	46.4	8	24.2
Father	1	0.9	0	0
Daycare	21	18.8	7	21.2
Grandparents	30	26.8	15	45.5
Total	112	100	33	100

Characteristics of Co-sleeping Arrangements

Characteristics of co-sleeping groups were explored. Co-sleeping parents were asked to answer questions relating to reason(s) for choosing co-sleeping and their plan for solitary sleeping.

Co-sleeping parents were asked whether their decision about sleeping arrangements was based on their own choice or external reason(s) (i.e., not enough space, child's behavior). Parents were asked to rate the following three statements using a 7-point Likert scale: (1) We intentionally chose to let him/her to sleep in our bedroom; (2) It was necessary to sleep together because we don't have enough bedrooms; and (3) Our child's behavior (e.g., my child always wakes up and cries) has made it. Answers ranged from 1 ("strongly disagree") to 7 ("strongly agree"). Parents were allowed to choose more than one reason. Results show that more than half of the co-sleepers intentionally choose to co-sleep with their child (51.7% agree or strongly agree), less than

half made the decision based on child's behavior (47.9%), and only 14.2% reported that they made the decision of co-sleeping due to lack of space. Table 11 provides detailed information of reasons for choosing co-sleeping. If parents chose agree or strongly agree for any of the three reasons, we considered it as a reason for parents' decisions.

Table 11. Reasons for Choosing Co-sleeping Arrangement

Reason for co-sleeping	N	%
We intentionally chose to let him/her to sleep in our bedroom. (N=102)	59	51.7
It was necessary to let my child sleep in our bedroom because we don't have enough bedrooms. (N=85)	12	14.2
Our child's behavior (e.g., my child always wakes up and cries) has made it necessary to sleep in the same bedroom with parents. (N=94)	45	47.9

Co-sleepers were divided into two groups, intentional co-sleepers and reactive co-sleepers, based on their agreement to the following question: "We intentionally chose to let him/her to sleep in our bedroom." If participants chose agree or strongly agree to the statement, they were considered as intentional co-sleepers. If they chose disagree or strongly disagree to the statement, they were considered as reactive co-sleepers. Table 12 provides information of these two co-sleeping groups. Most Chinese parents in this study were intentional co-sleepers.

Table 12. Intentional Co-sleepers and Reactive Co-sleepers (N=73)

	N	%
Intentional co-sleepers	59	80.8
Reactive co-sleepers	14	19.2
Total	73	100

Co-sleeping parents were also asked about their plan for solitary sleeping. They were asked at what age they would move their child to his/her own bedroom. The answer ranges from 3 months to 144 months. The average was 48.37 month (SD=21.89).

Co-sleeping Experience of Solitary Sleepers

Solitary sleepers were asked about their past co-sleeping experience: “If your child currently doesn’t sleep with you and/or your spouse, or the grandparent(s) (either in your bed or in a different bed), has he/she ever slept with you and/or your spouse, or the grandparent(s)?” Most solitary sleepers (90.9%) answered “yes” to this question, which indicates that most solitary sleeping parents have had co-sleeping experience prior to their current sleeping arrangement.

Solitary sleepers were also asked how long they co-slept with their child and at what age they moved their child to his/her own bedroom. The co-sleeping experience of solitary sleepers ranged from 3 months to 60 months. The mean was 29.43 months (SD=17.6).

Summary of Sleeping Arrangements of Chinese Immigrants

Most Chinese immigrants in this study co-slept with their pre-school aged child every day or part of a week during night time, with a majority sleeping with the child every night. Parents and their child shared a bed in more than half of the co-sleeping families. Chinese parents tend to co-sleep with younger children. Co-sleeping parents plan to move their co-sleeping child to his/her own bedroom around the age of four. Chinese parents chose co-sleeping for various reasons, and often made the decision based on more than one reason. More than half of the co-sleeping families made the decision based on parents' intention. In the mean time, nearly half the families chose co-sleeping in reaction to their child's behavior(s).

Less than one third of the families in this study chose solitary sleeping. Most solitary sleeping families have had co-sleeping experiences prior to their current sleeping practice. They moved their child to a separate bed room at the average age of 29 months.

The distance between the parent's bed and the child's bed ranged from 0cm to 900cm among all families that reported the distance. For co-sleeping families, the mean distance between the parent's bed and the child's bed was 21.15cm, whereas for solitary sleeping families, the mean distance was 502.8 cm.

Variables Associated with Sleeping Arrangements of Chinese Immigrants

The second objective of this study was to explore how cultural values and beliefs, social norms, personal values regarding parenting and romantic relationships, beliefs about the effects of sleeping arrangements, and demographic factors are related to sleeping arrangements among Chinese immigrant families in Canada.

Multiple regression analysis with stepwise method was performed using the program SPSS 16.0³. The independent variables were put into seven different groups to perform regression analysis: (1) demographic variables of parents (age, gender, income, education, income, length of residency in Canada, and marital status); (2) demographic variables of children (age and gender); (3) house setting (bedroom numbers and property type); (4) cultural values (Vancouver Index of Acculturation North American, Vancouver Index of Acculturation Chinese, Asian Value Scale); (5) social norms (perceived Chinese social norms about co-sleeping, perceived Chinese social norms about solitary sleeping, and perceived Canadian social norms about sleeping arrangements); (6) values of family and romantic relationship (value of romantic relationship and value of parenting roles); (7) beliefs about sleeping arrangements (interdependence, independence, marriage quality, health and

³ A total of 14 stepwise regression analyses were performed to explore the impact of independent variables on sleeping arrangements and distance. However, only the results of the impact on sleeping arrangements were reported.

well-being, social and emotional development, and feeding). The dependent variable was sleeping arrangement (1 = solitary sleeping, 2 = co-sleeping).

A total of seven regression analyses using stepwise method were performed to explore the impact of independent variables on sleeping arrangements. The analysis results showed that eight independent variables predicted the sleeping arrangements of Chinese immigrants in this study, including parent's length of residency in Canada, number of bedrooms, child's age, beliefs about solitary sleeping, beliefs about marriage quality, beliefs about independence, beliefs about interdependence, and perceived Chinese social norms of co-sleeping. Table 13 presents descriptive information of the above independent variables.

Table 13 Correlation Matrix and Descriptive Statistics of Variables Predicting Sleeping Arrangements (N=148)

	RE	BR	Age	Solitary	MQ	In	Inter	CHSN	SA
RE	1.0								
BR	.366**	1.0							
Age	.325**	.158	1.0						
Solitary	.201	-.153	.142	1.0					
MQ	.037	.048	.175*	.270**	1.0				
In	-.029	-.049	.064	.593**	.215**	1.0			
Inter	.009	-.007	-.108	-.437**	-.369**	-.396**	1.0		
CHSN	-.155	-.206*	-.113	-.142	-.284**	-.120	.326**	1.0	
SA	-.264**	-.172*	-.290**	-.323**	-.286**	-.074	.315**	.184*	1.0
Mean	67.8	2.66	37.68	4.85	4.18	5.11	3.55	2.66	1.77
SD	32.09	.88	18.32	.84	1.05	.996	1.09	.92	.42

* $P < .05$, ** $P < .01$

Note: RE: parent's length of residency in Canada (in months)
 BR: bedroom number(s)
 Age: Child's age in months
 Solitary: Beliefs of solitary sleeping and sleeping arrangements
 MQ: Beliefs of marriage quality and sleeping arrangements
 In: Beliefs of independence and sleeping arrangements
 Inter: Beliefs of interdependence and sleeping arrangements
 CHSN: perceived Chinese social norms of co-sleeping
 SA: Sleeping arrangements (1 = solitary sleeping, 2 = co-sleeping)

The Influence of Demographic and Space Factors on Sleeping Arrangements

The demographic predictors, which include demographic variables of parents (age, gender, income, education, income, length of residency in Canada, and marital status) and demographic variables of children (age and gender);

were entered into regression equations, such that the relation between demographic variables and sleeping arrangements was assessed. The statistically significant F-test indicated that parent's length of residency in Canada and child's age predicted sleeping arrangements, and the coefficient of determinations (R^2) showed that the parents' length of residence in Canada accounted for 6.8% of the variance in the sleeping arrangements (Table 14), whereas child's age accounted for 7.5% of the variance in the sleeping arrangements (Table 15). The results showed that Chinese immigrants who have been in Canada longer are less likely to choose co-sleeping. Child's age also played a significant role in parents' decision of sleeping arrangements, such that parents are more likely to co-sleep with younger children. As children get older, they may be put into a separate bedroom as solitary sleepers.

Table 14 Results of Stepwise Multiple Regression Analysis: Predicting the Sleeping Arrangements from Parents' Demographic Variables (N= 143)

Independent Variable	Equation		Coefficients		
	R^2	F	Beta	t	r
Parents' length of residency in Canada	.068	10.323*	-.261	-3.213*	-.261**

* $p < .05$, ** $p < .001$

Table 15 Results of Stepwise Multiple Regression Analysis: Predicting the Sleeping Arrangements from Child's Demographic Variables (N= 143)

Independent Variable	Equation		Coefficients		
	R ²	F	Beta	t	r
Child's Age	.075	11.823**	-.275	-3.438**	-.275**

* p < .05, ** p < .001

The house setting predictors, which include bedroom numbers and property type, were entered into regression equation, such that the relation between house setting and sleeping arrangements was assessed. The statistically significant F-test indicated that the bedroom numbers predicted sleeping arrangements, and the coefficient of determinations (R²) showed that the bedroom numbers accounted for 3.2% of the variance in the sleeping arrangements (Table 16).

Table 16 Results of Stepwise Multiple Regression Analysis: Predicting the Sleeping Arrangements from House Setting Variables (N= 145)

Independent Variable	Equation		Coefficients		
	R ²	F	Beta	t	r
Bedroom Number	.032	4.761*	-.179	-2.182*	-.179*

* p < .05

The result showed that space availability predicted sleeping arrangements of Chinese immigrants in this study. Families that have more bedrooms were more likely to choose solitary sleeping. The space availability

made the Chinese immigrants in this study less likely to choose co-sleeping as their sleeping arrangement.

The Influence of Cultural Values and Beliefs, and Social Norms on Sleeping Arrangements

Cultural values and beliefs did not predict sleeping arrangements.

However, social norms, especially perceived Chinese social norms of co-sleeping predicted sleeping arrangements. The coefficient of determinations (R^2) showed that the perceived Chinese social norms of co-sleeping accounted for 3.4% of the variance in the sleeping arrangements (Table 17). Result showed that Chinese parents who perceived that family members, friends and professionals from Chinese community agree with co-sleeping arrangements were more likely to choose co-sleeping.

Table 17 Results of Stepwise Multiple Regression Analysis: Predicting the Sleeping Arrangements from Social Norms (N= 147)

Independent Variable	Equation		Coefficients		
	R^2	F	Beta	t	r
The perceived Chinese social norms of co-sleeping	.034	5.115*	.184	2.262*	.184*

* $p < .05$

The Influence of the Values, Including those Pertaining to Family, Children, and Romantic Relationships on sleeping Arrangement

The values pertaining to parenting, children, and romantic relationships were not related to sleeping arrangements among Chinese immigrants in this study. When Chinese immigrants made decisions about sleeping arrangements with their pre-school aged children, they did not take into account the influence of family value, value of children, and their general attitudes about romantic relationships.

The Influence of Beliefs about the Effects of Sleeping Arrangements on Sleeping Arrangements

The beliefs about the effects of sleeping arrangements predictors, which include beliefs regarding interdependence, independence, marital quality, and children's development, were entered into regression equation, such that the relation between the beliefs about the effects of sleeping arrangements and sleeping arrangements was assessed. The statistically significant F-test indicated that the beliefs regarding solitary sleeping, marital quality, independence, and interdependence predicted sleeping arrangements, and the coefficient of determinations (R^2) showed that the above variables accounted for 19.4% of the variance in the sleeping arrangements (Table 18).

Table 18 Results of Stepwise Multiple Regression Analysis: Predicting the Sleeping Arrangements from The Beliefs about the Effects of Sleeping Arrangements (N= 145)

Independent Variables	Equation		Coefficients		
	R2	F	Beta	t	r
	.194	8.425**			
Beliefs about Solitary Sleeping			-.331	-3.348**	-.315**
Beliefs about Marital Quality			-.173	-2.108*	-.281**
Beliefs about Independence			.241	2.487*	-.072
Beliefs about Interdependence			.193	2.160*	.303**

* $p < .05$, ** $p < .001$

The results showed that the beliefs regarding interdependence, independence, marital quality, and solitary sleeping predicted sleeping arrangements among Chinese immigrants in this study. Chinese immigrants who value marital quality and solitary sleeping were more likely to choose solitary sleeping. Chinese immigrant parents who value interdependence were more likely to choose co-sleeping. In the meantime, Chinese parents in this study who value independence were also more likely to choose co-sleeping.

Summary of the Factors related to Sleeping Arrangements among Chinese Immigrants

Cultural values and beliefs, family values, value of children, and value of romantic relationships did not predict sleeping arrangements among Chinese immigrants in this study. Chinese social norms of co-sleeping, beliefs related to sleeping arrangements, parents' length of residency in Canada, children's age,

and space availability significantly influenced the decision of sleeping arrangements of Chinese immigrants in this study.

Chinese parents in this study who had high score on Chinese social norms of co-sleeping were more likely to choose co-sleeping. Parents who believe interdependence and independence are more important show a strong tendency to choose co-sleeping, whereas beliefs about solitary sleeping arrangements and marital quality show a negative effect on co-sleeping arrangements.

Two demographic factors, child's age and parents' length of residence in Canada influenced Chinese parents' decision about sleeping arrangements. The longer the parents live in Canada, the less likely they would choose co-sleeping; Chinese parents in this study also chose to co-sleep with their young child. When the child was getting older, the parents would transit the child to a separate bedroom. Space availability also negatively related to co-sleeping. The greater the number of bedrooms, the less likely the parents would co-sleep with their young child.

CHAPTER 4 DISCUSSION

The results from demographic analyses and multiple regression analysis have theoretical and practical implications. This chapter presents the implications, significance, and limitations of this study. Directions for future research are also discussed.

Theoretical and Practical Implications

The first objective of this study was to explore the characteristics of sleeping arrangements of Chinese immigrants. Results indicate that most Chinese immigrants in this study co-slept with their preschool children (77% children sleep in parents' bed or bedroom). Among the co-sleeping families, 60% of parents co-sleep with their child every night. This finding suggests that although Chinese Canadian parents are experiencing acculturation and may try to adapt to a new society that support solitary sleeping, they still choose co-sleeping as one of their childrearing practices. This finding is consistent with other studies about co-sleeping among Asian population (e.g., Kawasaki, Nugent, Miyashita, & Brazelton, 1994; Latz, Wolf, & Lozoff, 1999; Li, et al., 2009). Most studies of sleeping arrangements mainly focus on populations such as Caucasians (e.g., Germa, et al., 2007), Chinese (e.g., Li, et al., 2009), African Americans (Lozoff, Askew, & Wolf, 1984; Lozoff, et al., 1996), Hispanic Americans (Schachter, Fuchs, Bijur, & Stone, 1989), and Asian

Americans (e.g., Keller & Goldberg, 2004). This study extends previous research on sleeping arrangements by exploring the sleeping arrangements between Chinese-Canadian parents and their young child. This study also raised many potential research topics of sleeping arrangements. For example, researchers can examine the characteristics of sleeping arrangements and the factors related to choosing co-sleeping by accounting for different cultural experiences of a cultural group (such as Chinese Canadians in this study) relative to another group (such as Chinese individuals from China).

The second objective of this study was to explore the factors related to the sleeping arrangements decision among Chinese immigrants. The study showed that, personal beliefs about the effects of sleeping arrangements, which include beliefs about marital quality, solitary sleeping, interdependence, and interdependence, influenced the decision of sleeping arrangements. Chinese parents who favor co-sleeping tend to believe that interdependence is important and having children co-sleep with their parents can strengthen this important trait in their children. In the meantime, Chinese parents in this study who value independence were also more likely to choose co-sleeping. The correlation between beliefs of independence and sleeping arrangements was not significant ($r = -.074, P = .373$). However, the belief about independence still predicted co-sleeping among Chinese immigrants in this study. One possible

interpretation of this unexpected results is that Chinese-Canadians' special circumstance in Canada. Being exposed by dominant Canadian ideology, they accept the importance of independence, while maintaining the importance of interdependence. For this reason, they associate these two opposite constructs with the co-sleeping exercise which they are taken for granted. Another possible explanation might due to a suppressor effect. The concept of suppression was first introduced by Horst (1941). Horst defined suppressor variable has zero correlation with the dependent variable but still paradoxically contributing to the predictive validity of the test. Because variables almost never have a zero correlation with the dependent variable in practice, thus variables have very small correlation with the dependent variable may also considered suppressor variables (Cohen & Cohen, 1975). In this study, the correlation between belief about independence and sleeping arrangements was $-.074$, but the belief about independence still predicted the sleeping arrangements. Therefore, the belief about independence can be defined as a suppressor variable. Generally, the presence of suppressor variable makes researchers aware of potential contributors to the dependent variable. In this particularly study, the presence of the suppressor variable of belief about independence makes us aware that both beliefs about interdependence and independence may influence the sleeping arrangements decision of Chinese

immigrants who may have adopted both independence and interdependence in their value system.

As noted in Chapter 1, several studies have examined the relation between sleeping arrangements and parents' attitude about marital quality, and the findings are contradictory. On the one side, some researchers found that co-sleeping parents have lower marital quality (Germon, et al., 2007), or that non-co-sleeping parents are concerned about children's interference with their marriage (Shweder et al., 1995). Other researchers found that some parents did not consider co-sleeping because they think that children act as an intruders to their marital relationships (e.g., Ball, et al., 2000). The statement that Chinese-Canadian parents who value marital quality tend to believe that co-sleeping could compromise the marriage relationship is supported from our findings. Chinese immigrants' attitude toward marital quality also affects their choice of co-sleeping.

Beliefs regarding child development did not predict sleeping arrangements among Chinese immigrants in this study. There are two possible explanations for this relation. First, the beliefs regarding children's development include variables mainly related to children (e.g., feeding), there might be other factors that could be added, for example, variables related to parents' interdependent beliefs. Second, although practical considerations (e.g.,

feeding) are important when parents make decisions about co-sleeping arrangements, other crucial variables include cultural beliefs about sleeping arrangements (i.e., interdependence) may play a more important role in this matter compared to the practical considerations.

With regard to cultural values and social norms, previous studies showed that cultural values and social norms are significant factors in determining co-sleeping arrangements (e.g., Lee, 1992; Morelli, et al., 1992; Shweder et al., 1995). Ramos (2001) found that individualism was negatively correlated with solitary sleeping and collectivism was negatively correlated with co-sleeping. Ramos suggested examining “the relationship between the parental belief systems of individualism and collectivism and family sleeping arrangements at the level of both culture and individual.” (p. 44).

Contrary to previous study, the findings of this study suggested that general cultural values and beliefs did not influence sleeping arrangements. In stead, cultural beliefs of interdependence and independence related to sleeping arrangements predicted sleeping arrangements. It is possible that the specific cultural beliefs related to sleeping arrangements are influenced by general cultural values and beliefs. As a consequence, Chinese Canadian parents who endorse Canadian cultural values and beliefs are less likely to support the personal belief that co-sleeping fosters interdependence, and thus less likely to

choose co-sleeping. They also tend to agree that co-sleeping undermines marriage quality, which in turn makes them disapprove co-sleeping arrangements. Contrary to Chinese parents with higher value on Canadian cultures, it is possible for Chinese Canadian parents who endorse Chinese cultural values and beliefs more likely to support the belief that co-sleeping fosters children's interdependence and supportive attitudes. It is also possible that for Chinese-Canadian parents with strong Chinese cultural orientation, marriage quality is not a major consideration when they decide on sleeping arrangements. The relationships among general cultural values and beliefs, beliefs related to sleeping arrangements, and sleeping arrangements needs to be explored in the future.

Because so little research has been done about the co-sleeping practices of immigrants (and specifically Chinese immigrants to Canada), many questions remain, some of which this study will try to answer. For instance, if Chinese immigrants still choose co-sleeping, and in the meantime, choose to adapt to Canadian culture at work or school, is it because of their preference to acculturate at different speeds and levels in different domains? That is, they prefer to adopt the values of Canadian culture in public domain, whereas still keep their Chinese cultural values of childrearing practices in the private domain. What factors determine whether Chinese immigrants adopt co-sleeping

practice? According to the bi-dimensional model of acculturation and domain specific acculturation model, Chinese immigrants may adopt some Western cultural values whereas maintain Chinese values of childrearing. They may choose to follow Canadian culture and customs in the public domain whereas let the Chinese values to determine their private domains, such as sleeping arrangements. No studies to date have addressed the above questions. More research is needed to explore the above questions.

Furthermore, the results indicate that the social norms influenced sleeping arrangements. According to Ajzen's theory of planned behavior (Ajzen, 1991), behavioral beliefs and normative beliefs influence people's behaviors by influencing people's attitude toward the specific behavior.

In addition, the children's age and the parents' length of residence in Canada influenced choice of sleeping arrangements. Chinese Canadian parents are more likely to co-sleep with younger children. Longer length of residence in Canada predicted less co-sleeping with their young children.

In North America, solitary sleeping is a common sleeping arrangement. Many parents choose solitary sleeping arrangement based on their beliefs that it will boost independence. Health professionals (e.g., pediatricians, nurses) suggest that parents should not co-sleep with their young child, especially in the same bed, for safety considerations (e.g., Alexander & Radisch, 2005).

According to the findings of this study, Chinese parents choose co-sleeping mainly based on their cultural beliefs of interdependence. Safety and practical considerations (e.g., breast-feeding) did not influence Chinese parents' decisions of co-sleeping. It is obvious that there is a gap between Chinese parents and North American health professionals regarding sleeping arrangements. It is important for North American health professionals to take into account the cultural beliefs and values about sleeping arrangements in their interactions with Chinese parents. Meanwhile, the finding is also informative for increasing intercultural/interethnic understandings, particularly for individuals who provide services or have contact with Chinese immigrants and their young children (e.g., childcare professionals, multicultural brokers) that sleeping arrangements vary according to their clients' cultural/ethnic background, and cultural values and beliefs.

Canada is a multicultural society that encourages and supports the maintenance and practice of the heritage culture. People from different cultures experience acculturation in different ways and vary in acculturation level in different aspects. It is possible that the childrearing practices are probably the least acculturated part for many immigrant parents. Put differently, the values and beliefs from their original culture still influence parents' childrearing practices even though they are exposed to competing values and beliefs from

the host culture (e.g. Chinese Canadian immigrants in this study). Therefore, based on the findings of the study, it is possible that the beliefs of childrearing vary according to immigrants' cultural/ethnic background as the results clearly showed that Chinese Canadian parents co-sleep with their young child. This finding has two important implications. First, it is important to for researchers and health services providers to acknowledge and address these differences when studying immigrants for the purpose of promoting intercultural understanding and sensitivity, and for furthering future research scope. Second, it is useful to consider when furthering future research scope that individuals from similar geographic regions (e.g., East Asia) might share similar cultural values or beliefs (e.g., Confucianism shared by Japanese and Koreans) as Chinese immigrants. In this study, Chinese parents chose co-sleeping mostly based on their emphasis of interdependence. This study illustrates the importance of addressing cultural differences in co-sleeping practices in order to develop a mutual understanding of different cultures.

Limitations and Directions for Future Research

This study is an exploratory research study in the area of sleeping arrangements of Chinese-Canadians. The findings not only have theoretical and practical significance by themselves, but also provide leads to developing further studies in various ways and areas based on its limitations.

Sample Limitations

First, the sample used in this study was not large and, for convenience, most participants were recruited from one city. Thus, since it is not a representative sample, findings from the study should be interpreted with some caution.

Second, this study only included first generation Chinese immigrants, and so conclusions drawn can only be based on this particular population. General conclusions regarding the impact of cultural values and beliefs on sleeping arrangements for people from other cultural groups require more research.

Acculturation and Sleeping Arrangements

It is also important for future studies to examine sleeping arrangements within immigrants with different acculturation levels (e.g., how much have they acculturated to a new culture). This study used two questionnaires to measure the acculturation level of Chinese immigrants, the Vancouver Index of Acculturation and Asian Value Scale. This might not be enough to measure the acculturation level of Chinese immigrants. In the meantime, parents' self-report could give rise to potential response biases. For example, parents may answer questions in a way that they think is the "right" answer instead of providing their actual thoughts. To avoid this possibility, other forms of measurements,

such as longitudinal or cross sectional methods, should be used alongside of questionnaires in order to obtain a better evaluation of participants' true acculturation level. Longitudinal and cross sectional are methods useful in exploring the effects of cultural values and beliefs on sleeping arrangements and other childrearing practices. Because acculturation is a long process, it may take as long as a few generations for some changes to occur. Therefore it would be useful to compare people with different levels of acculturation, for example, first generation Chinese immigrants and second generation Chinese immigrants, in order to explore the relationship between levels of acculturation and sleeping arrangements. Future studies could investigate this comparison.

Father's Role in Sleeping Arrangements

Most participants in this study were mothers. Among the 148 participants in this study, only 19.1% were fathers. Mothers may differ from fathers in their belief systems regarding co-sleeping. Thus, it is not appropriate to apply results obtained from mothers in this study to both parents. According to Ramos (2001), mothers and fathers may have different beliefs regarding childrearing and marriage. Because Chinese people tend to be family-oriented, childrearing does not just depend on the mother but it involves efforts from all family members, including fathers and grandparents. Future research could expand the scope of the current study by including other family members, such

as fathers, grandparents, and siblings in order to have a more comprehensive understanding of sleeping arrangements among Chinese Canadians.

Intercultural Marriage and Sleeping Arrangements

It is worth investigating a special group of couples within intercultural marriage, especially the group of couples consists of Canadian husbands and Chinese wives. Conflicts about childrearing beliefs and practices may occur between couples of different cultural backgrounds. Researchers can gain a better insight into how culture influences sleeping arrangements and other childrearing practices by studying the intercultural marriage group.

Attachment and Co-sleeping

The current study only focused on the factors influencing parents' decision of sleeping arrangements. However, in future research, it is advisable to investigate how sleeping arrangements influence children's development in later years. For example, the relationships between sleeping arrangements and children's attachment styles should be investigated more intensively (Keller, 2008).

The theoretical assumption of Attachment Theory is that infants and their caretakers are innately prepared to establish close attachments with each other (Bowlby, 1969). Based on this theoretical assumption, attachment

theorists have investigated the different kinds of relationships which young children's establish with their parents during their first year of life.

One of the most influential empirical studies on attachment is that of Mary Ainsworth and her colleagues (Ainsworth, Blehar, Waters, & Wall, 1978). Ainsworth and her colleagues developed the "strange situation" paradigm, in which researchers examine infants' behavioral reactions in the presence or absence of their mother and a stranger. First, the target infant and his/her mother were escorted to an experimental room. Then, the mother left the room while a stranger came in the room. Finally, the stranger left while the mother came back to the experimental room.

Based on the findings of their observational research, Ainsworth maintained that there were three identifiably different attachment styles: (a) the secure attachment style; (b) the avoidant attachment style; and (c) the anxious-ambivalent (aka resistant) attachment style. Infants who hold the secure attachment style occasionally look for their mother's presence when she is around, and show their desire to be close to her after being left alone after staying with a stranger. Meanwhile, securely attached infants show their curiosity to the new environment, and freely explore when they are with their mothers. Infants who hold the avoidant attachment style show little distress on their mother's absence, and even though their mother comes back to room, they

tend to avoid on her return. The infants who hold the anxious-ambivalent attachment style (the resistant attachment style) show intensive distress when the mother is absent. But, they continue to show their distress even when their mother comes back to the room. Furthermore, these children sometimes show very complex behavioral reactions: they show a desire to cling their mother, but when their mothers come closer to them, they resist and push the mother away. Ainsworth et al. (1978) reported that about 20% of American infants have been classified as those who hold avoidant attachment style, 70% as those who hold secure attachment style, and 10 as those who hold anxious-ambivalent (resistant) attachment style.

Since Ainsworth and her colleagues' first research report, many researchers have investigated the validity of three attachment styles in the cross-cultural context. To date, the findings are mixed. Some researchers maintain that there are no fundamental differences in attachment styles across culture, and have reported that the majority of infants are securely attached in different cultures (e.g., van IJzendoorn, Sagi, & Lambermon, 1992; Hu & Meng, 1996). Attachment security is mainly dependent on the caregivers' sensitive and prompt response to infants' attachment signals (van IJzendoorn & De Wolff, 1997; Bakermans-Kranenburg, van IJzendoorn, & Juffer, 2003).

However, other researchers have reported that there were fundamental differences in the ratio of each attachment style in a given culture. For example, Grossman and his colleagues (Grossman, Grossman, Huber, & Wartner, 1981) reported that, contrary to what was found in the US, the most common attachment style in Germany was avoidant. They discuss that, in German culture, the avoidant reaction is seen as positive sign of early independence. Whereas, the secure attachment style was seen as negative signs which make infants spoiled. Other researchers (e.g. Sagi et al, 1985, Sagi, van IJendoorn, Koren-Karie, 1991) investigated attachment styles in the Israeli Kibbutz. Early in the 20th century, those who advocated the Zionist movement established a system of communal child care in Israeli so as to free the adults to spend more time for their business. In this system, infants above 3 months old were raised in a communal environmental with a caretaker and several other children of their own age. The results indicated that the most common attachment style of kibbutz-reared Israeli infants was the anxious-ambivalent style, whereas the secure and avoidant attachment styles were relatively low compared to American data. Furthermore, the data of Japanese infants indicated that the avoidant reaction was rare, and the categorization advocated by Ainsworth and her colleagues per se may not apply to them (Miyake, Chen, & Campos, 1985). Given these reports, these researchers maintain that there are substantial

cultural variation in attachment style, while suggesting a more holistic understanding of cultural values, well-being, and child-caretaker interpersonal relationship.

In the meantime, it is also important to explore the relations between co-sleeping and the formation of a specific attachment style in a particular culture context. However, the current study did not explore the relation between co-sleeping and attachment style between parents and children. Further study is needed to explore this relation, especially if there are any cultural differences in interpreting different attachment styles, and how those interpretations of attachment styles, on the one hand, influence Chinese-Canadians' decision about sleeping arrangements, and on the other hand, have various impact on children's development. This will extend the co-sleeping study of Chinese Canadians beyond this study scope by including the influence of sleeping arrangements on children's development. It is also worth to study whether Chinese immigrant parents' emphasis of interdependence is related to children's development of attachment style.

Conclusion

This study extended previous research by exploring the characteristics of sleeping arrangements of Chinese immigrants in Canada. Most Chinese immigrants in this study chose to co-sleep with their children even though they

live in a Western country where solitary sleeping is common. Also, this study explored the sleeping arrangements of Chinese immigrants from a cultural perspective based on factors relevant to acculturation. The results showed that Chinese immigrants chose co-sleeping based on their beliefs about sleeping arrangements related to interdependence, independence, marital quality, and solitary sleeping. The perceived social norms of sleeping also influenced the sleeping arrangements of Chinese Canadians. The results showed that parents' length of residency in Canada, child's age, and space availability (i.e., bedroom number) also influenced on Chinese immigrants' decision of sleeping arrangements.

REFERENCES

- Ainsworth, M., Blehar, M., Waters, E., & Walls, S. (1978). *Patterns of attachment*. Hillsdale, NJ: Erlbaum.
- Ajzen, I. (1991). The theory of planned behavior. *Organizational Behavior and Human Decision Processes*, 50, 179-211.
- Alexander, R. T., & Radisch, D. (2005). Sudden Infant Death Syndrome risk factors with regards to sleep position, sleep surface, and co-sleeping. *Journal of Forensic Science*, 19, 147-151.
- Andujo, E. (1988). Ethnic identity of transethnically adopted Hispanic adolescents. *Social Work*, 33, 531-535.
- Arends-Toth, J., & Van de Vijver, F. J. R. (2003). Multiculturalism and acculturation: Views of Dutch and Turkish-Dutch. *European Journal of Social Psychology*, 33, 249-266.
- Bakermans-Kranenburg, M. J., van IJzendoorn, M. H., & Juffer, F. (2003). Less is more: Meta-analyses of sensitivity and attachment interventions in early childhood. *Psychological Bulletin*, 120, 195-215.
- Ball, H. L., Hooker, E., & Kelly, P. J. (2000). Parent–infant co-sleeping: Fathers’ roles and perspectives. *Infant and Child Development*, 9, 67–74.
- Berry, J. W. (2001). A psychology of immigration. *Journal of Social Issues*,

57(3), 615-631.

- Blair, P.S., et al. CESDI SUDI Research Group (1999). Babies sleeping with parents: Case-control study of factors influencing the risk of the Sudden Infant Death Syndrome. *British Journal of Medicine*, 319, 1457-1462.
- Bowlby, J. (1969). *Attachment and loss: Attachment (Vol. 1)*. New York: Basic.
- Brazelton, T. (1992). *Touchpoints: Your child's emotional and behavioral development*. Reading, MA: Addison-Wesley.
- Brenner, R. A., Simons-Morton, B. G., Bhaskar, B., Revenis, M., Das, A., & Clemens, J. D. (2003). Infant-parent bed sharing in an inner-city population. *Archives of Pediatrics & Adolescent Medicine*, 157, 33-39.
- Caudill, W., & Plath, D. (1966). Who sleeps by whom? Parent-child involvement in urban Japanese families. *Psychiatry*, 29, 344-366.
- Cialdini, R. B., Kallgren, C.A., & Reno, R. R. (1991). A focus theory of normative conduct. *Advances in Experimental Social Psychology*, 24, 201-234.
- Cialdini, R. B., Reno, R. R., & Kallgren, C.A. (1990). A focus theory of normative conduct: Recycling the concept of norms to reduce littering in public places. *Journal of Personality and Social Psychology*, 58, 1015-1026.

- Clément, R. (1980). Ethnicity, contact and communicative competence in a second language. In H. Giles, W. P. Robinson, & P. M. Smith (Eds.), *Language: Social psychological perspective* (pp. 147-154). Oxford: Pergamon.
- Clément, R. & Noels, K. (1992). Towards a situated approach to ethnolinguistic identity: The effects of status on individuals and groups. *Journal of Language and Social Psychology*, 11, 203-232
- Cohen, J., & Cohen, P. (1975). *Applied multiple regression/correlation analysis for the behavioral sciences*. New York, NY: Wiley.
- Cox, M. J., Owen, M. T., Lewis, J. M., & Henderson, V. K. (1989). Marriage, adult adjustment and early parenting. *Child Development*, 60(5), 1015-1024.
- Demarest, E.J., Reisner, E.R., Anderson, L.M., Humphrey, D.C., Farquhar, E., & Stein, S.E. (1993). *Review of research on achieving the nation's readiness goal*. Washington, DC: U.S. Department of Education.
- East-West Population Institute. (1975). *The value of children: A cross-national study*. Honolulu, HI: East-West Center.
- Ferber, R. (1986). Sleepless child. In C. Guilleminault (Ed.), *Sleep and its disorders in children* (pp. 141-163). New York: Raven.
- Fishbein, M., & Ajzen, I. (1975). *Belief, attitude, intention, and behavior*.

Reading, MA: Addison-Wesley.

Germo, G., Chang, E., Keller, M., & Goldberg, W. (2007). Child sleep arrangements and family life: Perspectives from mothers and fathers. *Infant and Child Development*, 16, 433-456.

Goldberg, W. A., & Easterbrooks, M. A. (1984). Role of marital quality in toddler development. *Developmental Psychology*, 20, 504-514.

Grossman, F. K., Eichler, L. S., & Winickoff, S. A. (1980). *Pregnancy, birth, and parenthood*. San Francisco: Jossey-Bass.

Grossman, K. E., Grossman, K., Huber, F., & Wartner, U. (1981). German's children's behavior towards their mothers at 12 months and their fathers at 18 months in Ainsworth's Strange Situation. *International Journal of Behavioral Development*, 4, 157-181.

Hanks, C., & Rebelsky, F. (1977). Mommy and the midnight visitors: A study of occasional co-sleeping. *Psychiatry*, 40, 277-280.

Hofstede, G. (1980). *Culture's consequences: International differences in work-related values*. Beverly Hills, CA: Sage.

Horst, P. (1941). The prediction of personnel adjustment. *Social Science Research and Council Bulletin*. 48, 431-436.

- Hu, P. & Meng, Z. (1996). *An examination of infant-mother attachment in China*. Poster presented at the meeting of the International Society for the Study of Behavioral Development, Quebec City, QB, Canada.
- Hunsely, M., & Thoman, E. B. (2002). The sleep of co-sleeping infants when they are not co-sleeping: Evidence that co-sleeping is stressful. *Developmental Psychology*, 40, 14-22.
- Jackson, D. (1999). *Three in a bed: the benefits of sharing your bed with your baby*. New York: Bloomsbury.
- Johnson, F. (1985). The West concept of self. In A. Marsella, G. DeVos, & F. L. K. Hus (Eds.) *Culture and self*. London: Tavistock.
- Jorch, H., & Schleimer, B. (1998). *The optimal sleep environment for your child: A guide for parents and all who want to become parents* (translated from German). Bochum, Germany: Johanniter-Unfall-Hilfe.
- Kashima, E., & Hardie, E. (2000). The development and validation of the relational, individual, and collective self-aspects (RIC) scale. *Asian Journal of Social Psychology*, 3, 19-48.
- Kawasaki, C., Nugent, J. K., Miyashita, H., Brazelton, T. (1994). The cultural organization of infants' sleep. *Children's Environments Quarterly*, 11(2), 135-141.

- Keller, M. A. (2008). *A contextual approach to understanding the relations between infant and toddler sleeping arrangements and children's socio-emotional well-being*. Unpublished doctoral dissertation, University of California, Irvine.
- Keller, M. A., & Goldberg, W. A. (2004). Co-sleeping: help or hindrance for young children's independence? *Infant and Child Development*, 13, 369-388.
- Kim, B. S. K., Atkinson, D. R., & Yang, P. H. (1999). The Asian Values Scale (AVS): Development, factor analysis, validation, and reliability. *Journal of Counseling Psychology*, 46, 342-352.
- Kim, C., Laroche, M., & Tomiuk, M. A. (2001). A measure of acculturation for Italian Canadian: Scale development and construct validation. *International Journal of Intercultural Relations*, 25, 607-637.
- Klackenberg, G. (1982). Sleep behavior studied longitudinally. *Acta Paediatrica Scandinavica*, 7, 501-506.
- Klackenberg, G. (1987). Incidence of parasomnias in children in a general population. In C. Gullemingult (Ed.), *Sleep and its disorders in children* (pp. 99-113). New York: Raven.
- Lafromboise, T., Coleman, H. L. K. & Gerton, J. (1993). Psychological impact of biculturalism: evidence and theory. *Psychological Bulletin*, 114(3),

395-412.

Latz, S., Wolf, A., & Lozoff, B. (1999). Sleep practices and problems in young Children in Japan and the United States. *Archives of Pediatric Adolescent Medicine*, 153, 339-345.

Lee, K. (1992). Pattern of nightwaking and crying of Korean infants from 3 months to 2 years old and its relation with various factors. *Journal of Developmental and Behavioral Pediatrics*, 13, 326-330.

Li, S., Jin, X., Wu, S., Jiang, F., & Shen, X. (2009). Factors associated with bed and room sharing in Chinese school-aged children. *Child: Care, Health, and Development*, 35(2), 171-177.

Lozoff, B., Askew, G., & Wolf, A. (1996). Cosleeping and early childhood sleep problems: Effects of ethnicity and socioeconomic status. *Journal of Developmental and Behavioral Pediatrics*, 17, 9-14.

Lozoff, B., Wolf, A., & Davis, N. (1984). Cosleeping in urban families with young children in the United States. *Pediatrics*, 74(2), 171-182.

Madansky, D., & Edelbrock, C. (1990). Cosleeping in a community sample of 2- and 3-year-old children. *Pediatrics*, 86(2), 197-203

Markus, H. R., & Kitayama, S. (1991). Culture and the self: Implications for cognition, emotion and motivation. *Psychological Review*, 98 (2), 224-253.

- McKenna, J. (1993). Infant–parent co-sleeping in evolutionary perspective: Imperatives for understanding infant sleep development and SIDS. *Sleep*, 16(3), 263–282.
- McKenna, J. (1996). Sudden Infant Death Syndrome in cross-cultural perspective: Is infant-parent cosleeping protective? *Annual Review of Anthropology*, 25, 201-216.
- McKenna, J. (2000). Cultural influences on infant and childhood sleep biology and the science that studies it: Toward a more inclusive paradigm. In J. Loughlin, C. Marcos, & J. Carroll, (Eds.). *Sleep and breathing in children: A developmental approach* (pp. 199-230). New York: Marcel Dekker.
- McKenna, J., Mosko, S., & Richard, D. (1997). Bed sharing promotes breastfeeding. *Pediatrics*, 100, 214-219.
- Mead, M. (1949). *Coming of age in Samoa*. New York: Mentor Books.
- Miyake, K., Chen, S-J., & Campos, J. (1985). Infant temperament and mother's mode of interaction and attachment in Japan: an interim report. In I. Bretherton and E. Waters (Eds.), *Growing points of attachment theory and research*. Monographs of the Society for Research in Child Development, 50, Serial No. 209, 276-297.
- Morelli, G. A., Rogoff, B., Oppenheim, D., & Goldsmith, D. (1992). Cultural

variation in infant's sleeping arrangements: questions of independence.

Developmental Psychology, 28 (4), 604-613.

Oakes, J. M., & Rossi, R. H. (2003). The measurement of SES in health research: Current practice and steps toward a new approach. *Social Science and Medicine*, 56, 769–784.

Phinney, J. S. (1990). Ethnic identity in adolescents and adults: review of research. *Psychological Bulletin*, 108, 499-514.

Ramos, K. D. (2001). *Parent-child co-sleeping in the context of parental belief systems*. Unpublished doctoral dissertation. University of Missouri-Columbia: St. Louis, Missouri.

Ramos, K. D. (2003). Intentional versus reactive cosleeping. *Sleep Research Online*, 5(4): 141-147

Redfield, R., Linton, R., & Herskovits, M. (1936). Memorandum on the study of acculturation. *American Anthropologist*, 38, 149-152.

Rothrauff, T., Middlemiss, W. L., & Jacobson, L. (2004). Comparison of American and Austrian infants' and toddlers' sleep habits: A retrospective, exploratory study. *North American Journal of Psychology*, 6 (1), 125-144.

Ryder, A.G., Alden, L.A., & Paulhus, D.L. (2000). Is acculturation unidimensional or idimensional?: A head-to-head comparison in the

prediction of personality, self-identity, and adjustment. *Journal of Personality and Social Psychology*, 79, 49-65.

- Sagi, A., Lamb, M. E., Lewkowicz, K. S., Shoham, R., Dvior, R., & Estes, D. (1985). Security of infant-mother, father, metapelet attachments among kibbutz-reared Israeli Children. *Monographs of the Society for Research in Child Development*, 50 (1-2), 257-275.
- Sagi, A., van IJendoorn, M. H., & Koren-Karie, N. (1991). Primary appraisal of the Strange Situation: A cross-cultural analysis of preparation episodes. *Developmental Psychology*, 27(4), 587-596.
- Sears, W. (1999). *Nighttime parenting (revised): How to get your baby and child to sleep*. New York: Plume.
- Sears, W. & Sears, M. (1993). *The baby book*. Little, Toronto, Canada: Brown & Company.
- Simic, A. (1987). Ethnicity as a career for the elderly: the Serbian-American case. *Journal of Early Adolescence*, 2, 277-282.
- Singelis, T. M. (1994). The measurement of independent and interdependent self-construals. *Personality and Social Psychology Bulletin*, 20, 580-591.

- Schachter, F. F., Fuchs, M. L., Bijur, P. E., & Stone, R. K. (1989). Cosleeping and sleep problems in Hispanic-American urban young children. *Pediatrics*, 84, 522-530.
- Shweder, R. A., Jensen, L. A., & Goldstein, W. M. (1995). Who sleeps by whom revisited: A method for extracting the moral goods implicit in practice. *New Direction for Child Development*, 67, 21-39.
- Shek, D. T. L. (1996). Hong Kong parents' attitudes about marital quality and children. *The Journal of Genetic Psychology*, 157(2), 125-135.
- Small, M. (1998). Sleep with me: Trans-cultural look at the power and protection of sharing a bed. *Mothering Magazine*, 91, 62-63.
- Spanier, G. B., & Cole, C. L. (1976). Toward a clarification and investigation of marital adjustment. *International Journal of Sociology of the Family*, 6, 121-146.
- Spock, B., & Rothenberg, M. B. (1992). *Dr Spock's baby and child care*. New York: Pocket Books.
- Statistics Canada (2001). *Census of Canada*.
<http://www12.statcan.ca/english/census01/home/Index.cfm>.
Retrieved on January 20, 2010.
- Statistics Canada (2006). *Ethnic Origin (247), Single and Multiple Ethnic Origin Responses (3) and Sex (3) for the Population of Canada*,

Provinces, Territories, Census Metropolitan Areas and Census Agglomerations, 2006 Census - 20% Sample Data.

<http://www12.statcan.ca/census-recensement/2006/ref/index-eng.cfm>

Retrieved on January 20, 2010.

- Staub, E. (1972). Instigation to goodness: The role of social norms and interpersonal influence. *Journal of Social Issues*, 28, 131-150.
- Stein, M., Colarusso, C., McKenna, J., & Powers, N. (1997). Cosleeping (bedsharing) among infants and toddlers. *Journal Developmental and Behavioral Pediatrics*, 18, 408-412.
- Su, C., & Parham, D. (2002). Generating a valid questionnaire translation for cross-cultural use. *The American Journal of Occupational Therapy*, 56 (5), 581-585.
- Super, C., & Harkness, S. (1986). The developmental niche: A conceptualization at the interface of child and culture. *International Journal of Behavioral Development*, 9, 545-569.
- Touliatos, J., Perlmutter, B. F., & Straus, M.A. (1990). *Handbook of family measurement techniques*. CA: Sage.
- Triandis, H. C (1977). *Interpersonal behavior*. Monterey, CA: Brooks/Cole.
- Triandis, H. C (1995). *Individualism and collectivism*. Oxford: West View.
- Ullah, P. (1985). Second generation Irish youth: identity and ethnicity. *New*

Community, 12, 310-320.

- van IJzendoorn, M. H., & De Wolff, M. S. (1997). In search of the absent of father: Meta-analyses on infant-father attachment. A rejoinder to our discussants. *Child Development*, 68, 604-609.
- van IJzendoorn, M. H., Sagi, A., & Lambermon, M. W. E. (1992). The multiple caretakers paradox: Data from Holland and Israel. *New Directions for Child Development*, 57, 5-24.
- Welles-Nystrom, B. (2005). Co-sleeping as a window into Swedish culture: Considerations of gender and health care. *Scandinavian Journal of Caring Sciences*, 19, 354-360.
- Wolf, A. W., Lozoff, B., Latz, S., & Paludetto, R. (1996). Parental theories in the management of young children's sleep in Japan, Italy, and the United States. In S. Harkness, & C. M. Super (Eds.), *Parents' cultural belief systems: Their origins, expressions, and consequences* (pp. 364-384). New York: Guilford.
- Worthman, C. M., & Melby, M. (2002). Toward a comparative developmental ecology of human sleep. In M. A. Carskadon (Ed.), *Adolescent sleep patterns: Biological, social, and psychological influences* (pp. 69-117). New York: Cambridge.
- Yang, C. K., & Hahn, H. M. (2002). Cosleeping in young Korean children.

Journal of Developmental and Behavioral Pediatrics, 23, 151-157.

Yang, K. S. (1981b). Social orientation and individual modernity among Chinese students in Taiwan. *Journal of Social Psychology*, 113, 159-170.

APPENDIX A

Pre-contact Letter in English and Chinese

Dear Parents:

We are researchers from Department of Psychology, University of Alberta. We are conducting a research project focusing on culture values and childrearing practices among Chinese immigrants. If you were from China, speak Mandarin, and have pre-school aged child (5 and under), you are welcome to join our study. To participate in this study, you will be asked to finish 8 questionnaires which include 200 questions. All questions are in Chinese. It will take about 40-50 minutes to finish. You will receive \$20 gift card as an honorarium.

If you are interested, please contact Jianhui Song at (780) 492-5616, or via email: jianhuis@ualberta.ca, or jianhui925@hotmail.com if you use Chinese. If you know anybody who may be interested in participating this study, please help us by forwarding this letter or our contact information to them.

We thank you for your consideration of this request. Should you have any questions, please feel free to contact us. If you know somebody who may be interested in participating our study, please forward this letter or our contact information to them. Thank you for your help.

亲爱的家长： 您好！

我们是阿尔伯塔大学心理系的研究人员。我们正在进行一项关于中国移民的孩子抚养方式与文化观念之间的关系的的研究。如果您来自中国大陆，说普通话，且家中有学龄前（五岁及五岁以下）的孩子，我们非常希望您能加入到我们的研究中来。在此研究中，您所要做的就是回答 8 个中文问卷，大约 200 道题目，需要 40-50 分钟来完成。为了感谢您给我们提供的帮助，您将会获得 20 元礼品卡。

如果您有兴趣参加此研究，请与宋剑辉联系：(780) 492-5616(办公室)；Email：
jianhuis@ualberta.ca 或 jianhui925@hotmail.com （中文）

谢谢！如果您对此研究有任何问题和疑问，请与我们联系。如果您的朋友或同事可能会对参加此研究有兴趣，请您帮助我们在此信或我们的联系方式转发给他们，十分感谢您的帮助！

Sincerely,

Jianhui Song, Ph.D. Student

(780) 492-5616, e-mail: jianhuis@ualberta.ca

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Kimberly A. Noels, Ph.D.

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APPENDIX B

Research Information and Participants' Consent Form (English Version)

Purpose. You are invited to participate in a research study being conducted by Jianhui Song, Dr. Takahiko Masuda, and Dr. Kimberly A. Noels at the Department of Psychology, University of Alberta. In this study, we are interested in knowing about the relationships between sleeping arrangement and cultural values of Chinese immigrants.

Your participation. Your participation involves answering nine questionnaires which mainly focus on your sleeping arrangements and your cultural values. It takes about 1 hour to complete the questionnaires. A \$20 gift card will be offered as an honorarium.

Your rights. **Your decision to participate in this study is entirely voluntary and you may decide at any time to withdraw.** Responses made by individual participants on the questionnaire will remain confidential, and your name will not appear on the questionnaire or be associated with your responses in any way. Questionnaires will be identified only by a researcher-assigned code number. The data will be stored and locked in a safe place separate from identifying information. Only researchers associated with the project will have access to the questionnaires. This consent form will be separated from the data and stored in a separate and secure location that is accessible only by the principal investigator. The results of this study may be presented at scholarly conferences, published in professional journals, or presented in class lectures. Only grouped (aggregate) data will be presented. The data and the consent form will be securely stored by Jianhui Song, Dr. Takahiko Masuda, and Dr. Kimberly A. Noels for a maximum of five years, after that, the original data and consent form will be destroyed.

Benefits and risks. This research can potentially contribute to the advancement of our understanding of how cultural values related to sleeping arrangement. There are no foreseeable risks to this study, but if any risks should arise, the researcher will inform the participants immediately. If you should experience

any adverse effects, please contact Jianhui Song, Dr. Takahiko Masuda, and Dr. Kimberly A. Noels immediately.

Contact information. If you have any questions or comments on the study, or if you wish a clarification of rights as a research participant, you can contact Jianhui Song, Dr. Takahiko Masuda, Dr. Kimberly Noels or the Human Research Ethics Committee at the number and address below.

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Christina Gagne, Ph.D.

Human Ethics Research Committee

(ASL-REB)

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Department of Psychology

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Follow up study contact information. This study may be followed by further study. If you are willing to be contacted in the future for the follow up study, please provide your contact information. We will keep a record of your contact information and your questionnaire code for this purpose only in order to contact you for future study. This record will be kept by the principal

researcher of this study. No other person will have access to this information. You contact information will be destroyed once we finish the follow up study. Please provide your contact information by indicating the way you prefer to be contacted.

Your name: _____

I prefer to be contacted by:

1. Home phone number: _____;

2. Cell phone number: _____

3. Email address: _____

Signatures. Please sign below to indicate that you have read and understood the nature and purpose of the study. Your signature acknowledges the receipt of a copy of the consent form as well as indicates your willingness to participate in this study.

Participant's Signature

Date

Researcher's Signature

Date

APPENDIX C

Research Information and Participants' Consent Form

(Chinese Version)

研究课题简介及意愿书

目的: 我们诚邀您参加由 Alberta 大学心理系 Jianhui Song, Takahiko Masuda 博士, 和 Kimberly A. Noels 博士共同进行的一个研究项目。此研究项目主要关注中国移民的文化价值观与孩子抚养方式之间的关系。

您的参与: 在此研究中, 您将需要回答 8 个问卷, 共 200 道题目。您大约需要一个小时来回答所有的问题。为了感谢您给我们提供的帮助, 您将会获得 20 元礼品卡。

您的权利: 是否参加这个研究完全是自愿的, 且您有权利在任何时候退出此研究。您的回答是完全保密的, 您的名字不会出现在问卷上, 并且不会以任何方式与您的回答联系到一起。您的问卷将被研究者编码, 此编码是我们识别和分析问卷的惟一方式。您回答的问卷和包含有您个人信息的资料 (包括此意愿书) 将被分别存放在安全的地方。只有参与此项研究的人员才能接触问卷资料。此项研究的研究结果可能会发表于研究会议, 专业的期刊杂志, 也有可能课堂中使用。研究结果被报告时, 将只以群体数据的形式呈现。问卷答案与意愿表将被 Jianhui Song, Takahiko Masuda 博士, 和 Kimberly A. Noels 博士保存最多至五年。五年后所有的数据资料及意愿表将被销毁。

利益与风险: 此研究将有助于我们更好地理解文化价值观与孩子抚养方式之间的关系。此研究没有任何预计的风险, 但如果有任何风险发生, 研究者会立即通知被试。如果您在参加研究的过程中有任何负面或不适体验, 请立即与 Jianhui Song, Takahiko Masuda 博士, 和 Kimberly A. Noels 博士联系。

联系方式: 如果您有任何问题或评论, 或者您只是想澄清作为研究被试的权利, 您可以联系 Jianhui Song, Takahiko Masuda 博士, 和 Kimberly A. Noels 博士或 Human Research Ethics 委员会, 下面是相关联系人的地址与联系电话。

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后续跟踪研究的联系信息： 此研究可能会有后续跟踪研究。如果您希望参加将来的研究，请留下您的联系方式。我们会保存您的联系方式和您的问卷编码以便将来联系您参加跟踪研究。此信息将会由此研究的主要研究者保存，其他任何人都不能接触。在跟踪研究结束后，您的联系方式及其它相关信息将会被销毁。

您的姓名： _____

您希望我们通过以下哪种方式联系您：

1. 家庭电话： () _____, 2. 手机： () _____,
3. 电子邮件： _____

签字：请在下面的空格上签字表明您已经阅读并理解了该研究的性质与目的。
同时您的签字也表明您收到了该意愿表并自愿参与该研究。

参加者签名

日期

研究者签名

日期

APPENDIX D

Questionnaire (English Version)

Section One: Background Information (Part One)

1. Your Age _____
2. Gender: 1 Male 2 Female
3. Marital status: Single 2 Married 3 Other (please specify)

4. Your highest level of completed education:
 - 1 Junior high school and lower
 - 2 High school
 - 3 Technical/Trades Training (diploma)
 - 4 College/University diploma (2-3 years of postsecondary education)
 - 5 Bachelor
 - 6 Master
 - 7 Ph D
5. How many years of formal education have you finished? _____ years.
6. Country of birth: 1 China 2 Canada 3 Other country (please specify)

7. You identify your culture/ethnic background as:
 - 1 Chinese 2 Canadian 3 Other (please specify) _____
8. Your primary reason for coming to Canada is (please circle one):
 - 1 Study 2 Independent immigrants 3 Family Sponsored immigrants
 - 4 Other (Please specify) _____
9. Your age when you arrived in Canada: _____
10. How long have you lived in Canada? _____ year(s) _____ month(s)
11. Have you lived in other countries, excluding your country of birth (e.g. China) before you came to Canada?

1 Yes 2 No

If yes, which country _____ For how long? _____ year(s)
 _____ month(s)

12. Please circle your primary working status in China in the year just before you came to Canada according to the following categories:

- 1 Higher-grade professionals, administrators and officials, managers in industrial establishments.
- 2 Lower-grade professionals, administrators and officials, higher-grade technicians, supervisors of non-manual employees
- 3 Routine non-manual employees in administration and commerce, sales personnel, other rank-and-file employees
- 4 Small proprietors with and without employees
- 5 Farmers and small-holders, other self-employed in primary production
- 6 Supervisors of manual workers Skilled manual workers
- 7 Semi- and unskilled manual workers
- 8 Agricultural workers and other workers in primary production
- 9 Other (Please specify) _____

13. Your work experience in Canada can be described as:

- 1 Never worked in Canada
- 2 I have worked in Canada for _____ year(s) _____ month(s)

14. Please circle your primary working status in China in the year just before you came to Canada according to the following category:

- 1 Higher-grade professionals, administrators and officials, managers in industrial establishments.
- 2 Lower-grade professionals, administrators and officials, higher-grade technicians, supervisors of non-manual employees

- 3 Routine non-manual employees in administration and commerce, sales personnel, other rank-and-file employees
- 4 Small proprietors with and without employees
- 5 Farmers and small-holders, other self-employed in primary production
- 6 Supervisors of manual workers Skilled manual workers
- 7 Semi- and unskilled manual workers
- 8 Agricultural workers and other workers in primary production
- 9 Other (Please specify) _____

15. Please evaluate the following aspects:

15a. I read English...

1	2	3	4	5	6	7
Not at all		A little		Fairly well		Very well

15b. I understand English...

1	2	3	4	5	6	7
Not at all		A little		Fairly well		Very well

15c. I write English...

1	2	3	4	5	6	7
Not at all		A little		Fairly well		Very well

15d. I speak English...

1	2	3	4	5	6	7
Not at all		A little		Fairly well		Very well

16. What language(s) do you speak most of the time at home:

16a. With your spouse or partner

1	2	3	4	5	6	7
Chinese only			Mixture of Chinese and English			English only

16b. With your child(ren)

1	2	3	4	5	6	7
Chinese only			Mixture of Chinese and English			English only

Section One: Background Information (Part Two)

This part of background questions ask for information about family structure and sleeping arrangements.

*** Please note: in this part, our questions refer to your child who is the target of our research, that is, the youngest child under 5 years old.**

Please write your child's initial here: _____

Household information

1. Please list all members of your family

Age	Gender	Relation to the child

2. Your household gross income of 2008 was (please check one):

- 1 under \$5000
- 2 \$5000 – \$9999
- 3 \$10, 000 -- \$14,999
- 4 \$15, 000 -- \$19,999
- 5 \$20, 000 -- \$24,999
- 6 \$25, 000 -- \$34,999
- 7 \$35, 000 -- \$49,999
- 8 \$50, 000 -- \$74,999
- 9 \$75, 000 -- \$99,999

10 \$100,000 -- \$149,999

11 \$150,000 -- \$199,999

12 \$200,000 and over

3. Do you rent or own the house/apartment?

1 Rent 2 Own 3 Other (Please specify)

4. What is your house type?

1 Apartment 2 Bungalow 3 Bi-level 4 2-storey 5 Back-split

6 Duplex 7 Townhouse 8 Other(please specify)

5. How many bedrooms do you have? _____

6. How many beds in each bedroom?

Bedroom1 ____ Bedroom2 ____ Bedroom3 ____

Please add more if necessary: _____

7. What size is your bed? 1 Double 2 Queen 3 King 4 Other (please specify)_____

Information about your child and the sleeping arrangement:

8. Your child's birthday (month/day/year): _____

9. Your child's gender: 1 Boy 2 Girl

10. Your child's primary caretaker: _____

11. If you your child go to daycare/day home or stay with a babysitter , how often does your child go to daycare/day home or stay with a babysitter?

1	2	3	4	5	6
Never	1 day/week	2 days/week	3 days/week	4 days/week	5 days/week

12. Please indicate where you child currently sleeps.

1 In your bed

2 In your bedroom, but in his/her own bed/crib

- 3 In a separate bedroom with his/her grandparent(s)
- 4 In a separate bedroom with other family members (e.g. siblings)
- 5 In his/her own room by himself/herself

If you chose 1 or 2, please answer question 13A and 13C, and then go to question 14.

If you chose 3, please answer question 13B and 13C, and then go to question 14.

If you chose 4 or 5, please answer question 13D and 13E, and then go to question 14.

(Please answer question 13A if you chose 1 or 2 in question 12)

13A. If your child sleeps in your bedroom (either in your bed or in your bedroom but in a different bed) how was this arrangement decided?

Please circle one number.

1. We intentionally chose to let him/her to sleep in our bedroom.

1	2	3	4	5	6	7
Strongly disagree			Neither disagree nor agree			Strongly agree

2. It was necessary to sleep together because we don't have enough bedrooms.

1	2	3	4	5	6	7
Strongly disagree			Neither disagree nor agree			Strongly agree

3. Our child's behavior (e.g. my child always wakes up and cries) has made it necessary to sleep in the same bedroom.

1	2	3	4	5	6	7
Strongly disagree			Neither disagree nor agree			Strongly agree

(Please answer question 13B if you chose 3 in question 12)

13B. If your child sleeps in a bedroom with grandparent(s) (either in grandparent's bed or in grandparent's bedroom but in a different bed) how was this arrangement decided?

1. We intentionally chose to let him/her to sleep in grandparent's bedroom.

1	2	3	4	5	6	7
Strongly disagree			Neither disagree nor agree			Strongly agree

2. It was necessary to let my child sleep with his/her grandparent(s) because we don't have enough bedrooms.

1	2	3	4	5	6	7
Strongly disagree			Neither disagree nor agree			Strongly agree

3. Our child's behavior (e.g. my child always wakes up and cries) has made it necessary to sleep in the same bedroom with grandparent(s).

1	2	3	4	5	6	7
Strongly disagree			Neither disagree nor agree			Strongly agree

(Please answer question 13C if you chose 1, 2, or 3 in question 12)

13C. If your child sleeps with you or the grandparent(s) (either in the same bed or in different beds but in the same bedroom), at what age do you plan to move your child to his/her own bedroom?

_____ years _____ months old

Please specify why you want to move your child to his/her own bedroom at the age indicated above:

(Please answer question 13D, if you choose 4 or 5 in question 12)

13D. If your child currently doesn't sleep with you and/or your spouse, or the grandparent(s) (either in your bed or in a different bed), has he/she ever slept with you and/or your spouse, or the grandparent(s)?

1 Yes 2 No

If yes, how long did your child sleep with you and/or your spouse, or the grandparent(s)? ____ Year(s) ____ Month(s)

(Please answer question #13E, if you choose 4 or 5 in question 12)

13E. At what age did your child move to his/her own bedroom or sleep with sibling(s)? ____ Year(s) ____ Month(s)

14. With whom does your child sleep?

- 1 By himself/herself in his/her own room
- 2 With both parents in the parents' bedroom
- 3 Only with the mother in the parents' bedroom
- 4 Only with the father in the parents' bedroom
- 5 Only with the mother in the child's bedroom
- 6 Only with the father in the child's bedroom
- 7 With other family member(s) in a separate bedroom

15. How often does your child sleep with you in the same room?

1	2	3	4	5	6	7	8
Never	1day/ week	2day/ week	3day/ week	4day/ week	5day/ week	6day/ week	7day/ week

16. Does your child nap during the day?

1	2	3	4	5	6	7	8
Never	1day/ week	2day/ week	3day/ week	4day/ week	5day/ week	6day/ week	7day/ week

17. If your child naps, do you also sleep with your child during nap time?

1	2	3	4	5	6	7	8
Never	1day/ week	2day/ week	3day/ week	4day/ week	5day/ week	6day/ week	7day/ week

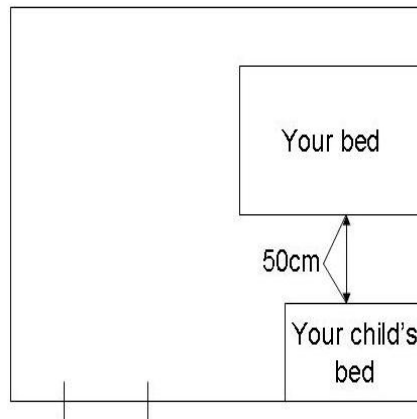
18. Please draw a picture of the setting of your sleeping area. Please also include the distance between your bed and your child's bed if applicable.

a. If you sleep with your child in the same bedroom, please follow the instructions below:

Instruction: please draw a picture of your bedroom setting includes your bed and your child's bed/crib. If your child's bed is not attached to your bed (i.e. there are some distance between the two beds), please measure the distance between the two beds. The distance should be the normal walking path when you go to your child's bed from your own bed.

Example:

Please draw your picture here:



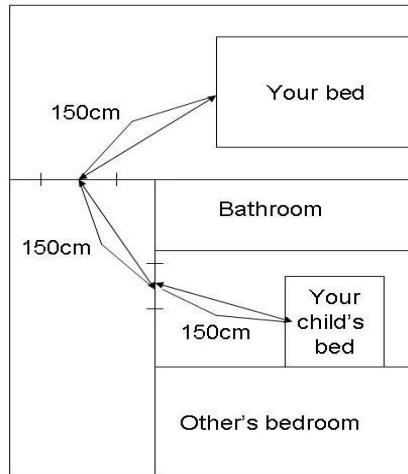
b. If your child sleeps in his/her own bedroom, please follow the instructions below:

Instruction: please draw a picture of your bedroom setting includes your bedroom and your child's bedroom. Please measure the distance between the two beds in two different bedrooms. The distance should be the normal walking

path from your bed in your own bedroom to your child's bed in his/her own bed room.

Example:

Please draw your picture here:



Section Two: Beliefs about Sleeping Arrangements

The following are statements about your opinion of sleeping arrangement.

Please answer each question as carefully as possible by circling **one** of the numbers to the right of each question to indicate your degree of agreement or disagreement. Please use the scale below to help guide your answers:

Strongly disagree	Moderately disagree	Slightly disagree	No answer	Slightly agree	Moderately agree	Strongly agree
1	2	3	4	5	6	7

1. Sleeping with my child makes feeding (e.g. breastfeeding, bottle feeding) easier. 1 2 3 4 5 6 7
2. Sleeping with my child is a fulfilling way to nurture my child. 1 2 3 4 5 6 7
3. I am responsible for taking care of my child by letting him/her sleep besides me 1 2 3 4 5 6 7
4. When my child and I sleep in separate rooms, we both can get a better sleep. 1 2 3 4 5 6 7

5. Letting my child sleep in my bedroom or my bed is good for my child's physical health. 1 2 3 4 5 6 7
6. Letting my child sleep in my bedroom or my bed is good for my child's psychological development. 1 2 3 4 5 6 7
7. Chinese in general agree that parents should sleep with children. 1 2 3 4 5 6 7
8. Letting my child sleep in his/her own bedroom is good for my child's psychological development. 1 2 3 4 5 6 7
9. Sleeping with my child makes feeding (e.g. breastfeeding, bottle feeding) harder. 1 2 3 4 5 6 7
10. Letting my child sleep in a separate bedroom does not compromise the emotional tie between my child and me. 1 2 3 4 5 6 7
11. Sleeping in his/her own room from a very young age is good for a child to be independent. 1 2 3 4 5 6 7
12. If our child sleeps in our bedroom/bed at night, it would compromise (or undermine) the romantic relationship between my partner and me. 1 2 3 4 5 6 7
13. Letting my child sleep in my bedroom or my bed decreases the danger of smothering and sudden infant death syndrome (SIDS). 1 2 3 4 5 6 7
14. Sleeping in different rooms makes feeding (e.g. breastfeeding, bottle feeding) easier. 1 2 3 4 5 6 7
15. Sleeping with my child is not necessarily helpful to create a good relationship between my child and me. 1 2 3 4 5 6 7
16. My child is an independent person, he/she needs his/her own space to sleep or play. 1 2 3 4 5 6 7
17. Sleeping in a separate room is good for my child's

- physical health. 1 2 3 4 5 6 7
18. My family members think that I should let my child sleep in a separate bedroom. 1 2 3 4 5 6 7
19. Child can't develop a sense of independence even if they have their own bedrooms. 1 2 3 4 5 6 7
20. Sleeping with my child creates a good relationship between my child and me. 1 2 3 4 5 6 7
21. If the child is next to me, he/she doesn't have to cry a lot before he/she can be fed. 1 2 3 4 5 6 7
22. Canadians in general think parents should sleep with their children. 1 2 3 4 5 6 7
23. Letting my child sleep in my bedroom or my bed helps my child to become aware of the importance of interpersonal relationship. 1 2 3 4 5 6 7
24. I slept in a separate bedroom from my parents/grandparents, so my child sleeps separately from me. 1 2 3 4 5 6 7
25. When my child and I sleep in the same room or same bed, we both can get a better sleep. 1 2 3 4 5 6 7
26. Sleeping with parents/caregiver in the same bedroom/bed is not a good way for child to know who he/she can rely on. 1 2 3 4 5 6 7
27. My child's pediatrician suggests that children should sleep in a separate bedroom from adults. 1 2 3 4 5 6 7
28. Sleeping in the same bedroom/bed with parents/caregiver makes child have the feeling of belonging to the family. 1 2 3 4 5 6 7
29. Sleeping with my child is a way of enjoying being a

- parent. 1 2 3 4 5 6 7
30. Most of my Chinese friends think their child should sleep in a separate bedroom from adults. 1 2 3 4 5 6 7
31. Letting my child sleep in his/her own bedroom decreases the danger of smothering and sudden infant death syndrome (SIDS). 1 2 3 4 5 6 7
32. Chinese in general agree that children should sleep in a separate bedroom from adults. 1 2 3 4 5 6 7
33. I have not found sleeping with my child to be a satisfying way to raise my child. 1 2 3 4 5 6 7
34. Sleeping with my child will make it easier for my child to find me when he/she needs help. 1 2 3 4 5 6 7
35. Child can develop a sense of independence if they have their own bedrooms. 1 2 3 4 5 6 7
36. Even though my child sleeps in a separate bedroom, he/she still can get my help whenever he/she needs me. 1 2 3 4 5 6 7
37. Most of my Canadian friends think parents should sleep with their children. 1 2 3 4 5 6 7
38. Even my child sleeps in a separate room, I still can keep a close eye on him/her. 1 2 3 4 5 6 7
39. Most of my Canadian friends think children should sleep in a separate bedroom from adults. 1 2 3 4 5 6 7
40. Sleeping in his/her own room from a very young age makes a child even more dependent on his/her parents. 1 2 3 4 5 6 7
41. I can be responsible enough for taking care of my child even though he/she sleeps in his/her own bedroom. 1 2 3 4 5 6 7
42. I will not let my child sleep in my bedroom/ bed because

- I want to have a private life with my partner. 1 2 3 4 5 6 7
43. My child is too young to be independent, he/she doesn't need his/her own space to sleep or play. 1 2 3 4 5 6 7
44. I feel happy to see my child's sleeping face besides me when I wake up in midnight. 1 2 3 4 5 6 7
45. I don't have any problem communicating with my partner when my child sleeps in my bedroom/bed. 1 2 3 4 5 6 7
46. Letting my child sleep in my bedroom or my bed inhibits my child's awareness of the importance of interpersonal relationship. 1 2 3 4 5 6 7
47. I sleep with my child because my parents/grandparents slept with me. 1 2 3 4 5 6 7
48. Sleeping with my child is a very important way to create a good emotional bond between my child and me. 1 2 3 4 5 6 7
49. If our child sleeps in our bedroom/bed at night, it would **not** affect the romantic relationship between my partner and me. 1 2 3 4 5 6 7
50. Sleeping with parents/caregiver in the same bedroom/bed allows child to know who he/she can rely on. 1 2 3 4 5 6 7
51. My child's pediatrician suggests that parents should sleep with their children. 1 2 3 4 5 6 7
52. If my child sleeps in our bedroom/bed, I don't have much opportunity to talk with my partner about things that concern only us. 1 2 3 4 5 6 7
53. Letting my child sleep in my bedroom or my bed can

- keep my child safe. 1 2 3 4 5 6 7
54. I feel happy to see my child's sleeping face when he/she is tucked up snugly in his/her own bedroom. 1 2 3 4 5 6 7
55. Sleeping with my child allows me to keep a close eye on my child. 1 2 3 4 5 6 7
56. Canadians in general think children should sleep in a separate bedroom from adults. 1 2 3 4 5 6 7
57. I can enjoy parenting better if my child sleeps in a separate bedroom. 1 2 3 4 5 6 7
58. Sleeping in the same bedroom/bed with parents/caregiver doesn't necessarily make child have the feeling of belonging to the family. 1 2 3 4 5 6 7
59. My family members think it is better for me to sleep with my child. 1 2 3 4 5 6 7
60. While my child is young, I am willing to give up my private life with my partner temporarily. 1 2 3 4 5 6 7
61. It is much safer if my child sleeps in a separate bedroom. 1 2 3 4 5 6 7
62. Most of my Chinese friends think parents should sleep with their children. 1 2 3 4 5 6 7

Section Three: Cultural Values

Part I : Use the scale below to indicate the extent to which you agree with the value expressed in each statement.

1 = Strongly Disagree 2 = Disagree 3 = Agree 4 = Strongly Agree

- ____1. One should not deviate from familial and social norms.
- ____2. Children should not place their parents in retirement homes.
- ____3. One need not focus all energies on one's studies.

- ____4. One should be discouraged from talking about one's accomplishments.
- ____5. Younger persons should be able to confront their elders.
- ____6. When one receives a gift, one should reciprocate with a gift of equal or greater value.
- ____7. One need not achieve academically in order to make one's parents proud.
- ____8. One need not minimize or depreciate one's own achievements.
- ____9. One should consider the needs of others before considering one's own needs.
- ____10. Educational and career achievements need not be one's top priority.
- ____11. One should think about one's group before oneself.
- ____12. One should be able to question a person in an authority position.
- ____13. Modesty is an important quality for a person.
- ____14. One's achievements should be viewed as family's achievements.
- ____15. One should avoid bringing displeasure to one's ancestors.
- ____16. One should have sufficient inner resources to resolve emotional problems.
- ____17. The worst thing one can do is to bring disgrace to one's family reputation.
- ____18. One need not remain reserved and tranquil.
- ____19. One should be humble and modest.
- ____20. Family's reputation is not the primary social concern.
- ____21. One need not be able to resolve psychological problems on one's own.
- ____22. Occupational failure does not bring shame to the family.

- ____23. One need not follow the role expectations (gender, family hierarchy) of one's family.
- ____24. One should not make waves.
- ____25. One need not control one's expression of emotions.

Part II : The following 10 sets of items are concerned with the ways in which people approach some important questions in their lives. Each set is comprised of three different options. Read all three carefully before answering. Then, rate each of them in terms of **how well it describes you** or **is true of you**.

Does Not Describe Me

Describes Me

Not True of Me 1 2 3 4 5 6 7 Very True of Me

1. When faced with an important personal decision to make,
 - a) I talk with my partner or best friend.
 - b) I ask myself what I really want to do most.
 - c) I talk to my family and relatives.
2. I think it is most important in life to
 - a) work for causes to improve the well-being of my group.
 - b) have personal integrity/be true to myself.
 - c) have good personal relationships with people who are important to me.
3. I would teach my children
 - a) to be loyal to the group to which they belong.
 - b) to be caring to friends and attentive to the friends' needs .
 - c) to know themselves and develop their own potential as a unique individual.
4. I regard myself as
 - a) a good partner and friend.
 - b) a good member of my group.
 - c) someone with his/her own will.

5. I am most concerned about
 - a) my relationship with myself.
 - b) my relationship with a specific person.
 - c) my relationship with my group.
6. I would regard someone as a good employee for a company if
 - a) he or she takes personal responsibility for the task assigned.
 - b) he or she gets on well and works cooperatively with other colleagues.
 - c) he or she works for the development of the organization or the work group.
7. I think honor can be attained by
 - a) being true to people with whom I have personal relationships.
 - b) being true to my groups such as my extended family, work group, religious and social groups.
 - c) being true to myself.
8. The most satisfying activity for me is
 - a) doing something for my group (such as my school, church, club, neighborhood, and community).
 - b) doing something for someone important to me.
 - c) doing something for myself .
9. I would feel proud if
 - a) my close friend was praised in the newspaper for what s/he has done.
 - b) a group to which I belong was praised in the newspaper for what they have done.
 - c) I was praised in the newspaper for what I have done.
10. When I attend a musical concert
 - a) I feel that enjoying music is a very personal experience.
 - b) I feel enjoyment if my company (partner, friend, guest) also enjoys it.

c) I feel good to be part of the group.

Part III: Please answer each question as carefully as possible by circling *one* of the numbers to the right of each question to indicate your degree of agreement or disagreement. Use the following key to help guide your answers:

Strongly Disagree		Disagree		Neutral/ Depends		Agree		Strongly Agree
1	2	3	4	5	6	7	8	9

1. I often participate in Chinese cultural traditions. 1 2 3 4 5 6 7 8 9
2. I often participate in mainstream North American cultural traditions. 1 2 3 4 5 6 7 8 9
3. I would be willing to marry a Chinese person. 1 2 3 4 5 6 7 8 9
4. I would be willing to marry a North American person. 1 2 3 4 5 6 7 8 9
5. I enjoy social activities with typical Chinese people. 1 2 3 4 5 6 7 8 9
6. I enjoy social activities with typical North American people. 1 2 3 4 5 6 7 8 9
7. I am comfortable working with typical Chinese people. 1 2 3 4 5 6 7 8 9
8. I am comfortable working with typical North American people. 1 2 3 4 5 6 7 8 9
9. I enjoy Chinese entertainment (e.g. movies, music). 1 2 3 4 5 6 7 8 9
10. I enjoy North American entertainment (e.g. movies, music). 1 2 3 4 5 6 7 8 9
11. I often behave in ways that are typically Chinese. 1 2 3 4 5 6 7 8 9
12. I often behave in ways that are typically North American. 1 2 3 4 5 6 7 8 9
13. It is important for me to maintain or develop Chinese cultural practices. 1 2 3 4 5 6 7 8 9

14. It is important for me to maintain or develop North American cultural practices. 1 2 3 4 5 6 7 8 9
15. I believe in traditional Chinese values. 1 2 3 4 5 6 7 8 9
16. I believe in mainstream North American values. 1 2 3 4 5 6 7 8 9
17. I enjoy typical Chinese jokes and humor. 1 2 3 4 5 6 7 8 9
18. I enjoy typical North American jokes and humor. 1 2 3 4 5 6 7 8 9
19. I am interested in having Chinese friends. 1 2 3 4 5 6 7 8 9
20. I am interested in having North American friends. 1 2 3 4 5 6 7 8 9

Section Four: Family Values

Part I : The following three statements are about the value or importance assigned by individual to the attainment and experiences of family formation and family interaction. Use the scale below to indicate the extent to which you agree with the value expressed in each statement.

- | | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly agree |
|---|-------------------|----------|----------------------------|-------|----------------|
| | 1 | 2 | 3 | 4 | 5 |
| 1. The rewards and satisfactions of raising a family are more important to me than anything else. | | | | | 1 2 3 4 5 |
| 2. I would not take a job that would interfere with the things I like to with my family. | | | | | 1 2 3 4 5 |
| 3. I can't imagine having a fully satisfying life without having children. | | | | | 1 2 3 4 5 |

Part II : The following are statements about your opinion of parenting roles, children and marriage. Please answer each question as carefully as possible by circling *one* of the numbers to the right of each question to indicate your degree

- helpful to us in being good parents. 1 2 3 4 5 6 7
14. Raising a child has strengthened my relationship with my spouse. 1 2 3 4 5 6 7
15. I like to spend time with my child. 1 2 3 4 5 6 7
16. I don't want to give up my personal life as a spouse after I had my child. 1 2 3 4 5 6 7
17. A person who has been a good parent can feel completely satisfied with his achievements in life. 1 2 3 4 5 6 7
18. Even after having a child, I still try to spend some time alone with my spouse occasionally. 1 2 3 4 5 6 7
19. Focusing on a good romantic relationship with my partner is more important when compared to focusing on parenting role. 1 2 3 4 5 6 7
20. I enjoy being a parent. 1 2 3 4 5 6 7
21. A person who has no children can never really be happy. 1 2 3 4 5 6 7
22. I am willing to give up the lifestyle I used to and put myself into a role as a parent. 1 2 3 4 5 6 7
23. Maintaining a good romantic relationship with my spouse is very important to me. 1 2 3 4 5 6 7
24. I like having a child in my life. 1 2 3 4 5 6 7
25. I wish I could be with my spouse without our child around. 1 2 3 4 5 6 7
26. Taking care of a child is a boring job. 1 2 3 4 5 6 7
27. If I had to choose, I would rather be a good mother/father than a good employee. 1 2 3 4 5 6 7
28. A girl becomes a woman only after she is a mother. 1 2 3 4 5 6 7

29. Parenting is a wonderful job. 1 2 3 4 5 6 7
30. Having a child gives me more opportunities to explore new things. 1 2 3 4 5 6 7
31. A boy becomes a man only after he is a father. 1 2 3 4 5 6 7
32. In my view, my most important role in our family is being wife/husband, not a mom/dad. 1 2 3 4 5 6 7
33. My life changed after I had my child and I like this change. 1 2 3 4 5 6 7
34. Our romantic relationship as a couple shouldn't be weakened as a result of having a child. 1 2 3 4 5 6 7
35. It is only with a child that a person can feel completely free to express his love and affection. 1 2 3 4 5 6 7
36. As a couple, we need our own life separate from our child. 1 2 3 4 5 6 7
37. I want my life to be the way it was before I had my child. 1 2 3 4 5 6 7
38. Having a child has limited my ability to pursue romantic relationship with my partner. 1 2 3 4 5 6 7
39. It is only natural that a woman should want children. 1 2 3 4 5 6 7

Section Five: Open-Ended Questions

1. What do you expect about your child's development? (e.g. to be a happy person, to be academically successful)

2. The purpose of our study is to study why parents choose to sleep with their children. There might be some issues or reasons that we didn't include. Please

provide any thoughts and/or comments related to this question in the space provided below:

Who primarily completed this questionnaire, please circle one:

1 mother 2 father 3 both parents equally

Thank you very much for your help!

APPENDIX E

Questionnaire (Chinese Version)

第一部分: 背景资料

背景资料 (一)

1. 年龄: _____
2. 性别: 1 男 2 女
3. 婚姻状况: 未婚 2 已婚 3 其它 (请注明)

4. 学历:
 - 1 初中或初中以下 2 高中 3 中专 4 大学专科
 - 5 大学本科 6 硕士 7 博士
5. 你一共完成了多少年的正式教育_____ 年
6. 你的出生国家: 1 中国 2 加拿大 3 其它国家 (请注明)

7. 你认为你的文化背景及种族背景属于: 1 中国 2 加拿大
3 其它 (请注明) _____
8. 你来加拿大的理由 (请圈出相应的答案):
 - 1 留学 2 技术移民 3 家庭团聚移民 4 其它 (请注明) _____
9. 你来加拿大 时的年龄: _____
10. 你在加拿大的居住时间 _____ 年 _____ 月
11. 来加拿大之前, 你是否在其它国家居住过? 不包括你出生的国家 (中国):
 - 1 是 2 否
 如果是, 是哪个国家? _____; 居住时间: _____ 年 _____ 月
12. 来加拿大之前, 你的职业是什么? 请在下面的职业类别中圈出相应的数字:
 - 1 国家机关、党群组织、企业、事业单位负责人, 高级专业技术人员
或管理人员
 - 2 初、中级专业技术或管理人员

- 3 办事人员和有关人员，商业、服务业人员
- 4 自主经营者（有雇员或无雇员）
- 5 农、林、牧、渔、水利业自主经营者（有雇员或无雇员）
- 6 技术工人的管理者
- 7 技术工人或非技术工人
- 8 农、林、牧、渔、水利业生产人员
- 9 其它（请注明）_____

13. 你在加拿大的工作时间：

- 1 从未在加拿大工作过；2 我在加拿大工作了_____年_____月

14. 你在加拿大的职业是什么？请在下面的职业类别中圈出相应的数字：

- 1 政府、公司负责人，高级专业技术人员或管理人员
- 2 初、中级专业技术或管理人员
- 3 办事人员和有关人员，商业、服务业人员
- 4 自主经营者（有雇员或无雇员）
- 5 农、林、牧、渔、水利业自主经营者（有雇员或无雇员）
- 6 技术工人的管理者
- 7 技术工人或非技术工人
- 8 农、林、牧、渔、水利业生产人员
- 9 其它（请注明）_____

15. 请对你的英文水平做一个评价：

15a. 我的英文阅读能力...

1	2	3	4	5	6	7
一点也不好	非常差	差	普通	好	非常好	优秀

15b. 我的英文理解能力...

1	2	3	4	5	6	7
一点也不好	非常差	差	普通	好	非常好	优秀

15c. 我的英文写作能力...

1	2	3	4	5	6	7
一点也不好	非常差	差	普通	好	非常好	优秀

15d. 我的英文会话能力...

1	2	3	4	5	6	7
一点也不好	非常差	差	普通	好	非常好	优秀

16. 你在家使用的最多的语言:

16a. 跟你的配偶: 1 只使用中文 2 中英文混合 3 只使用英文

16b. 跟你的孩子: 1 只使用中文 2 中英文混合 3 只使用英文

背景资料(二): 以下问题主要是关于你的家庭结构和孩子的睡眠位置安排情况。

请注意: 以下的问题中有关孩子的问题是指你的五岁或五岁以下的孩子, 如果你有两个或两个以上五岁以下的孩子, 请只选择其中一个并根据这个孩子的情况来回答。

请将你据以回答问题的孩子的姓名缩写写在这儿: _____

1. 请列出你的家庭成员

年龄	性别	跟孩子的关系

2. 你家 2008 年的税前收入 (请在相应的数字上画圈)

1 低于\$5000

2 \$5000 - \$9999

3 \$10,000 -- \$14,999

4 \$15,000 -- \$19,999

5 \$20,000 -- \$24,999

6 \$25,000 -- \$34,999

- 7 \$35,000 -- \$49,999
 8 \$50,000 -- \$74,999
 9 \$75,000 -- \$99,999
 10 \$100,000 -- \$149,999
 11 \$150,000 -- \$199,999
 12 \$200,000 或更高

3. 你是否购买或租住现在的房子或公寓?: 1 租住 2 已购买
 3 其它(请注明) _____

4. 你的房屋类型是什么?

- 1 Apartment 2 Bungalow 3 Bi-level 4 2-storey 5 Back-split
 6 Duplex 7 Townhouse 8 其它(请注明) _____

5. 你的房子有几个卧室? _____

6. 每个卧室有几张床? 卧室 1 _____ 卧室 2 _____ 卧室 3 _____

如果多于三个卧室, 请自行添加: _____

7. 你所睡的床是什么类型?

- a) Double 2 Queen 3 King 4 其它(请注明) _____

8. 孩子的出生年月日: _____

9. 孩子的性别: 1 男孩 2 女孩

10. 孩子的主要照看者: _____

11. 如果你的孩子去幼儿园或家庭幼儿园, 或者有保姆, 他/她一周有几天是去幼儿园或家庭幼儿园, 或者跟保姆在一起?

1	2	3	4	5	6
从来不去	一周一天	一周两天	一周三天	一周四天	一周五天

12. 你的孩子现在睡在什么地方?

- 1 在你的床上
 2 在你的卧室, 但在他/她自己的床上
 3 跟他/她的祖父母睡在一个卧室

- 4 跟家里其他人（如兄弟姐妹）睡在一个卧室
5 独自睡在他/她自己的卧室

如果你选择 1 或 2, 请回答 13A 和 13C, 然后回答第 14 题。

如果你选择 3, 请回答 13B 和 13C, 然后回答第 14 题。

如果你选择 4 或 5, 请回答 13D 和 13E, 然后回答第 14 题。

（如果你选择了 12 题中的 1 或 2, 请回答 13A）

13A. 如果你的孩子睡在你的卧室（睡在你的床上或者睡在他/她自己的床上），你们是如何做出这种安排的？（请圈出相应的数字）

1. 我们自己决定了这样的安排.

1	2	3	4	5	6	7
非常不同意			中立			非常同意

2. 因为我们没有足够的卧室，所以必须睡在一个房间.

1	2	3	4	5	6	7
非常不同意			中立			非常同意

3. 孩子的行为（如孩子半夜会醒来大哭）决定的.

1	2	3	4	5	6	7
非常不同意			中立			非常同意

（如果你选择了 12 题中的 3, 请回答 13B）

13B. 如果你的孩子跟祖父母睡在一个卧室（在同一张床上或者在同一个卧室但在不同的床上），你们是如何做出这样的安排的？

1. 我们自己决定了这样的安排.

1	2	3	4	5	6	7
非常不同意			中立			非常同意

2. 因为我们没有足够的卧室，所以必须让孩子跟祖父母睡在一个房间.

1	2	3	4	5	6	7
非常不同意			中立			非常同意

3. 孩子的行为（如孩子半夜会醒来大哭）决定的。

1	2	3	4	5	6	7
非常不同意			中立			非常同意

（如果你选择了 12 题中的 1, 2, 或 3, 请回答 13C）

13C. 如果你的孩子跟你或其祖父母睡在一起（在同一张床上或者在同一个卧室但在不同的床上），你计划在孩子多大时让孩子在他/她自己的卧室睡？

_____ 岁 _____ 月

请说明你为什么要在上述年龄让你的孩子搬到他/她自己的卧室睡：

（如果你选择了 12 题中的 4 或 5, 请回答 13D）

13D. 如果你的孩子现在没有跟你和你的配偶，或者祖父母睡在一起（在同一张床上或者在同一个卧室但在不同的床上），他/她是否跟你们在一起睡过？ 1

是 2 否 如果是，你的孩子曾经跟你和你的配偶，或者祖父母一起睡过多长时间？ ____ 年 ____ 月

（如果你选择了 12 题中的 4 或 5, 请回答 13E）

13E. 你的孩子有几岁搬到他/她自己的卧室的？ _____ 岁 _____ 个月

14. 你的孩子跟谁睡在一起？

- 1 独自睡在他/她自己的卧室
- 2 跟父母一起睡在父母的卧室
- 3 跟妈妈一起睡在父母的卧室
- 4 跟爸爸一起睡在父母的卧室
- 5 跟妈妈一起睡在孩子的卧室
- 6 跟爸爸一起睡在孩子的卧室
- 7 跟家里其他人一起睡在别的卧室

15. 你的孩子每周跟你一起睡几天？

1	2	3	4	5	6	7	8
从来不	1天/周	2天/周	3天/周	4天/周	5天/周	6天/周	7天/周

16. 你的孩子白天睡觉吗？

1	2	3	4	5	6	7	8
从来不	1天/周	2天/周	3天/周	4天/周	5天/周	6天/周	7天/周

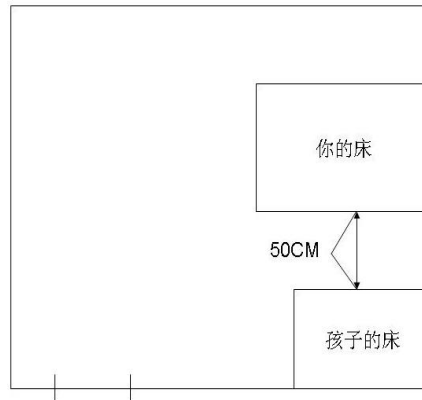
17. 如果你的孩子白天睡觉，你是否陪他/她一起睡？

1	2	3	4	5	6	7	8
从来不	1天/周	2天/周	3天/周	4天/周	5天/周	6天/周	7天/周

请用图描述一下你家卧室区域的结构和安排。请标明你的床和孩子的床之间的距离。

A. 如果你跟孩子睡在一个卧室，请画出卧室中你的床和孩子的床的位置。如果孩子的床跟你的床不是连在一起的，请标出两张床之间的距离，这个距离应该是通常情况下你从自己的床走到孩子的床的路线。

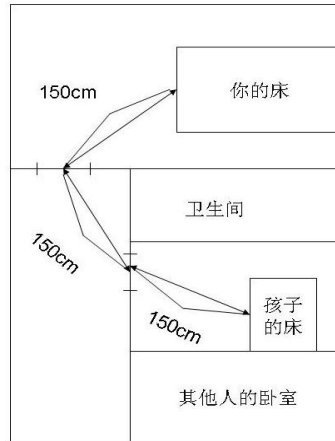
请参考下图画出你的卧室的基本结构和安排



请在下页的空白处画出你的卧室结构和安排：

B. 如果你的孩子睡在他/她自己的卧室，请画出你和孩子的卧室的基本结构及安排。请测量两个卧室中两张床的距离。这个距离应该是通常情况下你从自己的床走到另一个卧室中孩子的床的路线。

请参考下图画出你和孩子的卧室的基本结构和安排



请在下面的空白处画出你和孩子的卧室结构和安排：

第二部分：对睡眠安排的看法

下面是一些关于睡眠安排的问题。请仔细阅读每一个问题，并在题目右侧的数字栏中选择相应的数字来表明你对该问题的同意或不同意的程度。请根据以下标尺回答：

非常	不同意	有点不	中立	有点	同意	非常
不同意		同意		同意		同意
1	2	3	4	5	6	7

1. 跟孩子一起睡更便于哺乳（母乳喂养或奶粉喂养）。 1 2 3 4 5 6 7
2. 跟孩子一起睡是养育孩子的一种方式。 1 2 3 4 5 6 7
3. 我有责任照顾好我的孩子，所以我让他（她）睡在我的
旁边。 1 2 3 4 5 6 7
4. 如果我跟孩子分别睡在不同的卧室，我和孩子都能睡的
更好。 1 2 3 4 5 6 7
5. 让孩子睡在我的卧室或者我的床上，对孩子的身体发展
有好处。 1 2 3 4 5 6 7
6. 让孩子睡在我的卧室或者我的床上，对孩子的心理发展
有好处。 1 2 3 4 5 6 7
7. 中国人大都认为父母应该跟孩子一起睡。 1 2 3 4 5 6 7
8. 让孩子睡在他/她自己的卧室，对他/她的心理发展有好
处。 1 2 3 4 5 6 7
9. 跟孩子一起睡不利于哺乳（母乳喂养或奶粉喂养）。 1 2 3 4 5 6 7
10. 让孩子睡在他/她自己的卧室并不会影响我跟孩子之间的
感情联结。 1 2 3 4 5 6 7
11. 让孩子在很小年纪就开始独自睡在他/她自己的卧室有利
培养孩子的独立性。 1 2 3 4 5 6 7
12. 如果让孩子晚上睡在我的卧室，会影响到我跟丈夫/妻子
之间的浪漫关系。 1 2 3 4 5 6 7
13. 让孩子睡在我的卧室或者我的床上能够降低窒息和婴儿
猝死综合症（SIDS）的发生机率。 1 2 3 4 5 6 7
14. 让孩子睡在他/她自己的卧室更便于哺乳（母乳喂养或奶
粉喂养） 1 2 3 4 5 6 7
15. 跟孩子睡在一起并不一定有助于培养我跟孩子之间的良
好关系。 1 2 3 4 5 6 7
16. 我的孩子是一个独立的个体，他/她需要自己的空间睡觉

- 或玩耍。 1 2 3 4 5 6 7
17. 让孩子睡在他/她的卧室里，对他/她的身体发展有好处。 1 2 3 4 5 6 7
18. 我的家人认为我应该让孩子自己睡在他/她自己的卧室。 1 2 3 4 5 6 7
19. 即使拥有自己的卧室，孩子也不一定能够发展出独立性。 1 2 3 4 5 6 7
20. 跟孩子睡在一起有助于培养我和孩子之间的良好关系。 1 2 3 4 5 6 7
21. 如果孩子睡在我旁边，他/她不需要哭很久就能吃到奶。 1 2 3 4 5 6 7
22. 加拿大人人都认为父母应该跟孩子睡在一起。 1 2 3 4 5 6 7
23. 让我的孩子睡在我的卧室或床上能够帮助孩子意识到人
际关系的重要性。 1 2 3 4 5 6 7
24. 我小时候不跟父母或祖父母睡在一起，所以我的孩子也
不跟我睡在一起。 1 2 3 4 5 6 7
25. 当我的孩子睡在我的卧室或床上时，我跟孩子都能睡的
更好。 1 2 3 4 5 6 7
26. 让孩子跟父母或保姆睡在一起并不能让孩子更清楚地知
道谁是他/她可以依靠的人。 1 2 3 4 5 6 7
27. 我孩子的儿科医生建议，孩子应该睡在自己的房间。 1 2 3 4 5 6 7
28. 让孩子睡在我的或保姆的卧室或床上，能够让孩子感到
他/她属于这个家庭。 1 2 3 4 5 6 7
29. 跟孩子睡在一起是享受做父母的快乐的方式之一。 1 2 3 4 5 6 7
30. 我的大多数中国朋友认为，孩子应该睡在自己的房间。 1 2 3 4 5 6 7
31. 让孩子睡在他/她自己的卧室能够降低窒息或婴儿猝死综
合症（SIDS）的发生机率。 1 2 3 4 5 6 7
32. 中国人大都认为孩子应该睡在自己的房间。 1 2 3 4 5 6 7
33. 我并不觉得跟孩子睡在一起是抚养孩子的一种好方法。 1 2 3 4 5 6 7
34. 跟孩子睡在一起，如果孩子需要帮助的话，他/她能够很
容易地找到我。 1 2 3 4 5 6 7
35. 如果孩子有自己的卧室，他们会变得更独立。 1 2 3 4 5 6 7

36. 即使我的孩子睡在他/她自己的卧室，在他/她需要我的时候还是能够及时得到我的帮助的。 1 2 3 4 5 6 7
37. 我的大多数加拿大朋友认为父母应该跟孩子睡在一起。 1 2 3 4 5 6 7
38. 即使我的孩子睡在别的房间，我还是能够很好地照看他/她。 1 2 3 4 5 6 7
39. 我的大多数加拿大朋友认为孩子应该睡在自己的房间。 1 2 3 4 5 6 7
40. 让一个孩子在很小的年龄就独自睡在自己的房间会让他/她更依赖父母。 1 2 3 4 5 6 7
41. 即使孩子睡在他/她自己的卧室，我也能很好地担负起照顾他/她的责任。 1 2 3 4 5 6 7
42. 我不想让孩子睡在我的卧室或床上，因为我想要跟丈夫/妻子有自己的生活。 1 2 3 4 5 6 7
43. 我的孩子还太小，不能独立，他/她不需要自己的空间睡觉或玩耍。 1 2 3 4 5 6 7
44. 当我在半夜醒来时，看到身边孩子熟睡的脸，我会感到非常幸福。 1 2 3 4 5 6 7
45. 当我的孩子睡在我的卧室或床上时，我跟丈夫/妻子之间的交流没有任何问题。 1 2 3 4 5 6 7
46. 让我的孩子睡在我的卧室或床上，会阻碍孩子对人际关系重要性的认识。 1 2 3 4 5 6 7
47. 因为我的父母和祖父母曾跟我一起睡，所以我也让我的孩子跟我一起睡。 1 2 3 4 5 6 7
48. 跟孩子一起睡是发展我跟孩子的美好情感联结的重要方式。 1 2 3 4 5 6 7
49. 如果孩子晚上睡在我的卧室，**不会**影响到我跟丈夫/妻子之间的浪漫关系。 1 2 3 4 5 6 7
50. 让孩子跟父母或保姆睡在一起能让孩子更清楚地知道谁

- 是他/她可以依靠的人。 1 2 3 4 5 6 7
51. 我孩子的儿科医生建议，父母应该跟孩子睡在一起。 1 2 3 4 5 6 7
52. 如果我的孩子睡在我们的卧室，我将不会有太多机会跟丈夫/妻子谈论一些只与我们两个有关的事情。 1 2 3 4 5 6 7
53. 让我的孩子睡在我的卧室或床上能够保证孩子的安全。 1 2 3 4 5 6 7
54. 看到我的孩子舒服地睡在自己的房间，我会感觉很幸福。 1 2 3 4 5 6 7
55. 跟孩子一起睡能使我更好地照看他/她。 1 2 3 4 5 6 7
56. 加拿大大都认为孩子应该睡在自己的房间。 1 2 3 4 5 6 7
57. 如果我的孩子睡在他/她自己的卧室，我能更好地享受做父母的快乐。 1 2 3 4 5 6 7
58. 让孩子睡在父母/保姆的卧室或床上，并不一定能够让让孩子感到他/她属于这个家庭 1 2 3 4 5 6 7
59. 我的家人认为我应该跟孩子睡在一起。 1 2 3 4 5 6 7
60. 当孩子还小的时候，我愿意暂时放弃跟丈夫/妻子的个人生活。 1 2 3 4 5 6 7
61. 让孩子睡在自己的房间更安全。 1 2 3 4 5 6 7
62. 我的大多数中国朋友认为父母应该跟孩子睡在一起。 1 2 3 4 5 6 7

第三部分：文化价值观念

问卷一：请用下列 1 - 4 的尺度来表明您对以下所陈述的价值观念的赞成程度。请在每道题目前面写下相应的数字。

- | | | | |
|------|-----|----|------|
| 1 | 2 | 3 | 4 |
| 非常赞成 | 不赞成 | 赞成 | 非常赞成 |
- ____ 1. 一个人不应该违背家庭和社会的规范。
- ____ 2. 子女们不应该安置她们的父母去于老人院。
- ____ 3. 一个人不需要集中所有精力于学业上。
- ____ 4. 一个人不应该被鼓励去谈及(提起)他个人之成就。

- ____5. 年轻人应该要能够面对他们的长辈。
- ____6. 当一个人收到礼物，他应当用相同或大于其价值之礼物来答谢。
- ____7. 一个人不需要以获得成就来让父母感到骄傲。
- ____8. 一个人不需要轻视或贬低其成就。
- ____9. 一个人应在考虑其需求之前先考虑他人之需求。
- ____10. 学业和职业上的成就不需被排在一个人之第一优先里。
- ____11. 一个人应在考虑自己之前先考虑其团体(或族群)。
- ____12. 一个人于权力上应拥有询问他人的能力。
- ____13. 谦虚对一个人来说是重要的素养。
- ____14. 个人的成就应被视为其家庭的成就。
- ____15. 一个人应避免把不快带给其祖先。
- ____16. 一个人应该有充分精神上的才略来解决情感方面的问题。
- ____17. 一个人能够做的最坏之事乃是辱没了其家族名誉。
- ____18. 一个人不需保持谨慎或镇静的。
- ____19. 一个人应是恭顺及谦虚的。
- ____20. 家族名誉不是首要社交上的顾虑。
- ____21. 一个人不需拥有解决其个人心理问题之能。
- ____22. 工作上的挫败不会为家族带来羞辱。
- ____23. 一个人不需遵循其家族(于性别及家族等级制度上)的期待。
- ____24. 一个人不应制造混乱。
- ____25. 一个人不需控制其情绪上的表达。

问卷二：下面十道题目是关于人们如何看待他们生活中的一些重要问题的。每道题有三个选项。请仔细阅读每个题目，然后回答它在**多大程度上描述了你自己的实际情况**。请参照下列标尺，在每个选项的右侧填上 1-7 中相应的数字。

一点也不像我 1 2 3 4 5 6 7 非常像我

1. 当我需要做一个非常重要的个人决定时,
 - a) 我跟我的配偶或最好的朋友商量
 - b) 我会问自己我最想要的是什么
 - c) 我会跟家人亲戚商量.
2. 我认为生活中最重要的是
 - a) 为了改善我所在的群体而工作
 - b) 做一个完整真实的自己
 - c) 跟那些对我很重要的人保持良好的关系
3. 我会教我的孩子
 - a) 忠诚于他们所属的群体
 - b) 关心朋友, 留意朋友的需要
 - c) 了解自己, 发展自己作为独特个体的潜能
4. 我认为自己是
 - a) 一个好朋友和合作伙伴
 - b) 我所属群体的好成员
 - c) 一个有着自己的意志和决心的人
5. 我最关心的事情是
 - a) 我跟自己的关系
 - b) 我跟一个特殊人物的关系
 - c) 我跟自己所属的群体的关系
6. 我认为公司的好员工应该是一个
 - a) 能够承担起交给他/她的工作任务的人
 - b) 能够很好地跟同事合作的人
 - c) 能够为组织或工作群体的发展而工作的人
7. 我认为获得尊敬的方法是
 - a) 真诚对待对那些跟我有私人交往关系的人们
 - b) 真诚对待我所属的群体, 比如我的亲戚、工作的小组, 宗教或社会团体

- c) 做真实的自己
8. 我满意的事情是
- a) 为我所属的群体做事情（如我的学校、教会、俱乐部、邻居，和社区）
- b) 为一个对我非常重要的人做事情
- c) 为我自己做事情
9. 我会感到骄傲，如果
- a) 我最好的朋友因为做了某事而被报纸报道和表扬
- b) 我所属的群体因为做了某事而被报纸报道和表扬
- c) 我因为做了某件事情而被报纸报道和表扬
10. 当我参加一个音乐会时
- a) 我觉得欣赏音乐是一件非常个人化的事情
- b) 只有跟我一起听音乐会的人（配偶、朋友或客人）喜欢，我才会喜欢
- c) 我觉得只有发现自己是属于某一个群体时，我才会感到高兴

问卷三：请认真回答下列问题，在题目的右方圈出一个最能代表您意见的数字，以表示你对问题赞成 或不赞成的程度。请用以下的准则作答：

	极度不赞成		不赞成		没意见		赞成		极度赞成
	1	2	3	4	5	6	7	8	9
1.									
我常参与中国文化的习俗活动。									1 2 3 4 5 6 7 8 9
2.									
我常参与北美洲主流文化的活动。									1 2 3 4 5 6 7 8 9
3.									
我乐意和中国人结婚。									1 2 3 4 5 6 7 8 9
4.									
我乐意和北美人结婚。									1 2 3 4 5 6 7 8 9
5.									
我享受和中国人进行社交活动。									1 2 3 4 5 6 7 8 9
6.									
我享受和典型的北美人进行社交活动。									1 2 3 4 5 6 7 8 9
7.									
我和典型的中国人工作感到舒服。									1 2 3 4 5 6 7 8 9
8.									
我和典型的北美人工作感到舒服。									1 2 3 4 5 6 7 8 9

- | | |
|--------------------------|-------------------|
| 9. 我享受中国文化的娱乐活动（如电影、音乐）。 | 1 2 3 4 5 6 7 8 9 |
| 10. 我享受北美的娱乐活动（如电影、音乐）。 | 1 2 3 4 5 6 7 8 9 |
| 11. 我的言行举止表现为中国人的典型。 | 1 2 3 4 5 6 7 8 9 |
| 12. 我的言行举止表现为北美人的典型。 | 1 2 3 4 5 6 7 8 9 |
| 13. 我有必要维持或发展中国文化。 | 1 2 3 4 5 6 7 8 9 |
| 14. 我有必要维持或发展北美的传统文化。 | 1 2 3 4 5 6 7 8 9 |
| 15. 我相信中国的价值观。 | 1 2 3 4 5 6 7 8 9 |
| 16. 我相信北美主流的价值观。 | 1 2 3 4 5 6 7 8 9 |
| 17. 我喜欢中国典型的笑话和幽默。 | 1 2 3 4 5 6 7 8 9 |
| 18. 我喜欢北美典型的笑话和幽默。 | 1 2 3 4 5 6 7 8 9 |
| 19. 我喜欢和中国人结交朋友。 | 1 2 3 4 5 6 7 8 9 |
| 20. 我喜欢和北美人结交朋友。 | 1 2 3 4 5 6 7 8 9 |

第四部分：家庭价值观

问卷一：下面的三个问题是关于个人对家庭构成及家庭关系的看法与经历。请使用下面的标尺，选择相应的数字表示你对每个问题的同意或不同意的程度。

非常不同意	不同意	中立	同意	非常同意
1	2	3	4	5

- | | |
|--|-----------|
| 1. 对于我来说，有一个家庭比任何其它事情都重要。 | 1 2 3 4 5 |
| 2. 如果有一份工作会影响到我跟家人相处或在一起做事情，我不会接受那份工作。 | 1 2 3 4 5 |
| 3. 我无法想象，如果没有孩子，怎么能拥有一个让人满足的生活。 | 1 2 3 4 5 |

问卷二：下面是一些关于父母角色、孩子及婚姻的问题。请仔细阅读每一个问题，并在题目右侧的数字栏中选择相应的数字来表明你对该问题的同意或不同意的程度。请根据以下标尺回答：

- 在一起。 1 2 3 4 5 6 7
19. 对我来说，跟配偶有一个好的浪漫关系，比做好父母这个角色更重要。 1 2 3 4 5 6 7
20. 我喜欢做父母。 1 2 3 4 5 6 7
21. 没有孩子的人永远不会感到真正的幸福。 1 2 3 4 5 6 7
22. 我愿意放弃我曾经的生活方式，而接受父母这个角色。 1 2 3 4 5 6 7
23. 跟配偶保持良好的浪漫关系对我来说很重要。 1 2 3 4 5 6 7
24. 我喜欢我的生活中有孩子的存在。 1 2 3 4 5 6 7
25. 我希望能单独跟配偶在一起，没有孩子的打扰。 1 2 3 4 5 6 7
26. 照顾孩子是一件无聊的事情。 1 2 3 4 5 6 7
27. 如果能够选择，我会选择做一个好妈妈/爸爸，而非一个好员工。 1 2 3 4 5 6 7
28. 一个女孩只有做了母亲之后才真正成为一个女人。 1 2 3 4 5 6 7
29. 做父母是一件非常好的事情。 1 2 3 4 5 6 7
30. 有了孩子之后，我有更多机会探索新的事情。 1 2 3 4 5 6 7
31. 一个男孩只有在做了父亲之后才真正成为一个男人。 1 2 3 4 5 6 7
32. 我认为，我在家里最重要的角色是妻子/丈夫，而非母亲/父亲。 1 2 3 4 5 6 7
33. 有孩子之后，我的生活改变了许多，我喜欢这个改变。 1 2 3 4 5 6 7
34. 我们夫妻之间的浪漫关系不应因为有了孩子而被削弱。 1 2 3 4 5 6 7
35. 只有有了孩子之后，一个人才会感到他/她能够自由地表达他/她的爱和感情。 1 2 3 4 5 6 7
36. 作为夫妻，我们需要独立于孩子之外的自己的生活。 1 2 3 4 5 6 7
37. 我很希望我的生活还是有孩子之前的样子。 1 2 3 4 5 6 7
38. 有孩子之后，我失去了很多跟配偶之间寻找浪漫感觉的机会。 1 2 3 4 5 6 7

39. 一个女人想要孩子是一件很自然的事情。

1 2 3 4 5 6 7

第五部分：开放问题

1. 你对孩子的发展有什么期望？（例如，希望他/她健康快乐地成长，希望他/她将来在学业上取得好成绩）

本研究主要关注父母为什么选择跟孩子一起睡。或许有一些理由或相关内容我们没有涉及到。请在下面写出你对此问题的任何看法或观点。

谁是此问卷的主要完成者？

1 母亲 2 父亲 3 父母两个人共同完成

非常感谢您对我们研究项目的支持！