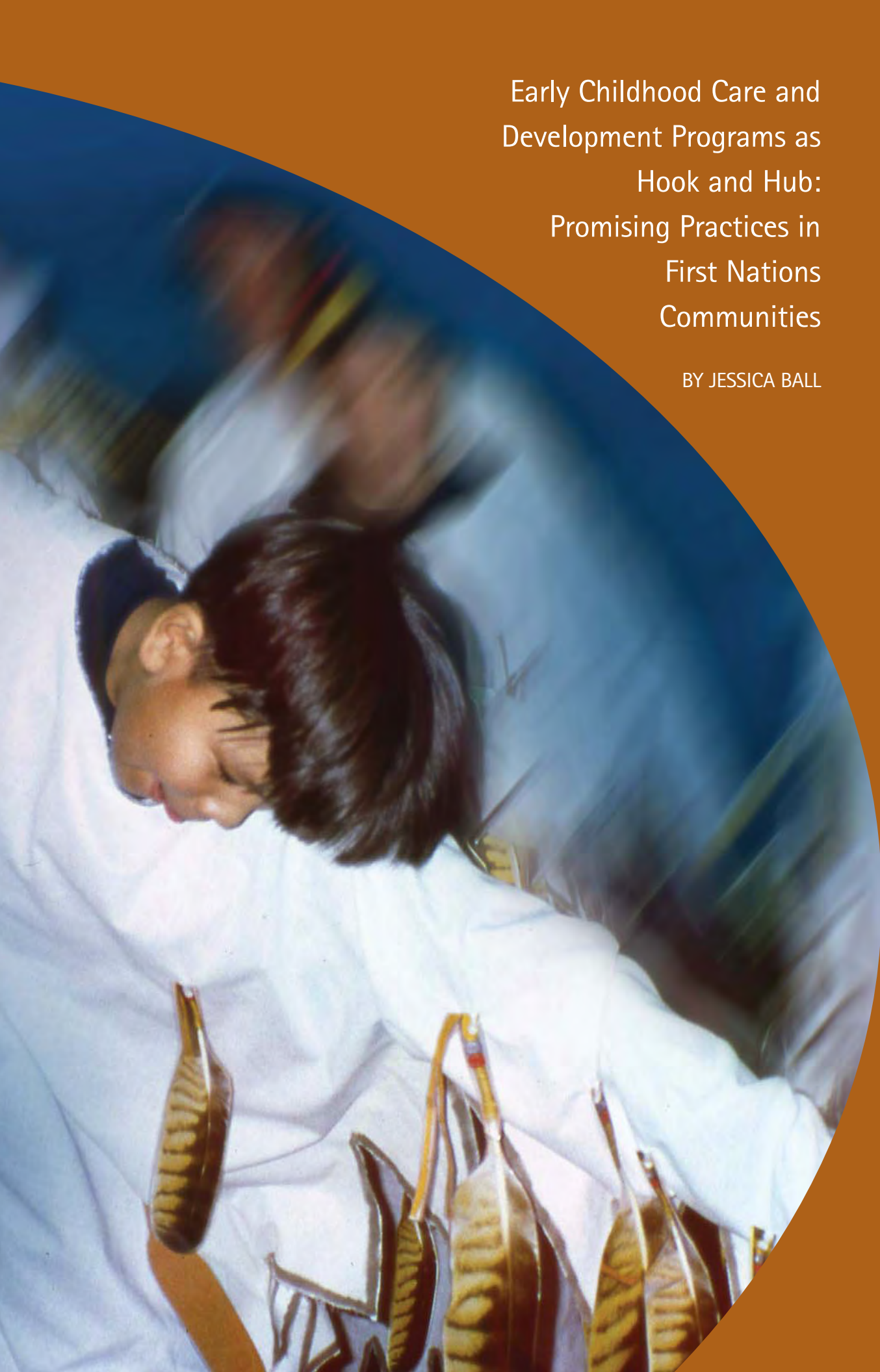


Early Childhood Care and
Development Programs as
Hook and Hub:
Promising Practices in
First Nations
Communities

BY JESSICA BALL



HOOOK & HUB



Acknowledgements

We express our gratitude to the three groups of First Nations communities discussed in this report: Lil'wat Nation, Tl'azt'en Nation, and six of the First Nations that comprise the Treaty 8 Tribal Association: Sauleau, West Moberly Lake, Prophet River, Halfway River, Doig River and Blueberry River First Nations. We especially acknowledge those who gave in-depth interviews to our research team, and we thank them for sharing their stories and insights.

The research project described here was completed as part of the Early Childhood Development Intercultural Partnerships Program, directed by Dr. Jessica Ball and involving a growing number of Indigenous researchers-in-training at the School of Child and Youth Care, University of Victoria, British Columbia, Canada. The school promotes the construction and application of integrative models of child development that see children and their caregivers as active participants in social and cultural ecologies.

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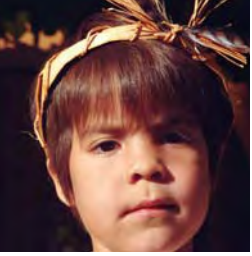
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HOOk & HUB

Early Childhood Care and Development Programs
as Hook and Hub: Promising Practices in
First Nations Communities



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preface: IN THEIR OWN WORDS

Three groups of First Nations communities in British Columbia participated in the research that led to this report. They include Lil'wat Nation, Tl'azt'en Nation, and six of the First Nations that comprise the Treaty 8 Tribal Association: Saulneau, West Moberly Lake, Prophet River, Halfway River, Doig River and Blueberry River First Nations.

Below, local leaders describe what it has meant to their communities to be involved in the early childhood training and care program offered through the University of Victoria, and now to be able to offer strong, culturally grounded and well-attended children's programs on-reserve, provided by and for community members.

Lil'wat Nation

"Lil'wat Nation strongly believes in Aboriginal title and rights, and our sovereignty over our lands. We need to provide support for families and specifically for young children, and especially for families that are having trouble caring for their young children.... Another value is that we want our children to have cultural training. A few years ago, we did a labour analysis and needs survey and our first priority was post-secondary training in early childhood, so that we could establish our own daycare, operated by our own people, carrying on our own traditions and values. We have done that. Parents are happy when their children go to this child-care program. They develop good habits, have good nutrition, early learning, especially cultural learning, and socialization.

We have support from the Chief and Council and administration here, and the staff who graduated from the post-secondary program with UVic are very happy to be working in our own community. The different departments here work together – the Health, Child Care, Education and Training, Wellness, Economic Development, Social Development – we all work together and that contributes to the success of our programs."

- Christine Leo, Director, Community Advancement Programs, Lil'wat Nation



Tl'azt'en Nation



"The biggest benefit of training for our community has been the opening of a number of new services for young children and their families, such as the SumYaz Daycare and the Aboriginal Head Start. There is good support in the community for this initiative. An important part is having a good Education Society made up of concerned community members with a vision.

The second major benefit is the program helped our students in the community to find their voice. They were a shy bunch of ladies; today they have the confidence to work with community members and our Elders. They gained skills on how to work with Elders, which is an important component in Tl'azt'en Head Start program. The CYC [Child and Youth Care] students have the confidence, education and capacity to deliver a well-thought-out program for the children. They will one day become true leaders in our community. Two of the students are holding manager positions and all are employed. They are well recognized and respected in our community. The women are building the foundation with the families, where they are moving forward now to become leaders. We are proud of their accomplishments; the program was worth the energy and commitment."

- Amelia Stark, Director of Education, Tl'azt'en Nation

Treaty 8 Tribal Association



"The training in early childhood care and development brought forth more programs – not only child care – but for children and families, and it brought these to the communities. This is still growing. Two of the First Nations just started a child care and development program – expanded beyond the Aboriginal Head Start program. They are sharing, and this sharing is also an outcome of the communication and understanding that developed between people who were originally students in the post-secondary training together. It is good to see the communities working together in this way. The presence of trained community members in the communities keeps attention focused on the importance of children and youth and culture – and there are all sorts of programs running – even if the administration changes or the political level is turbulent, the services continue. This is very important."

- Diane Bigfoot, Education Coordinator, Treaty 8 (BC) Tribal Association.



executive summary

This report summarizes key findings of a year-long investigation into the steps taken by Lil'wat Nation, Tl'azt'en Nation, and six of the First Nations in the Treaty 8 Tribal Association to strengthen their capacity to provide early childhood care and development programs, in ways that reinforce their cultures and languages and promote the well-being of young children and their parents or other caregivers.



These steps have included:

- delivering a two-year, post-secondary early childhood care and development training program between 1997 and 1999, in collaboration with Drs. Jessica Ball and Alan Pence of the University of Victoria's School of Child and Youth Care, and
- planning and developing child-care and other children's programs, such as Aboriginal Head Start, that could be delivered *in* the community, *by* the graduates of the training program.

On request of the First Nations involved in the training program – who wanted both to measure the results of their investment and to document their successes – a combined University of Victoria/community-based investigative team interviewed 76 people from the participating communities, including Elders, community administrators, program graduates, parents and external service providers. The team also held group forums, observed programs, and reviewed service records.

What the investigative team discovered was startling.

Four years after the early childhood care and development program ended:

- all 28 graduates the team interviewed (80% of the 35 who graduated, out of 40 originally enrolled) were working full-time as staff or managers in child-care programs and other services for children and families within their own communities
- all three groups of First Nations had mounted child-care programs, two had also started Aboriginal Head Start programs, and all communities were delivering at least one additional program to improve the development of infants and young children
- all programs were thriving
- all child-care programs had waitlists for infant care, and
- all programs were actively planning and seeking resources to expand.

From Training to Work

The smoothest transitions from training to employment were made by graduates in the larger communities of Lil'wat Nation and Tl'azt'en Nation, where the communities ensured they had both “hard” infrastructure (buildings and equipment) and “soft” infrastructure (policies, governance, funding allocations, administrators) in place by the time their community members graduated. As a result of this advance planning, more than half of the graduates in these communities moved into staff positions in newly opened program facilities within weeks of graduation.

Graduates in the smaller, geographically more dispersed communities of the Treaty 8 Tribal Association – where most of the communities did not develop their own opportunities on-reserve – had a less “even” entry into work and less sustained employment. Some of these graduates moved to the nearby town and took positions that were only somewhat relevant to their training (for example, school-based learning support).

Four years later, however, the majority of communities had mounted new programs for infants and young children, and almost all the graduates were employed in their home communities in child-care or Aboriginal Head Start programs. The remaining students were either not working or in further training.

LONG-TERM VISION/ LONG-TERM INVESTMENT

Building community capacity to deliver early childhood care is a long-term investment.

It takes a series of well-thought-out, incremental steps to maintain and build community-wide commitment to a long-term vision, while at the same time guiding a cohort of community members through from pre-training, to training, to full employment and, eventually, to leadership positions.

All of the communities that participated in this research described the early childhood development and training program, and the program graduates' subsequent transition from training to work, as part of a holistic community vision and long-term plan for building community capacity to staff and manage their own programs and services.

They identified good governance and community-wide commitment to this plan as key to creating a social environment receptive to what the new graduates had to offer their communities. They also stressed the importance of having one key administrator involved throughout the entire training and transition to work process, from selecting community members for training, to encouraging the students while they were in the program, to keeping community leaders focused on developing community-based

employment opportunities for the students on graduation. And they pointed out the importance of professional mentors in helping graduates to obtain jobs and stay working in their profession.

COMMUNITY-DRIVEN TRAINING

There is a general concern in Canada that more Indigenous people are trained than actually become engaged in the work force. Decisions about training programs that help to build a community's capacity to deliver early childhood services need to take into account the factors that help Indigenous people make a successful transition from training to work and remain in the labour force.

This research project indicates that the kind of training a community makes available to its community members affects both the students' and the community's readiness to make the transition from training to work. Training that is community-based, community-driven and community-involving, and that builds on community-specific cultural knowledge and ways of doing things, helps to ensure program graduates will be able to deliver the culturally-consistent services and supports that community members need, and that they will appreciate and accept.

Hook and Hub

Most communities in Canada today maintain an individual-centred and non-integrated approach to family and children's services. All of the First Nations communities that participated in this study believe this approach has not and will not work well for Aboriginal communities, because it focuses on a specific "need" or "problem," rather than on the functioning of the "whole person" and the well-being of the whole family.

As a result, the participating communities are all now in varying stages of moving away from this approach, and towards models that:

- integrate child health and development programs on-site in their child-care programs, and
- create clear operational links between their child-care programs and other health, cultural, and social programs intended to benefit children and/or parents, such as parenting programs, alcohol and drug treatment services, and job training.

All the communities share a vision of inter-sectoral service delivery, and two – Tl'azt'en Nation and Lil'wat Nation – have made significant strides towards implementing a long-term plan for co-located and integrated services.

Within their now well-established co-located structures, early childhood care and development acts as both “hook” and “hub”: first attracting community members by delivering the quality child care that many families need and want, then providing easy access to other “laddered” family development and health services as well. And because a laddered system makes it possible to quickly and discreetly increase services and case management already in place, this hook and hub model holds particular promise for supporting children (and families) who are beginning to experience difficulties, in need of protective services, or with special needs, *within* their own cultural communities.

Parental Involvement and Cultural Knowledge and Pride

All the First Nations that participated in this project recognize that early childhood care and development can play a central role in consolidating their communities as stable, healthy, cohesive and culturally robust Indigenous societies within Canada. Community leaders also uniformly see the goal of improving community conditions for children’s health and development as dependent on the goal of supporting family wellness.

THE VALUE OF INTEGRATION

This research indicates that – in the field of child, family and community development – the more practice models and services can be integrated into a “hub” model, the more likely we are to achieve both positive change for individuals and families *and* lower costs for services compared to the costs of targeted interventions for specific problems, delivered according to professional specializations.

However, for the hub model of community-based services to be successful, agencies and jurisdictions must work together to:

- reduce the burden on communities of multiple and different funding application and accountability requirements
- enable the construction of facilities to house multiple services, and
- financially support integrated case management that combines the expertise of practitioners across multiple disciplines and works with families in their own communities.

By setting up their child-care centres as the focal point or hub of a larger system of community programs and meeting spaces, these First Nations communities have created a service delivery model that is not only multidimensional and accessible, but also culturally “safe,” appropriate and holistic.

This approach allows the communities to achieve two important goals:

- 1) to promote cultural knowledge, identity and pride, and
- 2) to strengthen parental involvement and parenting skills.

The majority of First Nations child-care practitioners and parents who participated in this study firmly believe that it is not what one DOES in the child-care curriculum (the activities or materials, for example), but rather who one IS that helps to teach young children about their First Nations identity. The children are “apprentices,” absorbing a First Nations identity simply by being in a First Nations milieu, with First Nations role models and First Nations values.

Participants in this research also see early childhood programs as a crucial opportunity for parents to recover cultural knowledge, identity, language and parenting skills lost through the era of Indian Residential Schools. However, child-care practitioners are not yet completely satisfied with current rates of parental involvement, and reported that few parents are taking an active, regular or meaningful role in child-care programs. In response, two communities have formed parent support or advisory groups, and all are working at developing the kinds of structured participation that parents prefer and can regularly accommodate.

HERITAGE-LANGUAGE LEARNING

All the First Nations in this study have attempted to incorporate heritage-language learning into their child-care programs. Along the way, they have discovered that, for this kind of learning to work, a community needs not only a ready supply of fluent heritage-language speakers, but also:

- training for fluent speakers, who are often Elders, in how to teach young children and get their parents involved
- new early childhood curriculum materials developed specifically for heritage-language learning, and
- funding to pay heritage-language teachers to work with both children and staff.

At the same time, participants emphasized the importance of child-care programs as a support for parents who wish to pursue their own wellness, education and/or employment, and to secure or increase family income. The high participation rates and waitlists for child-care spaces indicate high parent “attachment” to child-care programs, while the increasing use of other programs for young children – such as baby clinics, health promotion and early language and literacy – ensures further long-term benefits for both parents and children.

Sustaining the Success

There is no doubt within these First Nations communities about the positive effects of their current child-care programs for the parents, for the communities, and most especially for the children.

While sufficient resources – human, physical, cultural and financial – must be present to have successful programs, once they are present, other factors are more important in creating a sustainable program. These other factors include community understanding of and commitment to a vision of supporting young children and their families, which in turn leads to greater participation and enrolment in children’s programs, and greater trust in program staff and support for their development.

Promising Practices

The work of these First Nations strongly indicates that a hook and hub model may be more effective in meeting the diverse needs of children and families in First Nations communities than the dominant problem- and need-specific model. In fact, the “hub” model may work for other communities as well, particularly those in rural and isolated areas and in low-income, urban neighbourhoods, where the accessibility and coordination of services is a persistent barrier to program use and effective family participation.

Hub construction reflects a holistic, community-driven philosophy and provides for service delivery that is consistent with Aboriginal ways. It also increases:

- cost- and resource-efficiency
- laddering of services for children and families, especially those at risk
- access by service providers to individuals in small communities
- inter-professional communication
- program stability and continuity of services
- community-wide involvement and support, and
- community capacity through ongoing, multidisciplinary teamwork and leadership.

However, because First Nations cultures are diverse, it is unlikely that any one vision, plan or model will be universally applicable for all First Nations communities or, indeed, for any other communities in Canada.

Larger communities are more likely to be able to implement a comprehensive system of community-based programs. Communities with smaller populations – especially those that are geographically remote – will have a harder time raising funds, gaining access to training that meets community needs, attracting and retaining practitioners, and providing mentoring and professional development for program staff. As the Romanow Commission report points out, the issue of how to support children and families in smaller and more remote communities



across Canada is a challenge that calls for national dialogue and changes in both policies and funding priorities. These communities are generally less ready to articulate their own goals for community development and often do not have the leadership or resources to advocate effectively for resources or to implement long-range plans for community-based services.

The First Nations that participated in this study demonstrate that capacity-building initiatives must be anchored deeply within each community's own socio-historical context, geography, culture and mission.

Successful innovations build on a community's existing strengths, potential for cultural reconstruction, and ability to push forward strategies for achieving internally-identified goals. Every community that shares the goal of developing a coordinated, culturally-informed and useful approach to promoting the well-being of young children and families must be given enough flexibility and long-term support to evolve and implement its own long-term vision.

Jessica Ball

Early Childhood Care and Development Programs as Hook and Hub: Promising Practices in First Nations Communities. Executive Summary. Jessica Ball (author), School of Child and Youth Care, University of Victoria









INTRODUCTION:

strengthening
community
capacity to
provide early
childhood care and
development
programs

INTRODUCTION

This report summarizes key findings of a year-long investigation into the steps taken by Lil'wat Nation, Tl'azt'en Nation and six of the First Nations in the Treaty 8 Tribal Association of British Columbia to strengthen their capacity to provide early childhood care and development programs, in ways that both reinforce their cultures and languages and promote the well-being of young children and their parents or other caregivers.

The three First Nations groups (all on-reserve) who participated in this investigation delivered the same two-year First Nations Partnerships training program between 1997 and 1999, in collaboration with Drs. Jessica Ball and Alan Pence of the University of Victoria's School of Child and Youth Care.¹

This unique two-year, university-accredited diploma program involves 20 courses in early childhood care and development. A First Nation (or a group of First Nations) initiates and funds program delivery. All instruction takes place in the students' own communities, and incorporates both Indigenous and Western ways of teaching, learning and providing child care and other family services. Community members – usually Elders who co-instruct in the community-based classroom – contribute community-specific cultural knowledge, while university partners contribute Western theories and research on child development and care.²

HIGH COMPLETION RATE

A recent evaluation of the early childhood care and development training program in eight groups of First Nations communities found that between 60% and 100% of students who started the program finished the two years of full-time university course work* – **double** the completion rate for Aboriginal students across other post-secondary diploma programs in Canada.**

*Ball, J. (2000). *First Nations Partnership Programs: Generative Curriculum Model. Program Evaluation Report*. Victoria: University of Victoria (available upon request).

**Blanchet-Cohen, N., & Richardson, C. (2000). Postsecondary education programs for aboriginal peoples: Achievements and issues. *Canadian Journal of Native Education*, 24(2), 169-184.

All program graduates become eligible to receive the British Columbia Ministry of Health's Early Childhood Educator "Basic" certificate as well as two "Post-Basic" certificates in caring for children with special needs and caring for infants and toddlers.

¹ Pence, A., & Ball, J. (1999). Two sides of an eagle's feather: University of Victoria partnerships with Canadian First Nations communities. In H. Penn (Ed.). *Early childhood services: Theory, policy and practice* (pp. 15-36). Buckingham: Open University Press.

² Ball, J., Pierre, M., Pence, A., & Kuehne, V. (2002). Rediscovering First Nations values in child care in Canada. In M. Kaplan, N. Henkin & A. Kusano (Eds.). *Intergenerational program strategies from a global perspective* (pp. 83-100). Lanham, MD: University Press of America.

Graduates also receive a two-year Diploma from the University of Victoria. Graduates may apply to count their courses towards a four-year degree at the University of Victoria's School of Child and Youth Care. (Please see www.fnpp.org for more information about the First Nations Partnerships Program).

WORLD-WIDE RECOGNITION

In 2002, UNESCO selected the First Nations Partnerships training program for inclusion in a volume of “best practices” from around the world that incorporate Indigenous knowledge.*

*Ball, J. & Pence, A. (2002). A Generative Curriculum Model: A bicultural, community-based approach to building capacity for Early Childhood Care and Development in Indigenous communities in Canada. In K. Boven & J. Morohashi (Eds.) (2002). *Best practices using Indigenous Knowledge* (pp. 198-218). Nuffic, The Hague, The Netherlands, and UNESCO/MOST, Paris, France.

Motivation

The motivation for this follow-up research project came from the partner First Nations communities.

Three years after the end of the two-year training program, the First Nations leaders who had committed their communities to partner with the University of Victoria and to invest in the co-delivery of the early childhood care and development training program wanted to measure the results of their investment. They also wanted to document and share their successes in improving community-based supports for both children and their caregivers.

The research involved university-based field investigators working with community-based collaborators who were given basic training in research. Together, they conducted group forums and interviews, gathered community program documents, and completed secondary reviews of service utilization records. The university-based team analysed the data, provided the participating communities with preliminary reports of the project findings, and made use of their feedback in developing this report.



Communities

Members of 14 First Nations communities, ranging in size from approximately 100 to 1,000 members, participated in this research project. The communities are clustered together – both geographically and

organizationally – into three groups, with the First Nations that make up Treaty 8 Tribal Association located in the north-east of the province, TI'azt'en Nation located in the centre of the province, and Lil'wat Nation located in south-west British Columbia.

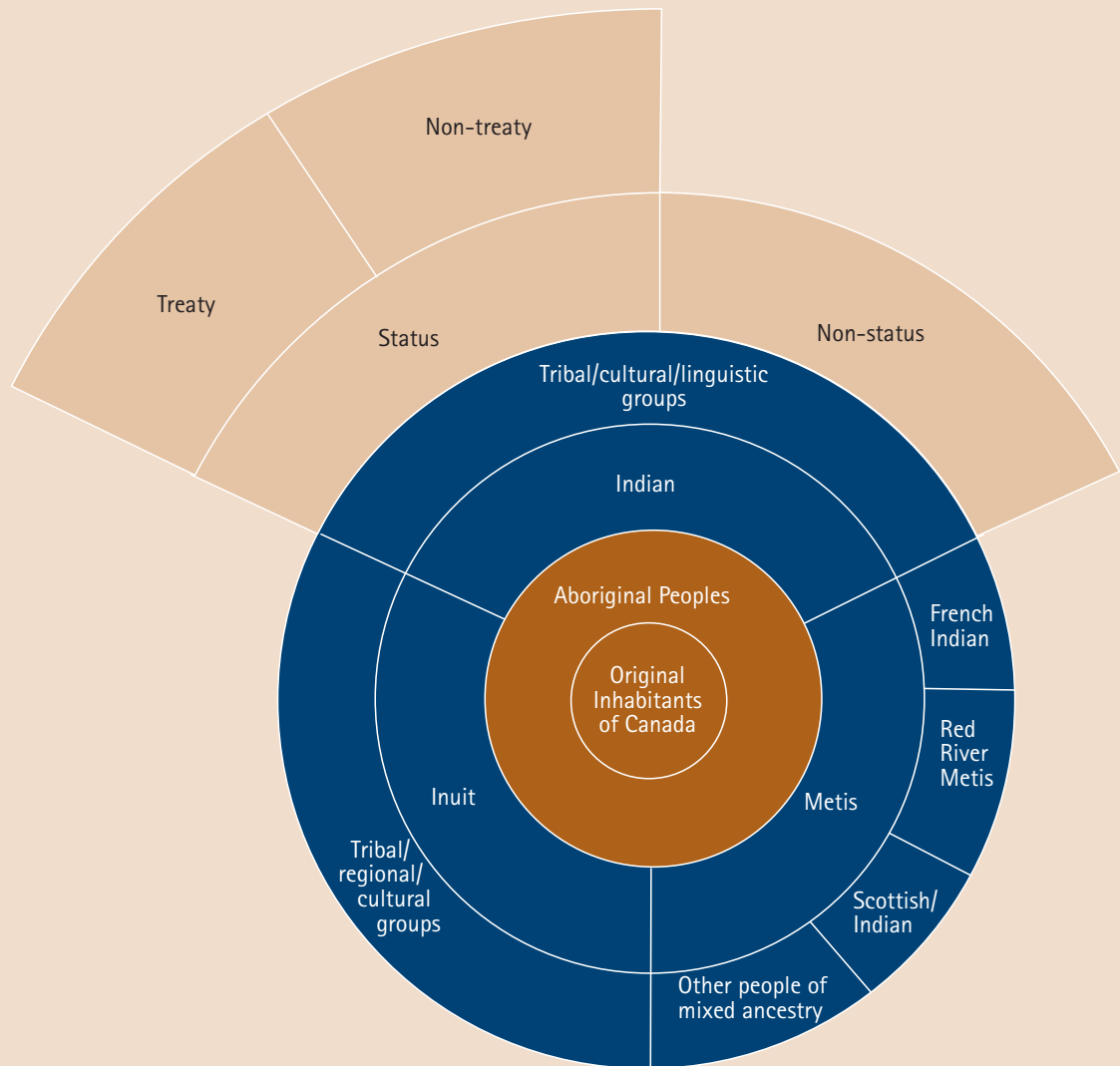


FIGURE 1: Aboriginal Peoples in Canada

Reproduced with permission of Manitoba Round Table on Environment and Economy. (1998). *Priorities for Action: Towards a Strategy for Aboriginal People Living in Winnipeg*. Final report, conclusions, findings and recommendations of the Manitoba Round Table on Environment and Economy Urban Aboriginal Strategy Public Consultation Process. Winnipeg: Manitoba Conservation, Government of Manitoba. <www.gov.mb.ca/conservation/susresmb/pub/>



FIGURE 2: First Nations Participating in this Research Project



TREATY 8 TRIBAL ASSOCIATION

Treaty 8 Tribal Association in British Columbia consists of eight culturally diverse and geographically dispersed, but politically cooperating, First Nations located in Northeast British Columbia. The communities range in size from 70 to 205 members, and are located from two to seven hours drive from Fort St. John, which has a population of 16,000 people, and a hospital and other services.

Six of the eight member Nations in this Association sponsored a total of 15 students (two or three students from each community) to live in or near Fort St. John in order to take the early childhood care and development training program. By the time the students graduated, three of the First Nations had developed new facilities and new services for children, and two more were able to use existing educational facilities to mount new child care programs. One community was not able to develop services due to other pressing priorities. There are now two Aboriginal Head Start programs located in

Blueberry River and Saulneau First Nations – two of the smaller reserve communities – both staffed by program graduates.

TL'AZT'EN NATION

Tl'azt'en Nation consists of three small communities with about 680 members, all sharing the same culture and history. A band-operated school in the largest village serves children from Kindergarten to Grade 8. Like much of Northern British Columbia, the communities are short of screening, diagnosis and early intervention services, and most specialists are located in the city of Prince George – three hours drive away in good weather.

Before the training began, this First Nation received Aboriginal Head Start and other funding, which enabled the Nation to construct a day licensed child-care facility in an unused wing of the band-operated school. When their 10 students completed the early childhood care and development training program, most of the graduates were involved in opening the new facility and offering a child care and development program called SumYaz, or Little Star, in the community for the first time, along with other services that are integrated into the child-care program. A short time after this first full-day child care and development program opened, the community received funding to mount an Aboriginal Head Start program, now delivered in a facility on the school grounds.



Both programs are run entirely by trained community members and both have received excellent evaluations both from the regional Early Childhood Education licensing officer and from Aboriginal Head Start. Children come by bus from the two smaller villages of Binche and Dzitl'ainli, 20 to 45 minutes away, to attend the school, the child-care program, and Aboriginal Head Start.

LIL'WAT NATION

Lil'wat Nation, situated in south-western BC about two hours from the urban centre of Vancouver, consists of one main community of about 1,000 members and four other affiliated communities with a total of about 800 members. The communities share a band-operated school offering Kindergarten through Grade 12 and many other services. Together they have established a well-developed planning structure, stable leadership, and a long history of successful development initiatives.



Lil'wat Nation sponsored 15 full-time community members to enrol in the early childhood care and development training program. In 1999, just as the students were graduating, the community opened a new multiplex facility, called *Pqusnalhcw*, or Eagle's Nest, to provide community members, Elders and children with a culturally vibrant gathering place that could also serve to promote health and wellness for the whole community. The multiplex houses a large preschool program, called *Skwalx*, or Baby Eagle, and a large infant care centre called *Tsepalin*, or Baby Basket. Co-located in the same multiplex are a community kitchen, a health information and promotion area, health services offices with examination rooms, and multi-purpose rooms offering a range of family services. The multiplex is now fully staffed and operated by trained community members and functions as a site for the integrated and co-located delivery of a range of health services, including alcohol and drug counselling, tobacco reduction and diabetes prevention, as well as infant and toddler care, preschool and after-school care, and parent support programs such as Best Babies and language facilitation training.

Project Participants

76 people from Lil'wat Nation, Tl'azt'en Nation, and the Treaty 8 Tribal Association participated in this research project. They included Elders, key administrators, external service providers, parents with children in programs operated by the graduates of the

early childhood care and development training program, program graduates and other staff currently working with the graduates.

The 28 graduates we interviewed were drawn from the 35 full-time students who graduated (out of 40 originally enrolled) from the early childhood care and development training program in 1999. We were not able to interview any of those who did not complete the program.

Data Collection

INTERVIEWS

With program graduates, we used an open-ended, in-depth interview format. We asked them to tell us all that they had been doing since completing the two-year training program in 1999, what influenced their career paths, and what was important to them in their work with children.

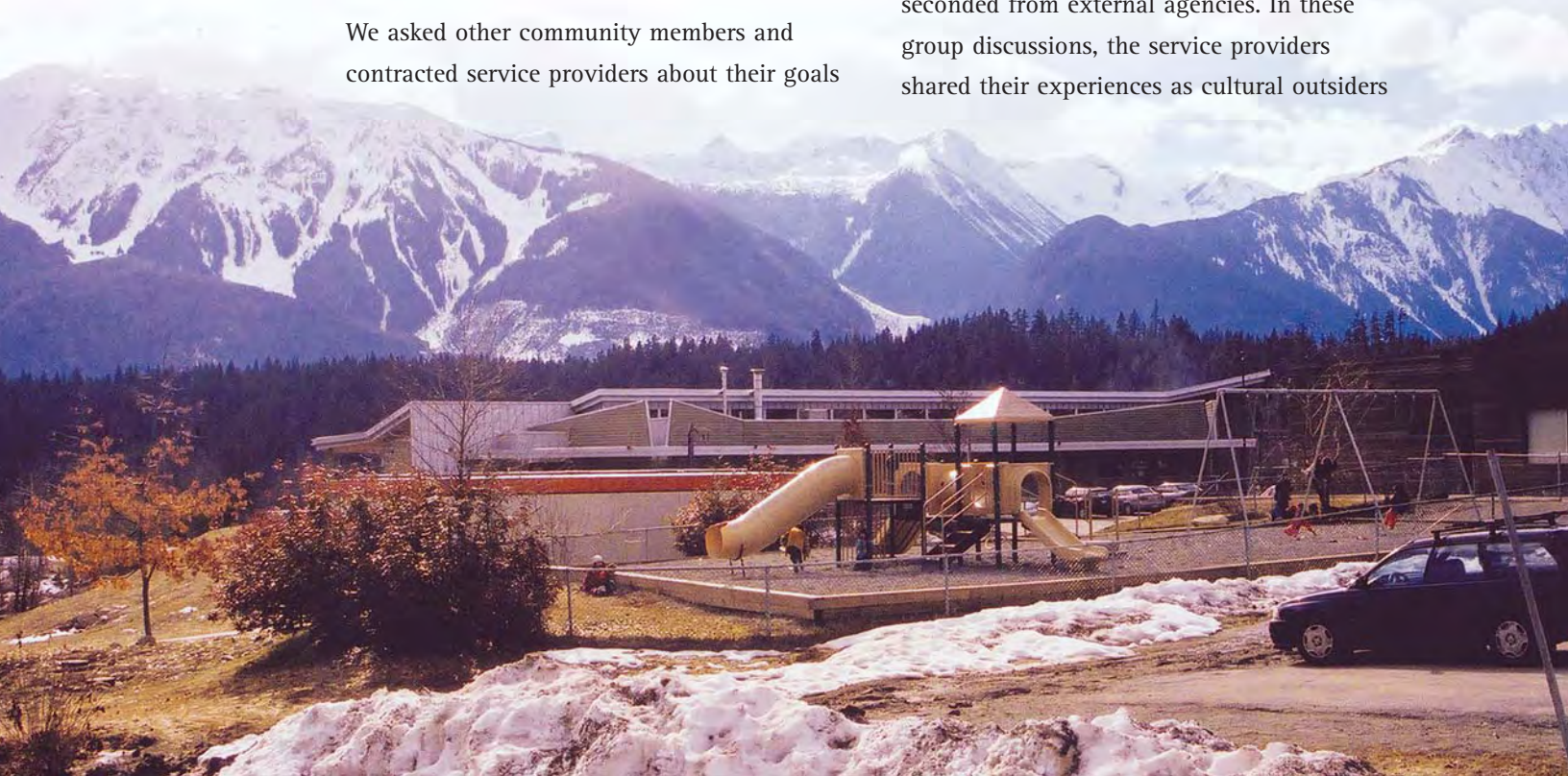
We asked other community members and contracted service providers about their goals

for children in their communities, what needs did they think were still unmet, what the training program and the work of the graduates were contributing to their communities, whether they were satisfied with the current levels and kinds of services delivered for young children and families in their communities, and what community supports they hoped would be available for children in the future.

GROUP FORUMS

In each community, we held group forums where several graduates met together with a field researcher to talk about a topic, such as what they were doing to reach out to parents of children in their programs, to involve Elders and to nurture children's cultural self-awareness and knowledge.

We also used group forums to gather views from specialist service providers, most of whom are contracted by the community or seconded from external agencies. In these group discussions, the service providers shared their experiences as cultural outsiders



working in these First Nations, along with their observations of how well program ideas, plans, priorities and delivery were converging to provide integrated supports for children and families.

OBSERVATIONS

We also observed child-care programs to document activities that the staff identified for us as cultural practices that effectively reinforce and extend children's grasp of their cultural identity, traditions and heritage language.

PROGRAM RECORD REVIEW

Community-based collaborators on the project gathered policy and program documents describing various programs available in the participating communities. They also reviewed the service records of children enrolled in child-care programs to document the types, levels and infrastructure of services used by young children and their families in each community and region.

Report Overview

This report is divided into sections based on our investigations into five primary questions:

- To what extent have graduates of the early childhood care and development training program been successful in making the transition from training to work in First Nations early childhood services?

- How are these First Nations communities currently delivering their early childhood care and development programs, and are they satisfied with their current service-delivery models?
- Are the current child-care programs successfully teaching young children about their culture and nurturing a sense of cultural identity and pride?
- Are the current child-care programs both actively encouraging parental involvement in child care *and* supporting and strengthening the ability of parents to develop themselves and to parent?
- Are the current child-care programs successful, and can that success be sustained?

Each section ends with our conclusions about the question and our recommendations for future actions by First Nations communities, funding agencies and policy makers. The final section of the report provides our overall conclusions about the early childhood care and development programs now underway in the First Nations communities.

Throughout this report, verbatim quotes from interviews are not attributed. This follows the protocol established when individuals agreed to participate in the project by giving an interview or joining a group forum discussion.







TRANSITIONS

from early
childhood care and
development
training to related
employment

QUESTION:

To what extent have graduates of the early childhood care and development training program been successful in making the transition from training to work in First Nations early childhood services?

General Findings

The lack of trained First Nations community members to create and staff child care and development programs in First Nations communities, as well as in urban programs serving Aboriginal families living off-reserve, is a long-standing problem.

In 2003, training – and the transition from training to work – was identified as a top priority at a gathering of 200 delegates involved in Aboriginal early childhood policy and programs from across British Columbia.³ Delegates pointed out that it is difficult for smaller, more remote communities to attract qualified people, which forces families to leave their communities in order to access the services they need for their children. They also noted that, in larger First Nations communities, almost all qualified practitioners come from outside the culture in which they practice, leaving the communities less able to carry forward cultural goals for children’s development.

The communities that participated in this study were attempting to turn this situation around when they first invested in the delivery of the two-year early childhood care and development training program six years ago. This program incorporated and built upon their cultures and was delivered in the community, where the whole community could see, hear and take part in various

aspects of the training process, and later in the creation of new children’s programs.

FROM TRAINING TO WORK

- In 1999, 35 full-time students completed the two-year early childhood care and development training program.
- Four years later, in 2003, 33 former students (82.5%) were working and three, including two early leavers, were in further training.
- 30 former students kept their employment focus as serving child and family well-being, almost all in Aboriginal programs.
- The majority were working in either child-care or Aboriginal Head Start programs. Other occupations included self-employment, camp cook for work crews, family supportworker, community health representative and school-based aboriginal liaison worker.

³ BC Aboriginal Child Care Society (2003). *Many voices, common cause: A report on the Aboriginal leadership forum on early childhood development*. Vancouver, BC: Author.

For this research project, we wanted to know whether graduates had become fully self-supporting or at least partially financially independent through paid employment, and whether they had obtained work with young children. We also wanted to find out about the quality of their labour force attachment, such as whether they want to continue in the early childhood care and development field and whether they feel satisfied and fulfilled in their work.

Because the training program was intended to provide community members with useful skills, we also asked them whether their skills proved to be competitive in the current

labour marketplace. And we asked whether they had the option to continue to expand their skills and respond to other employment opportunities in the future. Finally, we asked about other priorities in addition to the pursuit of paid work, such as health, family obligations, life goals or dreams, spiritual development, and community needs.

Some of our findings are consistent with what has been documented in other studies of child-care practitioners,⁴ and some echo findings of studies focused on sustaining employment in rural and northern areas.⁵ Still others appear to be unique to First Nations' community development.



TABLE 1: Employment Four Years after Completing Training

Year	Current Employment Status	Community			Total
		Lil'wat	Treaty 8	Tl'azt'en	
Training Program Completions					
1996/97	Student cohort totals (full time students)	15	15	10	40
1999	Number who finished 2 year program ⁶	14	13	8	35
Current Employment Status					
2003	Working (part-time or full time) ⁷	12 + 2	10	9	33
2003	Not working	1 unknown	3	0	4
2003	In further training or upgrading	0	2	1	3
Employment Focus					
2003	Serving child & family well-being	12	8	9	30

⁴ Goelman, H., Doherty, G., Lero, D.S., LaGrange, A., & Tougas, J. (2000). *You Bet I Care! Caring and learning environments: Quality in child care centres across Canada*. University of Guelph, Ontario: Centre for Families, Work and Well-being.

⁵ de Leeuw, S., Fiske, J. & Greenwood, M. (2002). *Rural, Remote and North of 51: Service Provision and Substance Abuse Related Special Needs in British Columbia's Hinterlands*. Prince George, BC: University of Northern British Columbia Task Force on Substance Abuse.

⁶ The program completion totals are taken from a program evaluation completed in 1999 and published in 2000. Because field interviews in this earlier project were conducted one month before the graduation in Community #1, completions were best estimates based on most likely outcomes. One graduate who seemed likely to complete a final practicum requirement did not, and so final completers drops by one in Partnership 1.

⁷ Two program completers were in the community but not directly interviewed. According to others, these two were working. Another had left the community and her activities were unknown.

"I am proud of what these women have achieved. They are all doing really well and they are role models for our children and for other parents in our community. They worked hard to get their diplomas, but they had fun too. Well, I guess we probably had more fun than they did – we all did. The Elders enjoyed coming to the classroom. They laughed and had fun with the students. And the students took notes of what they said and they learned from the Elders about how to raise our children. And now we are all benefiting from what these women can do for us. What they are doing now, with our children. These women are going to be the leaders for our people – some of them already are."

Key Influences on Transitions to Employment

LABOUR MARKET CONDITIONS: INSIDE THE COMMUNITY

Our research clearly shows the immediate return on investment when professional training forms part of a comprehensive strategy for providing jobs in the community.

If communities can support training by building the "hard" infrastructure (buildings and equipment) and the "soft" infrastructure (including enabling policies, training in human services, effective governance for service developments and delivery, the appointment of administrators and management) that is required to support the delivery of child-care services, their graduates will make a faster and easier transition from training to work.

In the larger communities of Lil'wat Nation and Tl'azt'en Nation, the communities raised funds and set plans in motion to construct facilities, build furniture and order equipment that provided the hard infrastructure for a licensed child-care facility. Students in the training program, along with administrators of health and social services, also developed policies to govern employment, subsidies for

parents, daily operations, utilization and management of child-care services.

With this infrastructure in place, by the time community members obtained their credentials, the local labour market in these two First Nations communities was ready for a large number of graduates to move directly into career-relevant jobs in their communities. Over half took up staff positions in newly opened program facilities within weeks of graduation.



"There wasn't much change for me when the program finished! I just walked across the street to work instead of walking to the portable (classroom) every morning. A lot of us got jobs here right away, so we saw the same people here everyday. It was easy. It was great."

The advantage of concurrent training and infrastructure development was also clear among the First Nations of the Treaty 8 Tribal Association who participated in this study.

In Saulneau First Nation, Council members maintained a keen interest in the progress of the community members they sponsored for the training, and took steps to secure a building and funding for graduates to mount a culturally rich child care and development program in the community when the training ended. (The graduate who implemented the new service for children in this community is now one of the leaders in Aboriginal early childhood education in British Columbia.) Blueberry River First Nation also obtained funding for an Aboriginal Head Start program shortly after the training program ended, and graduates from this community soon became employed in that program.

In contrast, jobs in the community were not available to Treaty 8 graduates who came from smaller, more isolated communities that were less able or prepared to mount the infrastructure that would create jobs in child

and family services. Some graduates moved to the nearby town and took positions that were only somewhat relevant to their training (school-based learning support, for example).

Four years later, however, at the time of this research project, the majority of communities had mounted new programs for infants and young children, and almost all the graduates were employed in their home communities in child-care or Aboriginal Head Start programs. The remaining students were either in further training or not working.

LABOUR MARKET CONDITIONS: OUTSIDE THE COMMUNITY

The fact that most graduates were working in their home communities is a great success story – but it also raises the question of whether transitions to off-reserve employment are possible, and if not, why not.

Our research points to two primary labour market issues blocking off-reserve work:

1 Lack of opportunity in rural and northern settings.

The students were trained and qualified as early childhood educators. Most ECE's in British Columbia work in licensed group child care, which is dependent on public funding. Between 1999 and 2003, the federal government increased funding for Aboriginal early childhood intervention through Aboriginal Head Start, while at the same time the provincial government

“We were really happy to have a qualified Aboriginal person join our staff, because a lot of families we serve are Aboriginal. She planned a lot of cultural activities that we all found really interesting. But I have to admit that some of the staff were sceptical about whether she would fit in to our program, being from the reserve, and even some of the non-native kids were, well, quite unkind to her. And I think these Aboriginal women – a lot of them – are handling a lot, and our program didn't offer much understanding about the flexibility they needed, for example, to take time off to handle an emergency that happened back home, or to deal with an issue like their own kids being sick, or someone needing to be driven to the hospital. I think if we want to make a place for Aboriginal ECE's, we have to be more understanding and flexible, but then we need more substitute staff that we could call to fill in.”



in British Columbia reduced funding for a wide variety of community services, including child care. Many observers of recent changes in provincial government support for human services agree that rural and northern communities in particular have been hit hard, which has forced many training and service programs to close.

At the time of this study, on-reserve child care offered the best employment opportunities in rural and small communities.

2 Persistent and pervasive racism.

Although some First Nations graduates had excellent employment experiences off-reserve, others experienced racism. Sometimes this originated with the children they were caring for; one practitioner said that the children “noticed my skin colour” and “didn’t listen to me” as well as they did to other caregivers. Another former student described a non-child-care work experience in which she

was persistently given the worst shifts and in which her boss denied fair pay by reducing her claimed hours.

Other research corroborates this finding,⁸ as did the non-First Nations service professionals we interviewed for this project. These professionals noted that employment opportunities for Aboriginal people in the north are limited, and that workplace attitudes and expectations make it difficult to sustain employment unless you live and act “like a white person.”

INDIVIDUAL FACTORS

We found that making a successful transition to work depended heavily on:

- previous caregiving experience with young children
- respect and authority within the community, and
- personal well-being.

⁸ Bernhard, J., Lefebvre, M.L., Chud, G., & Lange, R. (1995). *Paths to Equity: Cultural, Linguistic and Racial Diversity in Canadian Early Childhood Education*. Toronto: York Lanes Press.



Most of the graduates were mature women and most were mothers or grandmothers. Those who were respected within the community for their experience and good conduct as caregivers of children had the easiest and most successful transitions into core community positions.

The women who had longer and more tumultuous transitions from training to steady employment came from two groups:

- younger students (under 24 years old when they graduated), with little experience or reputation within their communities as caregivers of young children, and
- older women struggling with personal issues that resurfaced during training when they reflected upon their own early

learning experiences – especially the experience of attending Indian Residential Schools, which left many scarred and vulnerable.

COMMUNITY AND CULTURAL INFLUENCES

All the women we interviewed had to balance family, community and personal needs both while they were taking the training program and later, as graduates, in their search for steady employment, especially if they were looking for work off-reserve. The graduates told us that they find it hard to leave their communities. They are very much a part of their extended families and most are active in cultural events and traditional forms of life such as fishing, hunting, berry picking, and raising animals – all of which help to give their lives meaning.

They also most often cited:

- The needs or wishes of extended family, not only their partners and children as defined in the Euro-western concept of family, but also others whom they are close to and who might be living with them, such as adult children and their children, parents or parents-in-law, siblings, special aunties, uncles, cousins, nieces, nephews, and foster children.



- The needs of their own children, particularly in considering whether to live on- or off-reserve. For some of the graduates, their desire to access supports for children with special needs or to provide better opportunities for education and experience was a major motivation to look for off-reserve work. One graduate stated that political and social issues in her small and remote home community were

too “toxic” for raising her children, hence her search for work “away.”

- The need to balance the division of labour in the family, and especially their work schedule with their partner’s work schedule, for the overall financial health of the family. (This significantly delayed the transition to employment for two graduates.)

AVAILABILITY OF CHILD CARE AND TRANSPORTATION

Most of the communities involved in this study did not consider it a priority to ensure program graduates had child care for their own children. As a result, a few found it difficult to secure child-care places for their own children, which increased the time it took for them to find full-time employment after graduation.

“I couldn’t work when I finished the (training) program. I couldn’t find child care for (my son). He has FAS, and he’s doing really well, but he still needs extra support, and I couldn’t leave him with anyone around here all day, and he was on the waiting list for months, way at the bottom. But when he started school, I could start work, and it’s fine now.”

Many studies confirm that the provision of reliable, quality child care is often a pre-requisite for the transition from training to work.⁹

⁹ Doherty, G., Rose, R., Friendly, M., Lero, D., Hope Irwin, S. (1995). *Child Care: Canada Can’t Work Without It*. Occasional Paper No. 5. Childcare Resource and Research Unit, Centre for Urban and Community Studies, University of Toronto. Available at www.childcarecanada.org/resources/CRRUpubs/op5/5optoc.html

In addition, like many First Nations people, more than half of the graduates we interviewed do not have a driver's license or a personal vehicle, and some told us that the lack of transportation slowed their transition to work because they were not able to interview for or accept work that required a personal vehicle.

ESSENTIAL SUPPORT

The Assembly of First Nations, which represents on-reserve First Nations, the Native Council of Canada, which represents off-reserve native people and the Métis population, and Pauktuutit, the Inuit women's association, all view culturally-appropriate, accessible, and affordable child care services as:

- an essential support for parents trying to become financially independent through job training and making the transition from training to joining the paid workforce, and
- crucial to the struggle to instil cultural pride, self-respect and self-confidence in Aboriginal children as a way to help them to become psychologically healthy adults.*

*Lightford, E. (1993). *Child Care in the North*. Ottawa: Ontario: Royal Commission on Aboriginal Peoples.

Key Supports for Successful Transitions and Development

Graduates told us that mentorship and a collegial, supportive working environment have played critical roles in both the transition to work and ongoing personal and career development.

MENTORS

External mentors, such as former instructors and specialists who were working on contract or salary in the community, have provided key support to graduates. They shared their professional knowledge, helped the graduates expand their skills, built their confidence in practice, and encouraged advancement – and the graduates felt they had a role model and supporter they could turn to. In the most successful transitions, these external experts provided support above and beyond job roles or responsibilities.

“My instructor is a mentor to me. What did I learn? Ongoing development; the former Director was my mentor before her. She said I can call her anytime.”

The report titled *Recruitment and Retention Plan to Improve Access to OT, PT & SLP Services for Preschool Children* confirms the need for mentorship and collegial support for those working in remote, rural and northern settings: 76% of professionals interviewed for this report in 2001 rated on-going peer support/mentorship as “very important.”¹⁰

¹⁰ Cameron, D., McLean, M., & Mahchid, N. (October 2001). *Recruitment and Retention Plan to Improve Access to OT, PT & SLP Services for Preschool Children*. Ministry of Child and Family Development. Vancouver, BC: BC Centre for Ability.

One program graduate who obtained a full-time job in a child care and development centre in the nearest town said:

“Our practicum supervisor at the time was a real strength for me – she still is. She taught me a lot when I took the program, and then before I had even graduated, she helped me to get a really great job in town. I looked up to her and the fact that she had the confidence in me that I could do it, as my first job right after I finished, gave me confidence. And because of that, I got to keep my son with me, instead of having to send him to stay with my ex while I went further away to look for work.”

Several sites across Canada and the United States have reported on the effectiveness of mentoring for facilitating successful transitions from formal basic training to work, as well as increasing early childhood care competencies and professional networking.¹¹

ADMINISTRATORS

Graduates also described how the personal support they received from their community’s administrators – the people with responsibility for the training program and for child and family service development – was another key to their success in finding work and developing in their profession.

Administrators provided financial assistance for training, encouragement to apply for jobs, and assistance in preparing for job interviews. They also followed up, keeping track of graduates’ progress. These practical supports were especially critical in helping students who were delayed in completing the training program make the transition from training or unemployment to work.

“The Education and Training Society Coordinator followed up with me really regularly. She (the Education Coordinator) was really interested in having me get my Diploma. She checked from 1999 to 2002 when she got me into a class. Then I finished the program and I had no trouble finding work right away. She told me about an opening coming up in at the child care and development centre and so I went and I got it.”

All of the small communities that participated in this project have a core group of leaders who are instrumental in creating opportunities and supports for community members across several domains, such as training, health care, social services, construction projects, transportation, and housing. In most of these communities, the same administrators who helped to get community members started on the training journey also facilitated the creation of jobs through new child-care programs or developed strategies for getting graduates into available jobs.

¹¹ Whitebook, M., & Sakai, L. (1995). *The Potential of Mentoring: An Assessment of the California Early Childhood Mentor Teacher Program*. Washington, DC: National Center for the Early Childhood Workforce.

"I keep a look out for who needs jobs and push them forward when something comes up. Sometimes I push the person to go for it, in case they seem to be hanging back for some reason. It's part of the process – if we're going to invest in training our people, then we need to get back what we put in, to develop our community. But it doesn't just happen. We have to stay involved with the people who have completed training programs, and see them through to the point of getting a job and keeping it."

Key Influences on Staying in the Profession

Graduates identified four factors as key to their staying in the early childhood care and development field:

- their love of caring for children, and community respect for doing it
- the confidence that comes from achievement and receiving financial rewards
- feeling that they have made a significant contribution to sustaining their cultures and communities, and
- the opportunity to increase their competence through ongoing professional development.

A large study published in 2000 confirms the critical importance of providing recognition in the form of fair wages and working conditions.¹² A 1998 review of reports identifying the determinants of recruitment, training and retention of early childhood care practitioners in Canada also emphasizes the importance of opportunities for ongoing professional development in retaining both trained child-care staff and in achieving and maintaining quality of care in child-care programs.¹³



¹² Goelman, H., Doherty, G., Lero, D.S., LaGrange, A., & Tougas, J. (2000). *You Bet I Care! Caring and learning environments: Quality in child care centres across Canada*. University of Guelph, Ontario: Centre for Families, Work and Well-being.

¹³ Beach, J. & Bertrand, J. (1998). *Our Child Care Workforce: From Recognition to Remuneration*. Ottawa: Canadian Child Care Federation.

BARRIERS TO PROFESSIONAL DEVELOPMENT

“Agencies working with children and adolescents in northern isolated communities have very particular barriers facing them with regards to service provision. A lack of highly trained professionals in conjunction with an inability to access training and professional development options, means personnel are often working at a disadvantage when compared with their southern counterparts ... funding and programming must include opportunities for professional development, networking with other communities and innovative solutions for service delivery.*

*de Leeuw, S., Fiske, J. & Greenwood, M. (2002). *Rural, Remote and North of 51: Service Provision and Substance Abuse Related Special Needs in British Columbia's Hinterlands*. Prince George, BC: University of Northern British Columbia Task Force on Substance Abuse.

At the time of this project, several graduates were just moving into leadership roles as directors of their community's child-care programs and other family services. Others were thinking about continuing their university education. In two communities, administrators had offered to sponsor a second group of community members to enrol in early childhood care and development training. They plan for these new graduates either to take basic staff positions and supplement the first group of graduates as the community's programs expand and diversify, or to free-up the earlier wave of graduates to move into more senior roles.

Conclusions

One of the biggest challenges for small communities is to assemble, support and retain a qualified pool of trained community members and other professionals who can offer continuity in service delivery.

Almost all of the graduates from the early childhood care and development training program were still in their communities four years after graduating. Where jobs were available, as was the case in all but the smallest communities that delivered the training program, the graduates were working in their field of choice, with children. (This far exceeds national and provincial trends; the available data indicates that Aboriginal peoples' attachment to employment in the vocation for which they were trained is generally much lower.¹⁴)

Having qualified community members who can staff community-based programs:

- means child-care centres can be licensed, which both meets one of the eligibility requirements for funding and supports continuity of service
- protects a program, as well as the children and families who use it, from excessive disruption when an individual staff member leaves, and ensures ongoing social support and continuous memory of the needs and goals of children and their families in programs, and
- provides, perhaps most importantly, a sense of stability for the community as a whole.

¹⁴ Archibald, J., Pidgeon, M., Janvier, S., Commodore, H., & McCormick, R. (2002). *Teacher recruitment, retention and training: Implications for First Nations education: A literature review*. Prepared for the Minister's National Working Group on Education, Indian and Northern Affairs.



SUCCESS

The high rate of employment in all three groups of First Nations communities indicates that one of the central goals of community leaders in participating in the early childhood care and development training program has been fulfilled: they now have a qualified workforce of community members to deliver early childhood programs to their own people, using understandings and guidelines for practice that are informed by their own cultural traditions.

However, most graduates were only able to find jobs in those communities that developed their own community-based programs. While the high level of employment among all the graduates we interviewed indicates they have a strong motivation to work, graduates in the smaller, geographically more dispersed communities of the Treaty 8 Tribal Association – where the communities did not develop their own opportunities on-reserve – had a less “even” entry into work and less sustained employment. This suggests that an essential part of the transition to work is the preparation of the off-reserve labour market for those graduates whose communities do not provide relevant work opportunities or who wish to pursue work outside of their communities.



Our research also indicates that:

- the role of the senior community administrator responsible for post-secondary education is key to facilitating the vision necessary for an integrated training-to-work pathway
- individual and cultural factors need to be taken into account in planning for successful transitions from school to work, particularly for younger people with less relevant work or personal experience
- the need to balance family and community can limit the opportunities for First Nations people to move in order to work or to take up employment in their own community – at the same time, however, the opportunity to work in a context and in a way that merges one’s own culture, community, paid employment and personal development does create the conditions for long-term, stable commitment to employment
- community administrators can provide essential support for graduates, especially for those making a slower transition from training to employment
- mentorship and peer support are fundamental both for making a successful transition to work and to continued professional growth.

In addition, we found that:

- Most participants believe that high levels of a variety of community-level supports are a determining factor in successful training and vocational outcomes. (This echoes narrative accounts of the post-secondary experiences of First Nations graduates recorded by Archibald and her colleagues.¹⁵)
- Community administrators and graduates see the hiring of program graduates – resulting in new income for these community members and their families – as the most important outcome of the community’s investment in training.
- Most graduates feel that making an important and valued contribution to the community, and being paid for it, is a powerful affirmation of the value of their journey and career choice, and they cite the opportunity to continue to grow professionally as a motivating force.

Reports from other community development initiatives have also identified income generation through training, work satisfaction and increased social status as positive outcomes as important indicators of the success of programs to increase community well-being and capacity to delivery programs.¹⁶ Other research suggests that low wages and lack of opportunity for professional development – always a shortcoming in northern and rural



Ernie Philips, Elder, Little Shuswap Indian Band

communities – could cause their interest in the practice of early childhood care and development services to wane over time.¹⁷

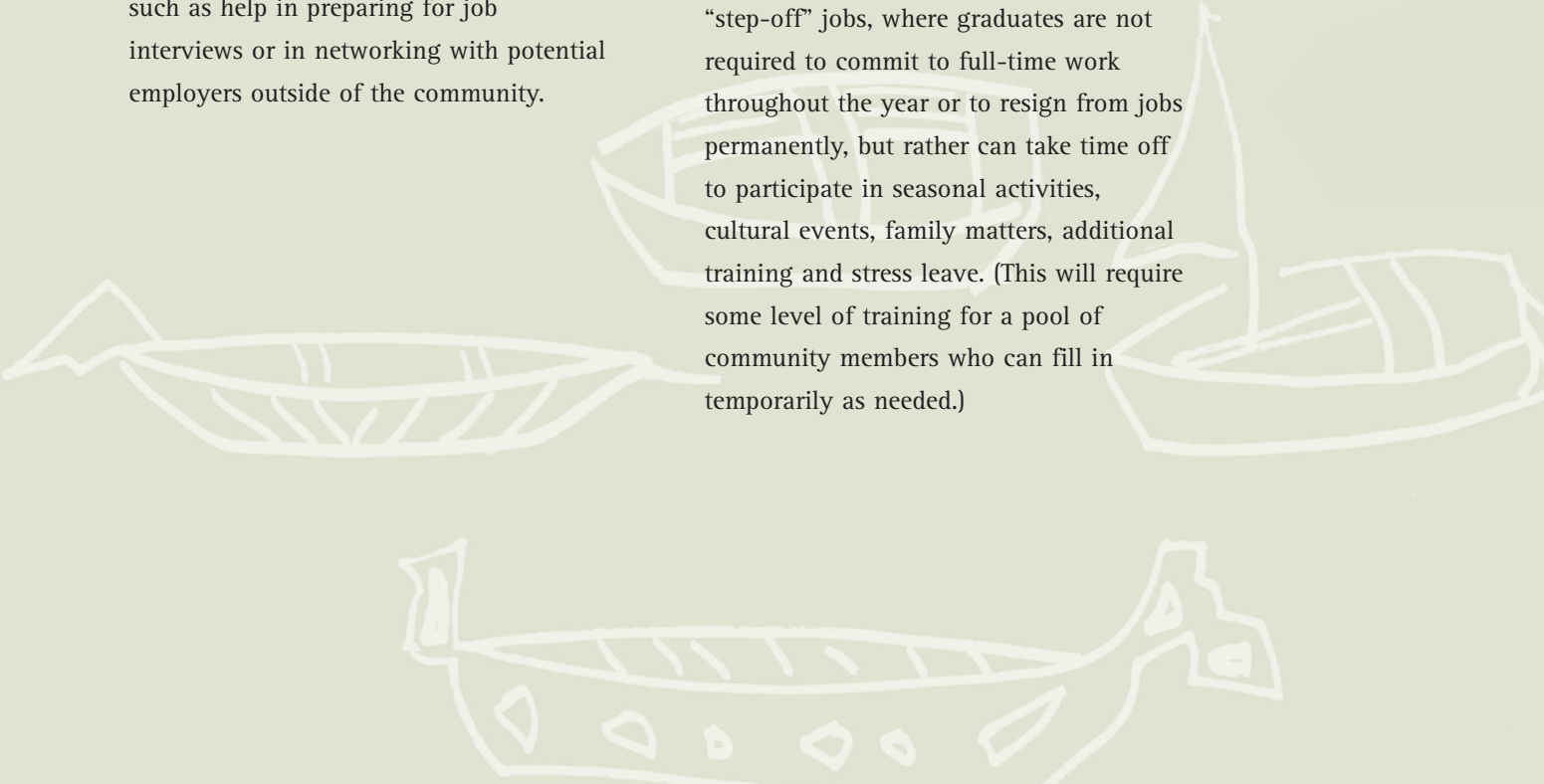
¹⁵ Archibald, J., Bowman, S., Pepper, F., Urion, C., Mirehouse, G., & Shortt, R. (1995). Honouring what they say: Postsecondary experiences of First Nations graduates. *Canadian Journal of Native Education*, 21(1), 1-247.

¹⁶ Population and Public Health Branch, Manitoba and Saskatchewan Region (2003). *How our programs affect population health determinants: A workbook for better planning and accountability*. Winnipeg/Regina: Health Canada Evaluation Research Unit.

¹⁷ Schneider, N. & Boyd, B. (1996). Burnout in Canadian Day Care Providers. *Canadian Journal of Research in Early Childhood Education*, 5 (1), 3-11.

Recommendations

The research completed for this report provides a basis for several recommendations that may apply to making smooth transitions from training to work, not only in the field of child care and development, but in other fields as well. We recommend that:

- While developing training programs for Aboriginal people, community administrators also begin to plan how they can support graduates in making the transition to work through such actions as:
 - in-community (or community-based) job creation, and
 - the development of opportunities for work experience to build confidence and professional contacts.
 - Community administrators remain actively involved in students' and graduates' lives after the training program and offer encouragement and practical supports, such as help in preparing for job interviews or in networking with potential employers outside of the community.
 - Because graduates with children in their care must be free to work, communities fund child care and after-school care for the children of graduates and assist graduates in securing child-care places for their children.
 - Communities use monetary incentives to retain qualified community members as staff in early childhood care and development programs and to recognize ongoing professional development that prepares community members for managerial and other leadership roles.
 - Communities construct "step-on" and "step-off" jobs, where graduates are not required to commit to full-time work throughout the year or to resign from jobs permanently, but rather can take time off to participate in seasonal activities, cultural events, family matters, additional training and stress leave. (This will require some level of training for a pool of community members who can fill in temporarily as needed.)
- 

- ➔ Community administrators acknowledge and remunerate professionals who provide contracted services in the community for the time they spend supporting graduates by being informal mentors, by demonstrating and sharing their skills with graduates who are new to the field, and by introducing them to professional networks and associations, as well as to prospective employers.
- ➔ Communities support and encourage the continued professional development of graduates by providing job leave and funding for attendance at professional meetings and conferences, arranging for university-accredited continuing education courses and other training, and gradually involving graduates in advanced levels of community-based program planning and administration.
- ➔ Funders provide targeted funding for the ongoing professional development of graduates (and other community-based staff) in rural, remote and northern settings.
- ➔ Administrators of non-Aboriginal community programs work to create practicum and work experience opportunities for Aboriginal trainees and to provide a welcoming, anti-racist environment for new Aboriginal employees.







early CHILDHOOD

care and
development as
hook and hub

QUESTION:

How are these First Nations communities currently delivering their early childhood care and development programs, and are they satisfied with their current service-delivery models?

General Findings

Interviews with graduates and administrators, our own observations and a comprehensive review of the service records of children enrolled in child-care programs helped us build a clear picture of how each First Nation is developing community-based services staffed by more and more of their own community members.

The approach in all the communities we studied has been to increase access to services in a number of ways: not just through geographic proximity to families and by providing financial subsidies, but also by ensuring cultural safety¹⁸ and services that meet the particular needs and preferences of community members.¹⁹ Several are also in the process of moving towards inter-sectoral coordination and the integration of services as a method for promoting the developmental well-being of young children from within their own healthy families.

Most communities in Canada today maintain an individual-centred and non-integrated approach to family and children's services. In this fragmented model, people receiving services are conceived as individual cases with an array of separate needs, subject to servicing by an array of separate professional

service providers. In First Nations communities, these providers are most often located outside of the community, not just administratively, culturally, and socially but, in the case of rural and remote communities, geographically as well.



¹⁸ "Cultural safety" is a term that is sometimes used to capture the sense of feeling socially safe to express one's views and behave in accordance with one's own culture, without risk of being scorned or made to feel socially alien. Formalization of the concept of cultural safety began in 1988 at a hui in Christchurch, New Zealand, attended by nurse educators and Maori student nurses. See Dyck, I., & Kearns, R. (1995). Transforming the relations of research: towards culturally safe geographies of health and healing. *Health & Place*, 1 (3), 137-147, or Papps, E., & Ramsden, I. (1996). Cultural safety in nursing: the New Zealand experience. *International Journal for Quality in Health Care*, 8 (5), 491-497.

¹⁹ These promising and exciting innovations are profiled briefly in this report. A more detailed examination of effective strategies and outstanding challenges to realizing the full potential of these community-driven initiatives is presented in other publications. Please see www.ecdip.org.

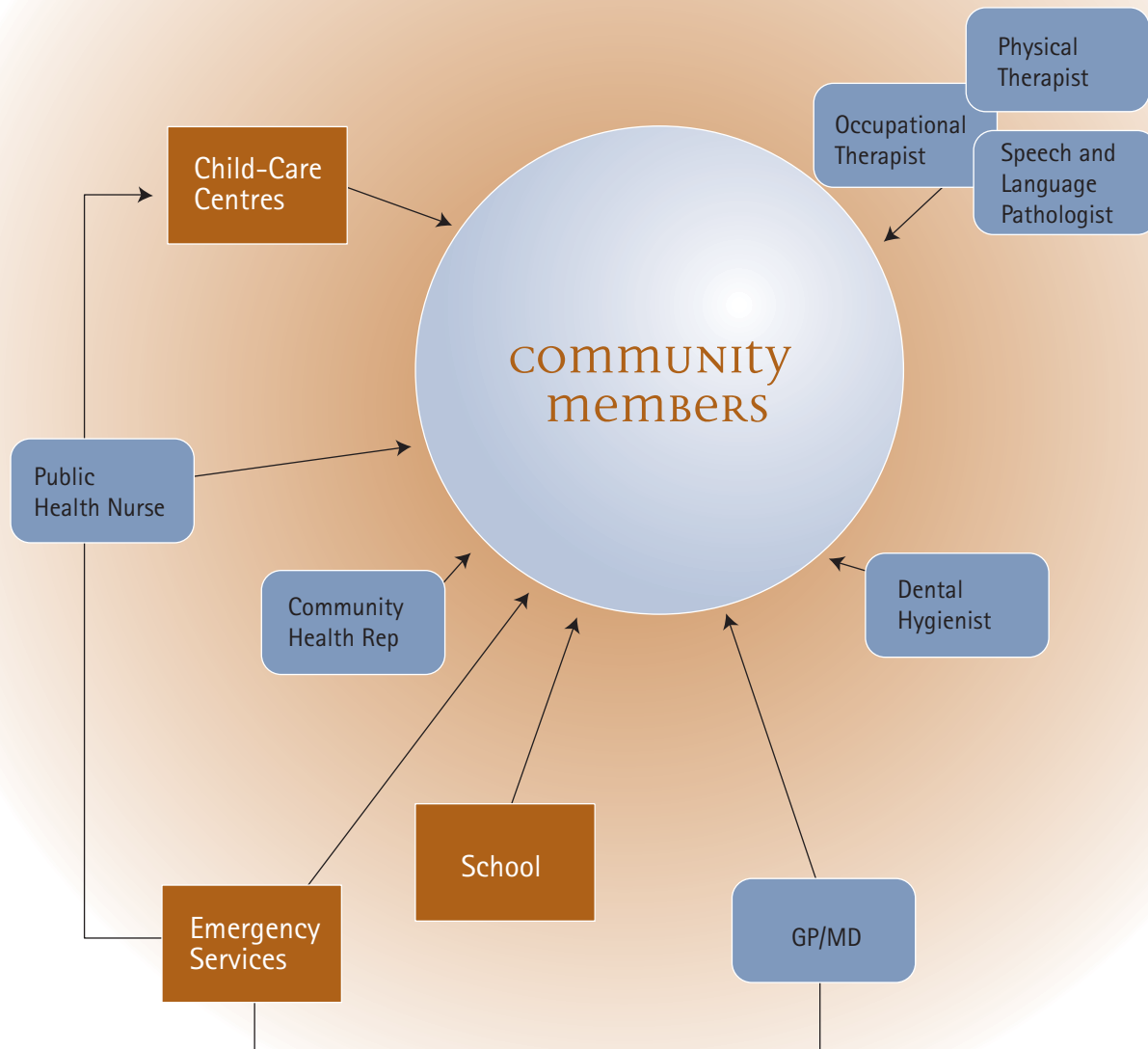


Figure 3: Individual-Centred, Fragmented Service Model

IN THE COMMON, FRAGMENTED MODEL ...

Early childhood care and development programs are usually evaluated in terms of direct benefits to individual children, such as the development of pre-literacy and language skills, socialization, and school readiness.

Other services for children, such as speech-language therapy, immunization, dental and vision screening or supports for special needs, are usually seen as separate services funded by different agencies, provided by distinct professions, and evaluated in terms of discrete outcomes. There is no cultural or social mediation of interactions between community

members and service providers – everyone is at risk of cross-cultural communication breakdown.

Continuity of care or coherence among services provided to a child or family are not typically used as criteria for evaluating services, because these would require coordination across jurisdictions, which is not provided by the bureaucracies that fund service delivery. Outcome evaluation does not assess the well-being of the “whole child” within his or her family context.

Participants in this study expressed frustration with this model, in which individual service is based on a specific “need” or “problem,” rather than on the functioning of the “whole person.” The fragmented model sets up real challenges for contracted specialists from outside the community in “reaching” individuals in the community, while community members have similar difficulties in “finding” the specialists. Outside service providers told us that simply finding a community member who has been referred to a service, such as supported child care, screening, diagnosis, treatment or rehabilitation, is often their biggest hurdle. Service delivery ends up depending on the initiative, persistence and resources of both individual community members and service providers.

In addition, participants described how, in a fragmented system that depends on having separate specialists to meet needs that are conceived as separate targets, service memory is lost when professional staff leave the community or are assigned elsewhere. There is an extremely high turnover of professionals serving First Nations communities, particularly in the North. If service providers work as a team rather than alone, and in an integrated rather than fragmented way, then the administrators and external service providers we interviewed believe that knowledge of the needs, goals and service history of children and families can be retained and passed along within a community-based family support team – leading to continuous and better coordinated services.

PATCHWORK SERVICES

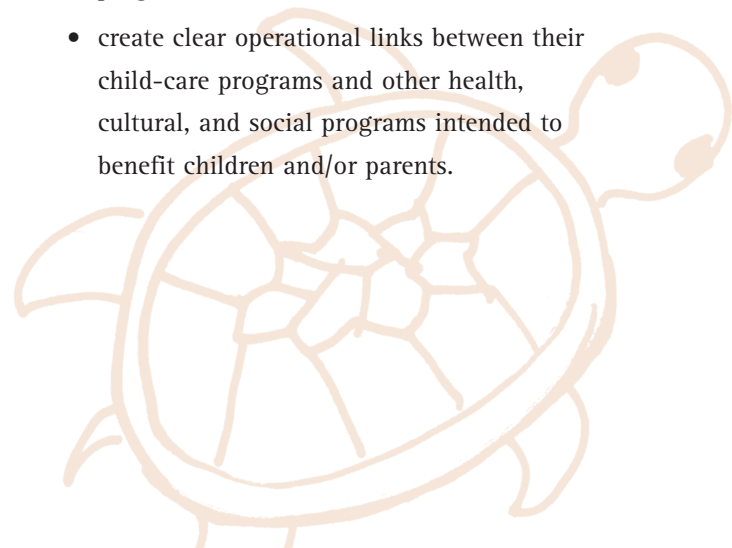
A recent report on an Aboriginal leadership forum in British Columbia noted that “Current government programs – a patchwork at best, fractured among various levels and departments of government, often inaccessible to those with the greatest need, and not reflective of Aboriginal values and culture – have done little to undo almost a century of damage. And while it is clear that more and more Aboriginal babies are born healthy and thrive into adulthood, it is also clear that too many still face the grave obstacles of poverty, malnutrition, high FAS rates, learning disabilities and substance abuse.”*

*BC Aboriginal Child Care Society (2003). *Many voices, common cause: A report on the Aboriginal leadership forum on early childhood development*. Vancouver, BC: Author.

Moving Towards Integration

The First Nations we studied have all embarked on long-range plans that move away from the typical non-integrated model and towards models that:

- integrate child health and development programs on-site in their child-care programs, and
- create clear operational links between their child-care programs and other health, cultural, and social programs intended to benefit children and/or parents.



FROM FRAGMENTATION TO COORDINATION

Recent reports on service provision in Canada's hinterlands concluded that the fragmented system of social, health, and education services is the most significant barrier to population health in rural, northern, and First Nations communities.*

The World Health Organization, the Romanow Commission, the Canadian Population Health Initiative and the Population and Public Health Branch of Health Canada have all called for inter-sectoral approaches that address the many non-medical determinants of health – including early childhood development, environment, working conditions, lifestyle, social status and governance – and for:

- funding demonstration programs
- training that prepares people to work in multidisciplinary teams
- research that expands definitions and criteria for measuring health, and
- program evaluation that identifies promising practices for improving well-being and quality of life.**

*de Leeuw, S., Fiske, J. Et Greenwood, M. (2002). *Rural, Remote and North of 51: Service Provision and Substance Abuse Related Special Needs in British Columbia's Hinterlands*. Prince George, BC: University of Northern British Columbia Task Force on Substance Abuse.

** World Health Organization (1997). *Intersectoral Action for Health: A Cornerstone for Health-For-All in the Twenty-First Century*. Author.

TREATY 8 TRIBAL ASSOCIATION

The small First Nations in the Treaty 8 Tribal Association have clustered similar services together in offices located in their communities. In general, the services delivered through these offices are coordinated, largely because of the small number of community members and visiting specialists involved. The services remain essentially fragmented, however, in sources of funding, service mandate, scope of practice and accountability requirements.

Administrators in these small, relatively remote communities pointed out the special

challenges facing communities with a very small population base, especially when funding is allocated on a per capita basis, which limits their ability to realize seamless, integrated, community-appropriate services.

These Treaty 8 Tribal Association communities have a school in or near their largest on-reserve population centre, as well as a health-care centre, often consisting of three or four small offices, and a child-care centre. Some professional service providers, including child-care centre staff, teachers and community health representatives, live and work in the community, and are mostly First

Nation community members. Other professional service providers exist as satellites to the community, but they are more readily able to access clients – and

community members are more readily able to access them – through the community-based service offices.

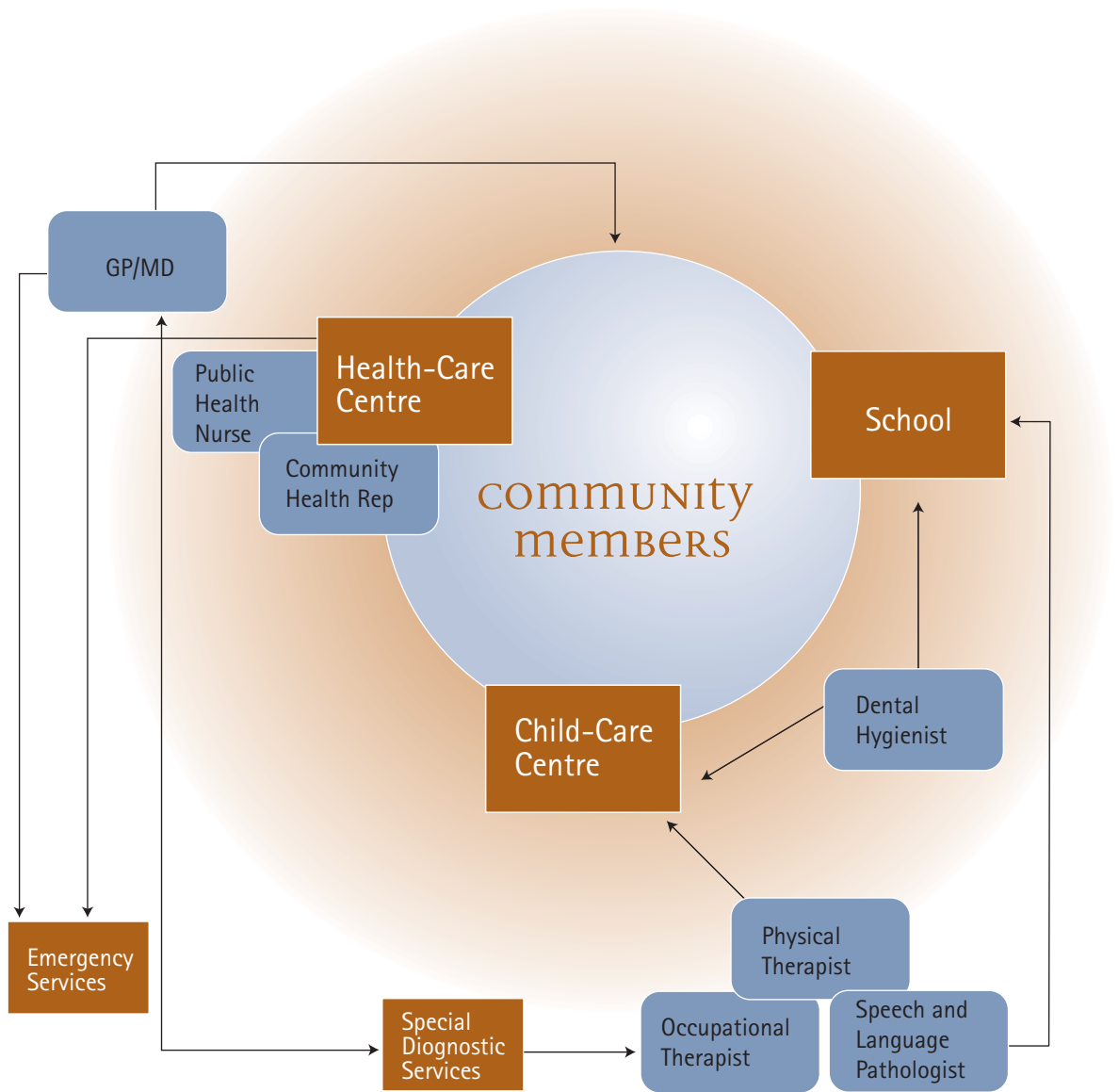


Figure 4: Emerging Community-Based Service Model

TL'AZT'EN NATION

Tl'azt'en Nation has used its school, located in the largest on-reserve population centre of Tache, as the site for its child-care centre, Aboriginal Head Start program and a number of integrated programs. Administrators and practitioners in this community explained that the decision to locate health services, adult counseling, and alcohol and drug treatment services in a different area of the village than the school, child-care centre and Aboriginal Head Start facility was deliberate, to prevent the spread of illness and to provide some “children only” space away

from the concerns of adults involved in social services.

The centred-based child-care facility, located within the school and adjacent to the Aboriginal Head Start facility, provides a site for the integration of services and for:

- access between specialists and children and parents
- development of “service memory” among staff
- multidisciplinary professional development for on-reserve staff, and
- cultural learning for visiting specialists.

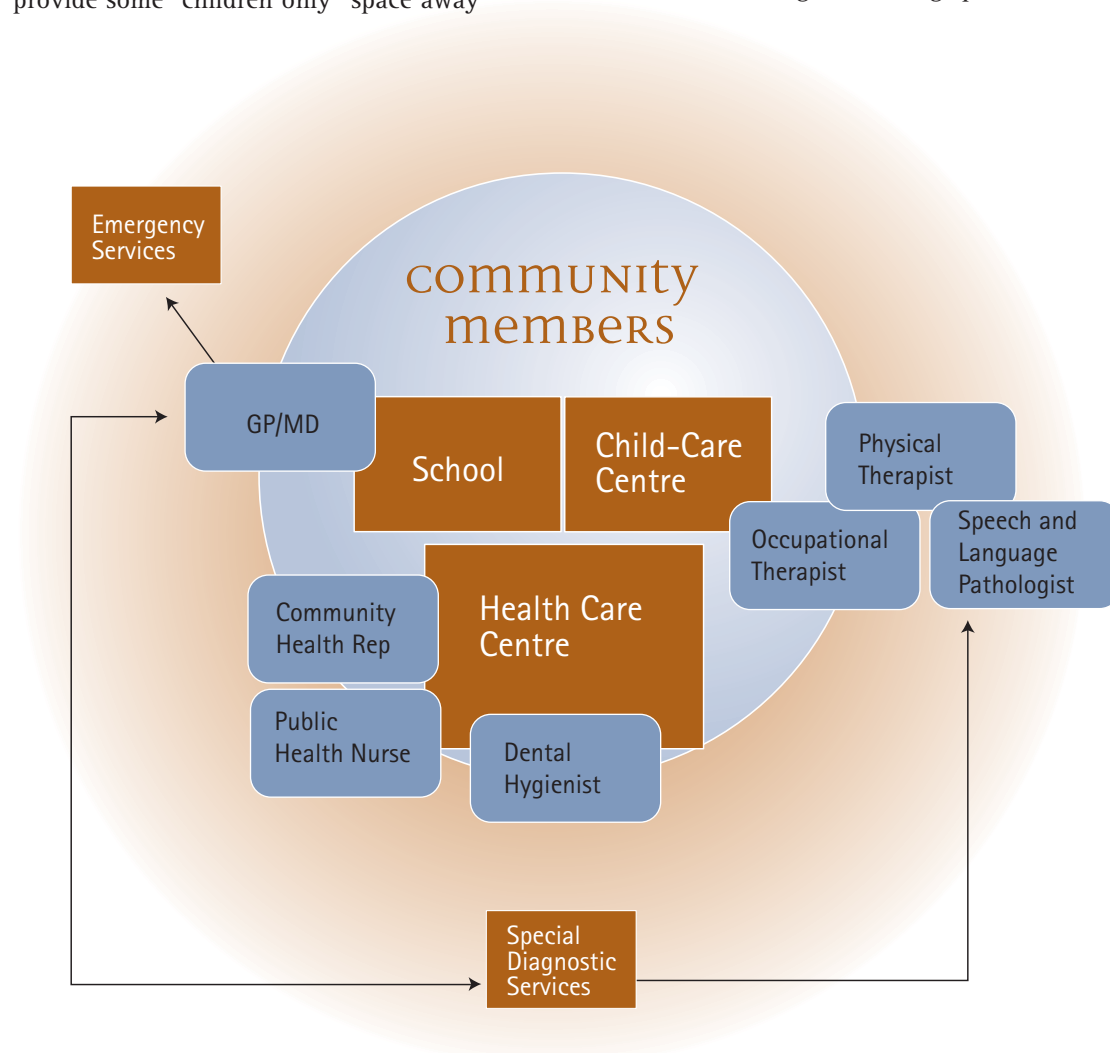


Figure 5: Community-Based Service Model with School as Integration Site

LIL'WAT NATION

Lil'wat Nation has the largest population base: 1500 members in the largest community and several hundred other members living in four surrounding villages. It also has a long history of successful community development planning and implementation.

In the mid-1990s, the community decided that it wanted to deliver fully coordinated inter-sectoral services, with as much integration as possible, beginning with and centred on the provision of quality child care by trained community members in a licensed setting.

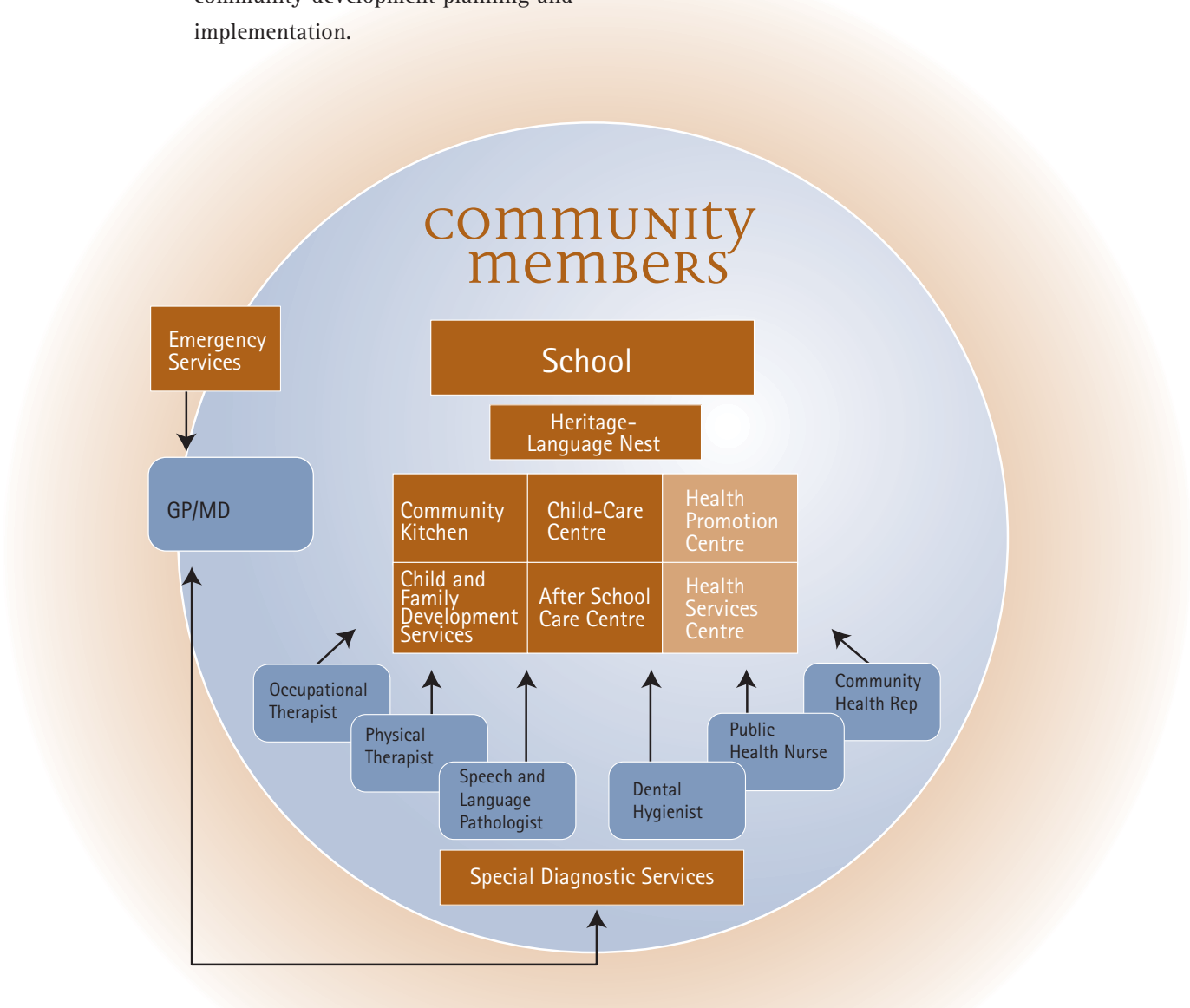


Figure 6: Community-Based Service Model with Child Care as Integration Site



Today, Lil'wat Nation operates a multiplex facility located 200 metres from a full-service, band-operated school. It is staffed predominantly by community members, and provides integrated and coordinated services to a large number of the children and families of Lil'wat Nation. When the multiplex opened, just one day after 14 community members successfully completed their early childhood care and development training program, it housed specially designed rooms for infant, toddler and preschool programs, professional meetings, health promotion information and resources, and a community kitchen. Later, Lil'wat Nation added a large after-school care program that is partially integrated with the child-care programs, sharing some staff,

activities, outdoor play space and equipment. They also added a health service wing, an examination room, and a staff room. Over time, the services delivered inside the child-care centre itself have evolved to include:

- occupational therapy
- supported child care
- developmental monitoring, assessment and referral
- speech-language pathology pre-screening and monitoring, and
- preventive dentistry.

In 2003, the combined child-care programs served 110 children, from infancy to six years of age.

Service Delivery Evaluation

Every community is unique, and therefore the most effective ways to achieve community goals for healthy development of all children and families will vary.

Each First Nations community that participated in this study had started to take steps towards more investment in the youngest generation, and towards

streamlining and increasing access to services. But while each was going about service development differently, all administrators and practitioners were satisfied with their progress to date and believe their new service models both:

- ensure the children of their communities receive quality child care, and
- draw in or “hook” parents, other caregivers, Elders and community administrators to participate in both child care and other “laddered” health and development services.

By setting up their child-care centres as the focal point or “hub” of a larger system of community programs and meeting spaces, these communities have also managed to create a service-delivery model that is not only multidimensional and accessible, but also culturally appropriate and holistic. Child-care practitioners in the communities

described how this approach allows them to achieve two important goals:

- to promote cultural knowledge and pride, and
- to strengthen parental involvement and parenting skills (please see the two sections that follow for more on these).

“HOOKS”

The central, most essential “hook” that attracts families to new services in the community and that secures their attachment to programs that support the wellness of all family members is offering parents the quality child care, and sometimes the special services, that they need for themselves and want for their children.

As many of the child-care staff we interviewed commented, parents are often willing to seek playmates for their children, respite from exhaustive parenting or reliable daycare so they can work, while they may not be so willing to seek supports or services for themselves or for other, older family members. The parents bring their children to child care first, and then later – as they become comfortable with and knowledgeable about the place and the people – they come for other services co-located with the child-care program for themselves.





"Ever since this place happened, I feel like people can come out more and get the help and support they need. This child-care program has been like a magnet that has drawn us to get together and keeps us here, doing things to help and heal ourselves and that will hopefully make our community stronger and a better place for our children and everyone who lives here and even those who want to move back here."

"HOOKS" FOR SECURING FAMILY ATTACHMENT TO WELLNESS PROGRAMS

Parents in the participating communities described how they began by bringing their children for care, and then expanded their involvement by accessing other services for their children of all ages. Over time, as they became comfortable with the staff and the quality of care and felt safe within their own cultural context, they came for social support and services for themselves.

Other "hooks" for securing the attachment of families to comprehensive community-based supports for achieving wellness include:

- having community members extensively involved in the early childhood care and development training program
- co-locating programs with cultural meeting places and community kitchens, and
- holding events like "open houses" that welcome the whole community.

For example, in several of the First Nations in this study, child-care programs are co-located with Best Babies programs, Mom and Tot groups, Parent-Child Mother Goose, language facilitation programs, nutrition workshops, hands on displays on healthy living (for example, diabetes prevention, exercise, medication) and similar programs to promote child and family well-being. When parents bring their child for care, they pick up information about other programs, and may see other community members attending these programs. Staff in the centre get to know the parents, and may draw their attention to a particular program offering. Gradually, parents may become more involved, and may volunteer to help in the community kitchen or to spend time with children in the child-care program. After a period of familiarization and developing a sense of safety and trust in the staff, they may then enroll in a program for themselves.

"LADDERS"

Child-care staff and administrators also told us that, because of the community's ability to offer a "laddered" system of services, the community can often assist children-at-risk without disrupting family life, and are less likely to resort to invasive monitoring or calling in external child protection services resulting in stigmatizing "pull-out" programs or apprehension.



"We probably know families in our community better than anyone. We see the children every day, or if we don't see them every day, we know something must be going on. We see the parents every day, and we begin to be able to tell how they are doing, or if they're having some difficulties. Or if we don't see them bringing their child or picking them up, we might start to wonder why – where they are. So we have this kind of 'alert' system about the family. And if we think there is something more that the family is needing, we can work on putting systems in place to provide some extra support for the family during hard times, or refer people to treatment, or get some extra services in place for the child if that is what's needed."

For example, parents can move from a Best Babies or other parenting program into supportive counseling while their infant is cared for in the infant centre, and then ladder

into more intensive personal wellness programs, such as Indian Residential School healing support groups, alcohol and drug treatment services, and employment search and job training.

"My daughter has special needs. She gets supported child care in the centre as well as speech therapy. Because of having a licensed child-care program with really good staff who I know all of them personally, I was able to pursue my education and now I am in job training. I couldn't have done these things without the different kinds of programs offered in addition to child care at the centre."

Child-care staff are able to help identify when children might need diagnostic assessment to determine the need for early intervention because of specific developmental delays. In one community, staff described how they sometimes prompt a parent to think about taking his or her child for diagnostic services. These staff said they have also, on occasion, stepped in themselves to arrange on-site diagnostic assessment for a child.

"HUBS"

The "hub" model now in use by the First Nations involved in this research is essentially a family- and community-centred, rather than a child-centred, model of service delivery. It is both holistic and population-based, with services specifically designed to meet the needs of the local population for

developmental, social, primary health, and cultural programs, as well as for supports for children with special needs and children-at-risk.

Community leaders and program staff explained to us how they see the family as



the central organizing focus for delivery of services, and the well-being of young children as dependent upon and also contributing to family well-being. Many community members spoke about the concept of “the early childhood years” as a foreign idea that artificially segregates young children from “all children” or “the whole community.” As one First Nation Elder said:

“Our children need to be understood as part of a whole that includes their family, community, culture, and the natural environment.”

In these communities today, the child-care facility is now the primary site for bringing people of all ages together and holding cultural events, as well as providing services and programs directed at addressing the well-being of the “whole child” and the “whole family” – including information and education, social support, health services, and speech-language services.



“Our child care is a holistic model, and feels natural to us as Aboriginal people, where we have always seen children and the community as one. Children are the future of our community – they are, or they should be, the centre of everything we do.”

Conclusions

Many families need and want quality child-care services for their children. In these First Nations communities, that need or desire acts as a magnet to attract or “hook” family members in to the child-care program, and then on to further family development and health services they might not otherwise know about or be reluctant to ask for.

All of the First Nations communities that participated in this study are in varying stages of moving away from the culturally traditional methods of delivering early childhood care and development programs. All share a similar vision for inter-sectoral service delivery, and two – Tl’azt’en Nation and Lil’wat Nation – have made significant strides towards implementing a long-term plan for co-located and integrated services, with early childhood care and development as the “hub.”

Each of the communities is different, however, and we found variations in exactly how each envisions and is able to support the “whole child” within the context of their family and community. Smaller communities

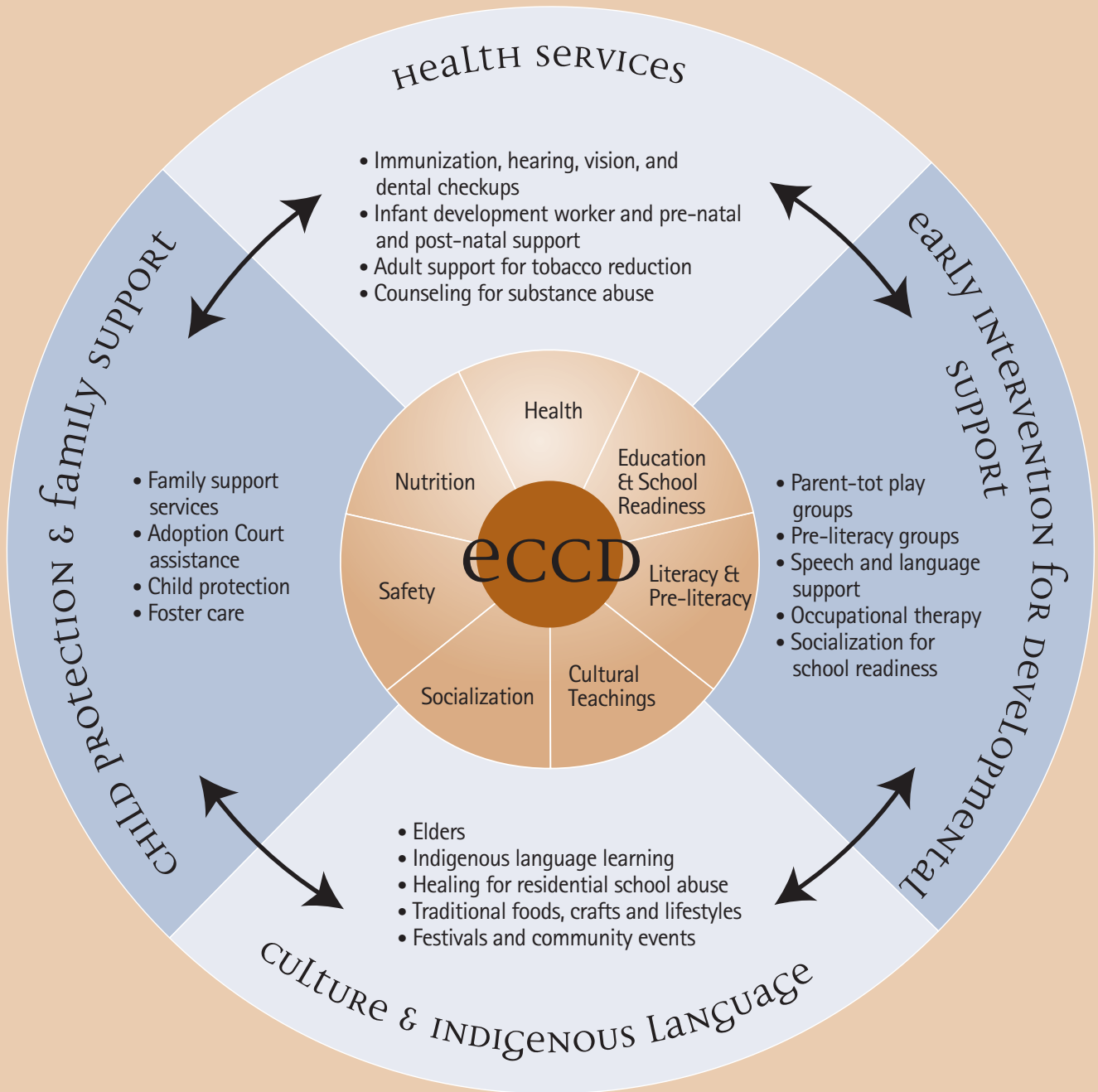


Figure 7: Early Childhood Care and Development as a Community-Based Hub

have less funding and fewer trained community members to mount comprehensive services, and most of those in this study are working with neighbouring communities to coordinate programs and services. Larger, more cohesive communities have more funding and more trained community members, and tend to have a more stable core of community leaders, enabling them to implement more comprehensive, community-based programs.

As Myers, one of the leading proponents of integrated supports for child well-being, points out in *The Twelve Who Survive*, the goal of supporting the development of the “whole child” is to develop an integrated response to children’s needs, regardless of whether services themselves are integrated.²⁰ The Romanow Commission²¹ and the National Aboriginal Health Organization²² have both emphasized that services must be adapted to the differing realities of different Aboriginal communities, and that Aboriginal community members need to be involved directly in defining the services that they need and how to organize and deliver them. However, most Aboriginal communities advocate holistic approaches to supporting child and family well-being, which require partnerships among service sectors and among communities to work.

In the current study, all of the communities understand their work as addressing a range of needs and goals for children through the provision of a range of accessible direct services, as well as through improved cultural, social and physical environments for child and family development.

These First Nations are blazing new trails for communities across Canada in their efforts to realize their vision of a comprehensive, community-driven strategy to address children’s needs both holistically and contextually. The path has not been smooth: participants in this study described many sources of frustration – for example, with the duplication of grant applications and accountability requirements, over-specialized training programs, premature termination of funding for pilot programs, and the tendency towards competition among departments in their community.

Nevertheless, their stories also demonstrate strong leadership, political will, creativity, cooperation and persistence. By vigilantly pursuing opportunities, they have made great progress towards integration and inter-sectoral coordination, and towards overcoming some of the obstacles that typically hinder the development of comprehensive, integrated systems of early childhood care and development.²³

²⁰ Myers, R. (1995). Integrated programming: An elusive goal. In R. Myers, *The twelve who survive: Strengthening programmes of early childhood development in the Third World* (2nd Ed.) (pp. 155-166). Ypsilanti, MI: High/Scope Press.

²¹ Romanow, R. J. (2002). *Building on values: The future of health care in Canada*. Ottawa: Commission on the Future of Health Care in Canada.

²² National Aboriginal Health Organization (2002). *Dialogue on Aboriginal Health: Sharing our challenges and our successes*. Aboriginal Forum held in partnership with the Commission on the Future of Health Care in Canada, June 26, Aylmer, Quebec. Ottawa, National Aboriginal Health Organization.

²³ Haddad, L. (2001) *An integrated approach to early childhood education and care*. A paper prepared under the sponsorship of UNESCO/ Swedish Ministry of Education and Science Conference on Early Childhood Education and Care (Stockholm, June 13-15, 2001).

Recommendations

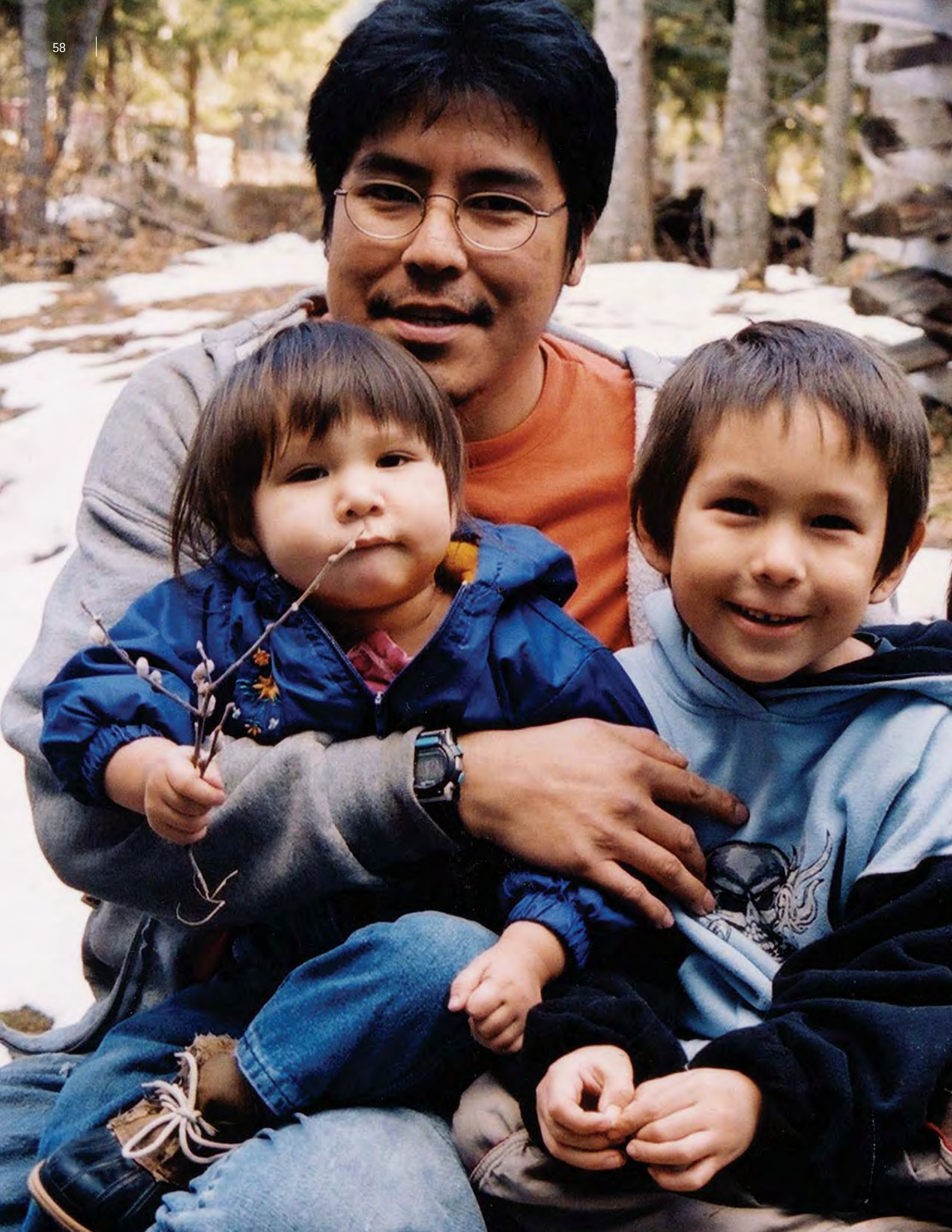
Based on this research, we recommend that:

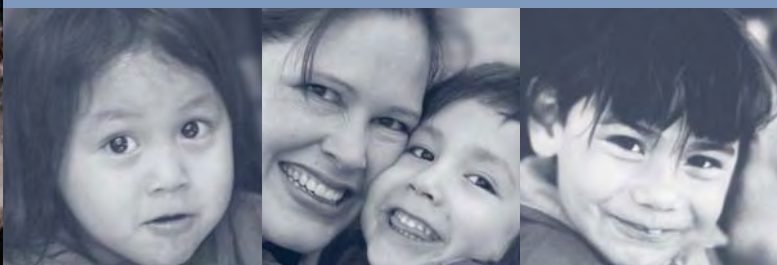
- ➔ Funders become more flexible in how they allocate capital funds, and allow for combining capital funds to create multi-purpose structures – or construct a cultural centre close to or around a child-care centre – with Elders’ meeting rooms and other community gathering rooms in addition to facilities for health and social development services.
- ➔ Funders and community administrators invest in programs, such as early childhood care and development, that lay the foundation for health and well-being for all children, while selectively continuing to invest in programs targeted to meeting special needs, preventing and treating disease.²⁶
- ➔ Ministries and agencies making policy, funding, and program decisions in education, health, and social services develop partnerships across sectors and with community-based agencies to create opportunities for integrated and inter-sectoral service delivery, and to overcome fragmentation and competition for buy-in and scarce resources.
- ➔ Funders allocate funds to population-based programs – programs that target the well-being of all community members by building upon community assets and strengthening the capacity of community members to care for themselves and each other, rather than be dependent upon expensive, externally provided, professional services.^{24 25}

²⁴ Kretzman, J. and McKnight, J. (1993). *Building communities from the inside out: A path towards finding and mobilizing a community's assets*. Northwestern University, Institute for Policy Research. Available through www.nwu.edu/IPR/abcd.html

²⁵ Canadian Population Health Initiative (2004). *Improving the health of Canadians. Patterns of health and disease are largely a consequence of how we learn, live and work*. Ottawa: Canadian Institute for Health Information. Available at www.cihi.ca

²⁶ Scott, K.A. (2002). *Balance as a method to promote healthy Indigenous communities*. Ottawa: Report prepared for the Determinants of Health Working Group of the National Forum on Health.





SUPPORTING

and strengthening
parental
involvement and
parenting skills

QUESTION:

Are the current child-care programs both actively encouraging parental involvement in child care and supporting and strengthening the ability of parents to develop themselves and to parent?

General Findings

Many First Nations seek to sustain and develop their communities through activities that reach out to everyone in the community.

All the First Nations that participated in this project recognize that early childhood care and development can play a central role in consolidating their communities as stable, healthy, cohesive and culturally robust Indigenous societies within Canada. The principles of social inclusion and family-centred practice in these communities are expressed in the many ways that parents and other relatives are encouraged to participate in, or through, children's programs.

In addition, the community leaders we interviewed uniformly see the goal of improving community conditions for children's health and development as dependent on the goal of supporting family wellness.

"When a child comes back [to our centre] on Monday morning, we can usually tell how the parents are doing, and what's been happening over the weekend."

ABORIGINAL HEAD START

The Aboriginal Head Start model is based on principles of family-centred practice. Family-centred practice encourages the active involvement of parents in program policy decisions, leading activities and volunteering in the program; it also advocates having staff consult with parents as partners in providing continuous, optimal support for children.*

*Sones, R. (2002). *Parents in Aboriginal Head Start: Building community*. Vancouver: Population and Public Health Branch, BC/Yukon Region, Health Canada.

As a result, they believe that:

- child care and development programs should include extensive outreach to secure the active involvement of parents and others who care for children
- child care and development strategies should be directed at providing a culturally safe (that is, free of racism and culturally respectful), socially supportive centre for parents to be consulted about their child and offered opportunities to participate in the child-care program, and



- community services for children should encompass programs for parents and alternative caregivers (grandparents or foster parents, for example), including parent education, parent support groups, Indian Residential School healing programs and service referrals as needed.

In a review of programs involving parents of young children, Evans concludes that early childhood care and development programs can play an important role in providing training to parents and others involved in the care of young children – training that may traditionally have been provided on-the-job as part of an extended family model or community/tribal model, but that is now disrupted as a result of migration, armed conflict, drug abuse, divorce and parents' need to work long hours. While most programs of early childhood care and development focus on meeting the needs of the children, Evans recommends that child-care programs should effectively direct some of the focus toward providing support for parents to build their confidence and skills.²⁷

Benefits to Parents of Child Care and Other Children's Programs

Parents, staff and Elders spoke of many benefits to parents as well as children from child-care, Aboriginal Head Start or other children's programs and services.

RETURN OF A LOST PARENTING MODEL

Western societies generally assume that parents are the most important caregivers of children, and are solely responsible for a collection of tasks, responsibilities, and opportunities called "parenting."

The First Nations parents, Elders and child-care practitioners we talked to, however, believe that a different kind of parenting existed in their cultural communities in the past. They described how, traditionally, child-rearing roles and tasks were distributed across a number of adults and older children in the community, and were not the responsibility of a child's biological parents only. They described how that parenting model has now been seriously eroded as a result of the degradation of family and communities structures during the 100-year-era of enforced enrolment of children in Indian Residential Schools, and how one of their goals for community development now is to reinstate some of that sense of broadly shared involvement in caring for children.

²⁷ Evans, J.L. (2000). *Support for families: Working with parents and caregivers to support children from birth to three years of age*. The Coordinators' Notebook, Vol. 24. Toronto: The Consultative Group on Early Childhood Care and Development, Ryerson Polytechnic. Available at: www.ecdgroup.com/pdfs/CN24SupportingFamilies.pdf



"Maybe the last generation was the height of the illness. Our grandparents all went to Residential School. They came back all messed up and they didn't parent us parents."

In the past, they said, Elders were very active in caregiving and discipline.

"Everybody was a caregiver back then; we used to have Watchmen, especially when something was going to happen. We used to tell the children to stay still. Now it is hard for us (Elders) to get involved. We are afraid of what others will say."

Community members commented that formal training and programs that embrace the community's cultural and traditional forms of social interaction – such as the First Nations Partnership Programs – are now helping to restore the intergenerational relationships between Elders, grandparents, parents and children, and to improve the transmission of parenting skills through role modelling and through young children's direct experience of being well cared for. One program graduate, for example, talked about how her training enabled her to communicate better and assume a more guiding role with her own teenaged children and their friends:

"What's particularly valuable is for kids. What I wasn't taught. Like when I go back home, when I hang around with my kids. The other kids see that and they like that. They talk to me. I ask them what they would like to do in their lives."

Another parent talked about a double effect for both children and parents:

"The children who come here (to the child-care program) are getting a lot of love, and the parents are getting some of their needs taken care of too. We get a sense that our needs are important too. And so it's double, a double effect – the kids will have those memories of what it looks like and what it feels like to take care of a child, and the parents have new feelings for what it means to have someone looking out for you, and taking an interest. That's what's going to make the difference in breaking this multigenerational cycle of bad parenting that fell out from the Residential Schools."

INCREASED SOCIAL SUPPORT

Most parents told us that they believe their involvement with a child-care centre has led to increased social support for themselves and their whole families, and a greater feeling of connection to other people and to their communities.

"The staff here are great. And some of the parents – I hadn't known them before I started bringing her here. It's been great. A relief really. If there was an emergency, or if I just needed some help, I feel there are people now who I could call on."

A number noted that the child-care centre has provided a place for both parents and children to meet and develop relationships with their extended family members. This effect is magnified at Lil'wat Nation, where an elaborated "hub" model – with a community kitchen and cultural events held at the centre – intensifies the familial and social networking effect.

"I feel more of a part of the community because I get to know other people who live here – parents whose kids are also in the program, the people who work there – and my daughter is also getting to know lots of the people from around here, and they know who she is. That feels good. It feels like a lot more of a real community for us."

INCREASED SUPPORT FOR PARENTS-AT-RISK AND CHILDREN-AT-RISK

Service providers who specifically work with parents-at-risk agreed that child-care and Aboriginal Head Start programs are very important for enabling parents to access support services.

An infant development practitioner who did home visits told us that she would not be able to do her work effectively if she did not have "alone time" with the parents while their infant was in the child-care program. An alcohol and drug counsellor also noted that child care is essential in enabling the healing work that some community members need.

"In my work I see so many parents in distress. Often, in addition to their addictions, they are suffering post-traumatic stress disorder. They come from broken homes, and they may be single parents. The day care is such a relief to them because they get time to focus on what they need for a while."

Staff at a very well-attended new baby clinic, with approximately 20 mothers and their toddlers and babies, also told us how they use the short-term programs available, such as Mother Goose early literacy, Best Babies, pre- and post-natal support, to introduce parents to the system of supports and the knowledgeable staff available in the child-care program and Aboriginal Head Start.

"Parents don't feel as comfortable in the school. The Head Start is a good starting place for parents feeling comfortable."

In addition, staff, service providers and parents all agree that having community-based child-care programs particularly help



children in need of child protection services, including those already under supervision orders and those who might be on the border of needing supervision, either because of poverty or parental inability. Now, instead of removing children-at-risk from their families and sometimes from their communities, the children can be placed in child-care settings in their community where they receive the regular support they need – helping to stabilize and preserve family structures.

Staff at Tl'azt'en Nation noted that their child-care program provides almost all of a child's daily nutritional requirements through snacks and hot lunches. Because all children receive their food together, there is no stigma attached to parents who could not provide their children with the same kind of snacks and lunches. Good nutrition not only promotes good health but also provides a spin-off support for parents, who are less apt to become frustrated with children who might otherwise be irritable and tired from being hungry. At Lil'wat Nation, staff identified a hot meals program as first among their priorities, but expressed frustration that their efforts to secure funding for this have gone unrewarded.

CREATION OF SAFE PLACES FOR CHILDREN IN THE COMMUNITY

All of the First Nations that participated in the study had embarked on their long-term plans to build community capacity for providing child-care programs so that there would be safe places for parents and other

caregivers to leave their infants and young children – places where they knew their children would be well cared for.

Several parents we interviewed emphasized the safety aspect. Some described how, in their communities, children and adults typically intermingle in all community places and events, and while this has some appeal, it has created some safety concerns.

"There haven't been any special places just for children. But in this community, at least, it's not always safe for children to be everywhere. For quite a while now we have needed special places that are just for children where we know children will be safe if we leave them there. And we've needed special people – like those women who work at the child care- who we know we can trust to watch the children, and who won't let other people interfere with them. This is a big relief to us as parents. It means we can go and work, or do the things we need to do, without worrying."

A staff person who is also a parent described how challenging the environment is for parents of young children in her community, primarily because of some adults whose judgement and behaviours are affected by substance abuse, by being victims of sexual abuse in Indian Residential School, and by jealousy toward children now enjoying childhood. She described how she tries to



keep her daughter safe by keeping her inside the house all weekend. She only realized how socially isolated her daughter was when her daughter asked, one Monday morning, if she could go out yet.

This kind of isolation of children in their homes is not uncommon in some rural communities. The new children's programs now provide safe spaces where children can socialize and make friends.

"Day care has made a big difference. The children are learning different things. They are learning to play with other children. This is a big adjustment because most kids around here are 'home' kids. Children are at home and isolated."

Some parents also talked about the child-care program, and the actual building where the child-care program is located, as a safe space

for their children to interact with and become familiar with adults in their communities under the watchful eyes of child-care staff.

"Every child needs to know who they are. The place of Elders is very important for children to know who they are. They need to know who they can reach out to. We used to be connected with our Elders – it used to be an Aunt or an Uncle close by and they would train (teach). It didn't matter whose Elder it was. Now that we have the child-care program, children are forming relationships with more adults in our community. There are many caregivers for the children, just as there was in the old days. We all care for the children and love them as if they were our own. Sometimes Elders come into the centre, and the children get to know them too. And the Elders love to start teaching the little ones, and talking to them in our language!"

RECOVERY OF LOST CULTURAL KNOWLEDGE

Participants in two communities pointed to Indian Residential Schools as causing the loss of language, morals and roles, as well as knowledge about how to do specific tasks and how to provide rites of passage for their children and youth, such as birth rites, naming ceremonies and puberty rites. A recent study of Aboriginal parents' reflections on their Residential School experiences²⁸ also found that loss has caused staff and parents to place an extremely high value on using

and passing on the cultural knowledge that remains.

"Residential Schools? Language was taken away. People are thankful that it is being taught again. My own mother was taken. I grew up with my grandmother so I understand the easy words and the action words. I say some to the kids (in the child care)."

The people we talked to associate cultural knowledge directly with a sense of identity, and see the relationships of Elders to parents, Elders to children, and children to parents as the sources of transmission and teaching of knowledge. In the past, these relationships – which in their structure, function, and significance were unique to each culture – were an essential part of what made these people who they were as First Nations people.

TRANSMISSION OF CHILD-REARING IDEAS

Several staff and parents talked about how important it is to have child care provided for and by the community in a central location in the community. This not only allows for "healthy socialization," where children learn with the other children – and are taught by the adults – with whom they will share community life for years to come, but also for Indigenous ideas of child-rearing to be transmitted in a continuous and unified way, and in a group context, similar to the old ways of sharing caregiving responsibilities among many people in the community.



²⁸ LaFrance, J., & Collins, D. (2003). Residential Schools and Aboriginal Parenting: Voice of Parents. *Native Journal of Social Work*, 4, 104-125.

"We want our children to be kind and cooperative, and not to push themselves forward to gain attention or special consideration. Our people are modest and unassuming, and we don't tend to like people who are loud or who brag, and we don't like to talk about our accomplishments."

Some participants (in all of the communities) told us that their cultural knowledge holds that all children are special, and that they have little use for the concept of "special needs" children. While they do not deny disabilities or developmental delays and do provide supported child care, children with special needs are integrated with mainstream child-care populations.

Indigenous knowledge also does not hold "early childhood" as a special time that is somehow distinct from the rest of childhood. Participants instead told us that they prefer to think of "all of childhood" and that they prefer "multi-age" groupings in child care. In some of the communities, child-care practitioners expressed a reluctance to adopt the rigid age-specific regulations of child-care licensing regulations.

One Elder explained to us the value she sees in creating programs that support social cohesion among First Nations children:

"The idea of early childhood and ideas like disabled children, or that some children have special needs and some children are

gifted – these ideas don't come from us. They are not Aboriginal ideas. They come from white people, and from cities. We don't like to box people up and separate them out. We've seen how that can be used as a way of getting rid of people, of boxing them up and shipping them out of the community, to special schools, or what have you. We always kept all our children with us, and all together, in families, and we want that again. And if the child-care program is going to carry on our cultural traditions, then all the children should be kept together, with no one or no group singled out. "

DEVELOPMENT OF NEW CULTURAL KNOWLEDGE AND SKILLS

Participants noted that child-care and other children's programs have also strengthened and supported parenting by providing guidance for children and teaching them cultural knowledge and skills.

"My kids are learning things that I can't teach them, and they are coming home and teaching me."

Because of the interruption of intergenerational cultural transmission during the Residential School era, many First Nations people know only fragments of their own traditions – including songs, ways of living on the land, ways of telling and listening to stories, songs, art forms, crafts, and ancestral language.

Many parents commented with pride that their children are coming home with traditional songs and other cultural knowledge that they themselves didn't know. In interviews, many parents described how, through their child's participation in the child care program and their own exposure to the program, staff, resources and play materials in the centre, they are rekindling an interest in learning about their cultures of origin and finding a culturally rich social environment in which to begin to reconnect with their First Nations culture.

FOCUS ON EARLY CHILDHOOD

“Our recommendations emphasize the importance of protecting children through culturally-appropriate services, by attending to maternal and child health, by providing appropriate early childhood education, and by making high quality child care available, all with the objective of complementing the family's role in nurturing young children.”*

*Lightford, E. (1993). *Child Care in the North*. Ottawa: Ontario: Royal Commission on Aboriginal Peoples.

IMPROVED LABOUR FORCE ATTACHMENT

Reliable, continuous, quality child care is an important condition for adults in any community to seek and sustain employment and to pursue education and training.

First Nations parents, too, see the absence of child care as the most significant barrier to obtaining or holding employment, completing



their education, or undertaking employment training. Although caregivers noted that there are single fathers in their communities, they see the need for child care as particularly an issue for women.



"We really need the child care. It is holding women back (not to have it). All the women really agree."

The First Nations who participated in this study have, through formal mechanisms such as needs surveys and through direct observation, determined that many of their community members could not take regular employment because they lacked steady, secure child care. Many parents described to us how this changed with the opening of community-based child care, which allowed them to accept steady employment. This, in turn, has led to increased and more regular income generation, a more reliable supply of food at home, and improved living conditions.

While child care cannot resolve all the factors contributing to low levels of employment among First Nations, these First Nations communities see child care as one of the foundations that could enable individuals to lift themselves out of poverty and create self-sustaining families, by freeing parents to engage in other activities, such as employment, education or support programs.

"I had to go on a wait list for my baby to get into the centre, because they started with the preschool and opened the infant and toddler side second. But while I was waiting, I was offered a job in town, and so as soon as it [the infant care program] started up and I got her in to it, I started

my new job. That's great for us because I'll be able to give her better food, make sure she has the things she needs, and take care of things that need fixing around the house. It's what makes the difference for her and me."

Several community administrators told us that providing support for adult community members to pursue school, work and personal wellness programs was a primary motive for investing in early childhood care and development training, and in the building of facilities and the launch of services.

"I have wanted to go to treatment for a few years now, but I could never get away because I had my son, and then I look after my sister's two kids, and I couldn't leave them. But now that they're all in the child care, I've arranged for my mother to bring them and take them home with her while I'm gone, and I'm going for treatment, and I know they'll be safe until I get back."

Many of these administrators, as well as visiting professionals, observed that, as a result of the new community-based child-care programs, the communities were enjoying a marked increase in the numbers of adults who were not only working in paid jobs but also taking up active roles in community affairs. They attributed this to the communities making it possible for members to replace erratic and low quality babysitting





arrangements with stable, reliable, accessible and high quality centre-based child care and development programs.

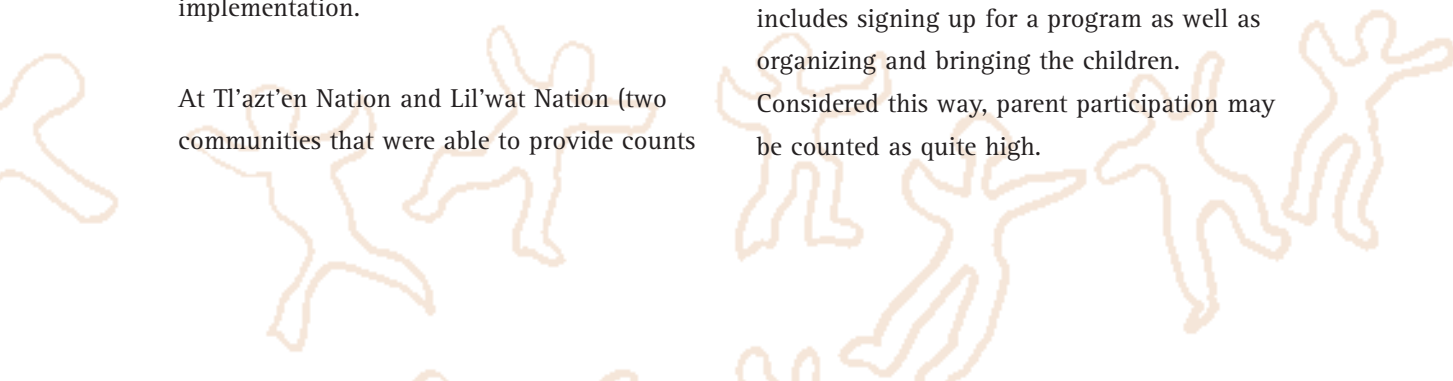
Levels of Parental Involvement

Although almost all programs have standing invitations to “drop in” or join the regular programming, staff members reported that this did not occur very often, and identified involving parents as perhaps their greatest challenge in terms of program implementation.

At Tl’azt’én Nation and Lil’wat Nation (two communities that were able to provide counts

of parent participation), parental involvement was limited to 20 minutes at drop-off and pick-up time. However, low involvement of parents fits with the strong emphasis that parents and other members in these communities place on the value of formalized child care in enabling adults to pursue other important activities.

Staff reported that many parents and Elders would come for special holiday events or for cultural celebrations. And, as one service provider pointed out, parent participation includes signing up for a program as well as organizing and bringing the children. Considered this way, parent participation may be counted as quite high.



PARENT INVOLVEMENT – LIL'WAT NATION

In this particular group of communities, a majority of parents bring their children to the child-care centre for care because they are working or continuing their education on a full-time basis. A smaller number use the time while their child is at the centre to pursue their own healing through substance abuse treatment programs and other rehabilitation and support programs.

As a result, there is a low level of parent involvement in the centre's early childhood and development programs. But, at the same time, there is a high degree of "attachment" of parents to various programs and services offered at the multiplex.

For example, over 60 parents of children enrolled in the child-care program have participated in one or more early language facilitation program for parents, offered by a speech-language support worker seconded from the regional Children and Family Development office. In addition, many parents have participated in Best Babies and other parent support programs, and have received health information from bulletin boards and resource tables at the entrance to the child-care wing of the multiplex.

Staff in all of the child-care programs described how they think about and plan in detail the ways that they can encourage and involve parents, but they also regularly ask the parents themselves for more ideas.

"We provide advice and guidance. We send letters home, we have newsletters, we have a room set up for talking, and we get other ideas and opinions."

As one administrator pointed out, welcoming parents into the programs for young children helps to establish a tradition of communication and involvement.

Some programs have found that the most successful way to encourage significant, sustained and meaningful participation is by inviting parents and Elders to actively participate in cultural activities.

"People come in to teach language and things like music, drumming, dancing, skinning, and snaring. 90% of the households in this community eat traditional meats. Also, there are cultural evenings with families getting together. There is crafts, story-telling legends by Elders."

However, program staff in all of the participating First Nations explained that that most contributions to the child-care program were by a handful of "regular" parents and Elders. For example, staff at the Aboriginal

Head Start at Tl'azt'en Nation said that three Elders came almost weekly, while other Elders only visited once in a while – but they also described field trips with the children to see other Elders in that community and in other villages.

Child-care staff pointed out that honoraria are very important to provide appropriate cultural thanks to Elders who participate in cultural activities, and to help Elders purchase supplies necessary for traditional crafts and the topics they want to teach to the children or to the staff. In one community, staff and service providers said that they were unable to do any cultural curriculum in the child-care program because of the absence of funding for honoraria for Elders to guide them.

INVOLVEMENT AT HOME

In spite of the frustration among many staff with low parent drop-in rates, two factors suggest that parents are actively carrying on aspects of the program at home with their children. The first is the obvious pride of the parents we talked to in their children's cultural learning and other skill development, and the second is the parents' willingness to follow routines.

In a similar way, one foster parent of a child with special needs said that neither he nor his wife could participate actively in the child-care program because they were both working, but the child-care program really helped to reinforce the routines and special



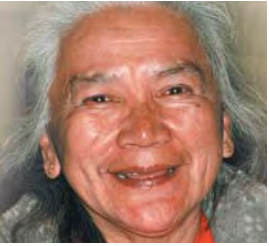
supports that their daughter needed at home and, in this sense, was seen by them as a significant support for their parenting.

Conclusions

In interviews and group forums, all participants emphasized:

- the need to provide opportunities to engage in activities that strengthen inter-generational connections and relationships (and, through these relationships, to jointly produce and transmit information about development and child-rearing)
- the importance of child-care services in supporting parents in their caregiving and income-generation, and
- the need to develop partnerships between child-care staff and parents to ensure a continuous, developmentally supportive experience for young children.

Our research indicates that the early childhood programs now offered by the First



Nations participating in this study strengthen and support parents in their parenting tasks, in their personal well-being, in their labour force attachment and in their income generation. These programs give parents the opportunity to work and to financially support their families, and to recover lost cultural knowledge, parenting skills, and a sense of security for their children within their own communities.

What we found also suggests that socio-historical challenges to family life should be recognized in the development and delivery of services and social supports in Aboriginal communities. It may be useful to consider similar challenges in other communities where social exclusion and family disruption have resulted in the social isolation of parents as well as children, and in lack of knowledge or direct experience of good parenting. High-quality, family-centred child-care programs that are welcoming and supportive of parents can clearly be a “hook” to draw parents as well as young children into new circles of social support and safety, as well as a “hub” for cultural learning, role modelling, parent education, and services for those with special needs.

A recent report by the British Columbia Aboriginal Child Care Society discusses integrated and holistic service delivery that is founded on the principles of family-centred practice: “An integrated approach to early childhood development ... as a guiding principle, means that policy and service

delivery are aligned, that they are based on strong relationships between practitioners and parents, characterized by trust, respect, and shared knowledge of cultural protocols and traditions. It also means that the family and extended family actively participate in the planning, implementation and evaluation process. The result is a seamless continuum of culturally relevant services targeting the specific needs of each community, each family and each child.”²⁹

Other research also points to the positive influence of early childhood programs on parents.

A study in progress as part of the program of research at Early Childhood Development Intercultural Partnerships (www.eccdip.org) is pilot-testing a new social support questionnaire for use in Indigenous early childhood settings. Preliminary findings show that First Nations parents value highly the mutually supportive relationships they form with other parents who bring their children for care, and they report an increased sense of personal security and well-being as a result of developing close ties with the child-care staff. Another research project involving Aboriginal Head Start programs in Northern British Columbia showed that mothers identified the development of relationships as among the most important benefits of their involvement with AHS programs, starting with the opportunity to develop connections with other individuals and/or agencies.³⁰

²⁹ BC Aboriginal Child Care Society (2003). *Many voices, common cause: A report on the Aboriginal leadership forum on early childhood development*. Vancouver, BC: Author.

³⁰ Greenwood, M., & Fiske, J. (2003). *Social Support Project*. Vancouver: Health Canada, BC/Yukon Aboriginal Head Start.

RECOMMENDATIONS

Based on this research, we recommend that:

- ➔ Funders and community planners (Band Councils, Ministries of Health, Labour, Child and Family Development, for example) recognize the role of reliable, quality child care in helping to secure the participation of parents in wellness programs, education and the workforce.
 - ➔ Program evaluators broaden the definition of “parent participation” or “parent involvement” to include the simple act of a parent’s enrolling and bringing a child to child care.
 - ➔ Child-care staff focus on developing concrete ways for parents and Elders to participate in children’s programs. This might include providing transportation for parents and Elders to the child-care centre; inviting parents and Elders to accompany groups of children on field trips, share their cultural knowledge, or read to children; and encouraging parents and Elders to contribute items, such as traditional foods or crafts supplies, to the program.
 - ➔ Child-care staff consider parents as partners in understanding the needs of the child, communicating about goals for supporting the child’s development, and planning a continuous care-giving experience for the child within the contexts of the child-care program and the family at home.
 - ➔ Community administrators plan child care as the central starting place for parents to begin to access a comprehensive range of information and programs intended to improve parenting skills, transmit culture, and promote an improved quality of life for families.
- 





NURTURING

cultural knowledge
and pride

QUESTION:

Are the current child-care programs successfully teaching young children about their culture and nurturing a sense of cultural identity and pride?

General Findings

In all of the First Nations that participated in this research, community leaders chose to enrol students in the early childhood care and development training program as part of a considered, long-range plan to develop community-based services for children and families that could be operated by community members, and that would reflect and revitalize culturally-based ways of caring for children and goals for their children's well-being.



At the time of this research, all of the participating First Nations had succeeded in mounting some kind of service to care for children and promote their development. And in all of the communities, the child-care program now provides a place where cultural knowledge is shared and cultural identity is strengthened through interactions among children, adult caregivers and Elders. Participants agreed that building cultural self-esteem and

developing the children's knowledge of their Indigenous culture and language is important for the children's connection to the family and community today, and for becoming healthy adults in the future.

"If children really know who they are, then they can go into white society. We teach them to be proud. The racism is not going to faze them. Instead of shaming, they're going to hold their head high."



Becoming Aware of First Nations Identity and Culture

THROUGH APPRENTICESHIP

One of the most striking findings of this research project was that First Nations child-care practitioners and parents firmly believe that it is not what one DOES in the child-care curriculum (the activities or materials, for example), but rather who one IS that helps to teach young children about their First Nations identity. The children are "apprentices," absorbing a First Nations identity by being in a First Nations milieu, with First Nations role models and First Nations values.

We held forums with child-care practitioners in each community to ask them about how they teach young children about their culture and nurture their cultural identity and pride. It surprised us when, although we had observed plenty of evidence of First Nations culture in child-care programs, the practitioners did not readily generate a list of cultural activities they deliberately planned, and some seemed bemused or confused about

the question itself. Rather than viewing cultural things and activities as key to helping children learn about their First Nations culture, they instead emphasized the caring they provide to the children, as members of the children's own cultural communities.

"We are all First Nations, and most of the children are also First Nations, and they know that. We look like them. We are from the same community, or from communities nearby to here. We do share what we know about our culture, but I guess because everything we do is our culture, we don't really think about it too much.

I guess it is just natural to us, as native people. I mean it's not from a book. We do have books for the children that tell native stories, and show native people. Yes, we do. But it's not because we read them these books that they know who they are. They know because we are all related here, in some way, and we are all native."

They explained to us that, because they are First Nations themselves, they do not need to plan much to make their culture explicit to the children. Because they see it more as "being" First Nations than about "knowing" First Nations culture, they like to leave open what aspects of culture will be highlighted in the child-care program at any given time,



depending on who is on staff and who else is around – an Elder, for example – on a particular day.

"We do have routines each day, and there are places in the day for activities. And so each of us brings in ideas and offers to lead activities that help the children to

know about their culture. Each of us knows something about our culture, like one person knows about how to make fry bread and we have Thursday fry bread day, and one person knows about drum making and she took the children and the other staff through making a child-sized drum. And one person knows some of the old stories and she uses dolls that she made to tell the stories. But, for example, if one staff leaves because they are sick or get a job somewhere else, we don't plan on how to replace the teaching of that part of our culture that she knew.

Because whoever takes her place, if they are First Nations, she'll know something about being First Nations, and she'll share that thing with the children. So we plan for culture but we don't plan exactly what, because really everything we do is about who we are as First Nations people. And everyone is different."

THROUGH MIRRORING

The child-care practitioners we interviewed see themselves as mirrors for the children, reflecting back to them a strong positive image of what it means to be First Nations people.

"Some of these kids, their parents may be going through hard times. I think it's important that they are getting such good care here at the child care, and they are seeing very positive role models, very healthy native women who are of their own community, who are kind, and who they can count on and who are proud strong women, proud of who they are."

One child-care practitioner recounted her own experience in school:

"I went all the way through school never seeing a native teacher or any native person in any important job in the school. Then I remember one day we got the first native teacher... she walked through the door, and she looked native and she was confident and she took control of the class. And I saw myself – I saw someone who looked like me, who was proud to say 'I am a First Nation' and that changed my idea of who I was and what I could do. It definitely changed my self-concept, right at that moment. I knew what I could be, as a First Nations person, and I didn't have to be white to make it happen."





Another form of mirroring occurs as a result of child-care programs functioning as community “hooks.” The programs bring children out from what might be very isolated social environments – especially in some of the smaller communities within each Nation – and into programs where they meet other First Nations children and come to know who their own relatives are and where they fit within extended family circles. This helps to consolidate their First Nations identity and sense of being connected to their First Nations community.

THROUGH GUIDED PARTICIPATION

We observed that child-care staff work hard to incorporate traditional cultural activities, such as drumming, dancing and singing into the daily curriculum.

They also involve children in traditional seasonal activities – such as smoking and drying fish and berry picking – so the children can learn the skills that have

traditionally provided sustenance for their community. At Tl'azt'en Nation, for example, when a community member brought in wild meat to be smoked and dried in the community kitchen, child-care staff used the opportunity to expose young children to traditional food preparation. They also prepare the children in advance to take part in community ceremonies, gatherings and other events throughout the year.

“The Head Start program [at Saulteau First Nation] is successful because it comes from the community. It comes from us, so who better to teach our kids. There has been a tremendous growth in children and self-esteem due to cultural programming.”

CULTURAL ACTIVITIES

The University of Victoria early childhood training and development program included a very strong cultural component. We observed that this emphasis on culture continued in the daily practice of program graduates, who have all incorporated a range of cultural elements and activities into the early childhood programs where they now work. These activities have included:

- creating books for children about families and events in their communities, some in heritage language
- incorporating the colours and teachings of the Medicine Wheel, as well as masks and legends and other aspects of traditional spirituality, including art and creation stories
- labelling objects in the community's heritage language
- using traditional cradle boards for infants
- acquiring child-sized drums and leading group drumming songs
- teaching traditional crafts, such as making moccasins and baskets, working with beads – all using traditional tools and materials
- building “clan houses” in the playground, decorated with symbolic animals, and organizing children into “clans” for small group activities
- making and using a traditional talking stick for turn-taking during circle time
- using “healing circle talk” to provide support in times of distress
- using “time in” rather than “time out” in response to a child's disruptive behaviour
- demonstrating traditional sustenance activities, such as gathering berries, reeds for baskets and mushrooms, preparing fish, fruits, meats, and leather, following the seasons and rhythms of the community (in one community, this included snaring rabbits on a trapline in winter)
- serving traditional foods, including bannock or “fry” bread, smoked fish and dried meat
- emphasizing nature and the skills necessary for living on the land
- using First Nations English dialect, and
- preparing for traditional community events such as powwows.



THROUGH DIRECT INSTRUCTION

For some parents, having their children learn their Indigenous language is more important than being proficient in English.

"We believe that our language was given to us by the Creator. When it was taken away from us through the Residential Schools, we lost one of our primary means of spiritual connection. So when we learn to speak it again, we are regaining our spirituality and our connection to the Creator."

The communities are all taking some steps to incorporate Indigenous language into their child-care programs. At Tl'azt'en Nation, for example, a heritage-language teacher available in the school also provides services to the child-care staff. Lil'wat Nation recently began offering a long-planned "language nest" preschool program for 10 children (with another 10 on a waitlist). The heritage-language teacher in this program joins the primarily English-language preschool program in the afternoons to lead some heritage language "circle time" that includes traditional dance, singing, and drumming with the children.

BENEFITS

The collective results of several studies "provides evidence that Aboriginal language and cultural programs, and student identification with such programs, are associated with improved academic performance, decreased drop out rates, improved school attendance rates, decreased clinical symptoms, and improved personal behaviour of children."*

*Demmert Jr, William G. (2001) *Improving Academic Performance Among Native American Students: A Review of the Research Literature*. Charleston, WV: Eric Clearinghouse on Rural Education and Small Schools.

The child-care practitioners we interviewed are optimistic that the acquisition of Indigenous language will have significant benefits for children in their ability to learn and be ready for school.

"It's challenging for them to learn to speak it [the heritage language] and recognize the words on the board. You can see them struggling, and thinking hard. But this is good for them. They are learning more about how language works, how to concentrate and listen carefully, and they are learning two languages. And they are learning something that's seen as special here – we don't have many community members left who can speak our language. They might not know it now, but this will make them proud later. I think that even if their reading in English isn't as fast as some of the others [children], they will be more ready for school – for learning."





Community members are also beginning to notice that, as their children start to use their traditional language as they play, in a casual and natural way, they also start to exhibit more confidence and pride.

"In one small community I visited I saw a little girl singing away to herself as she was playing. She was singing in her own language, as naturally and happily as you could imagine."

Some child-care practitioners and administrators, however, told us that they have found it very difficult to find money for cultural activities and especially for heritage-language programs (including Lil'wat Nation's "language nest" immersion program). Lack of money has meant they have not been able to implement all the cultural programs they would like.



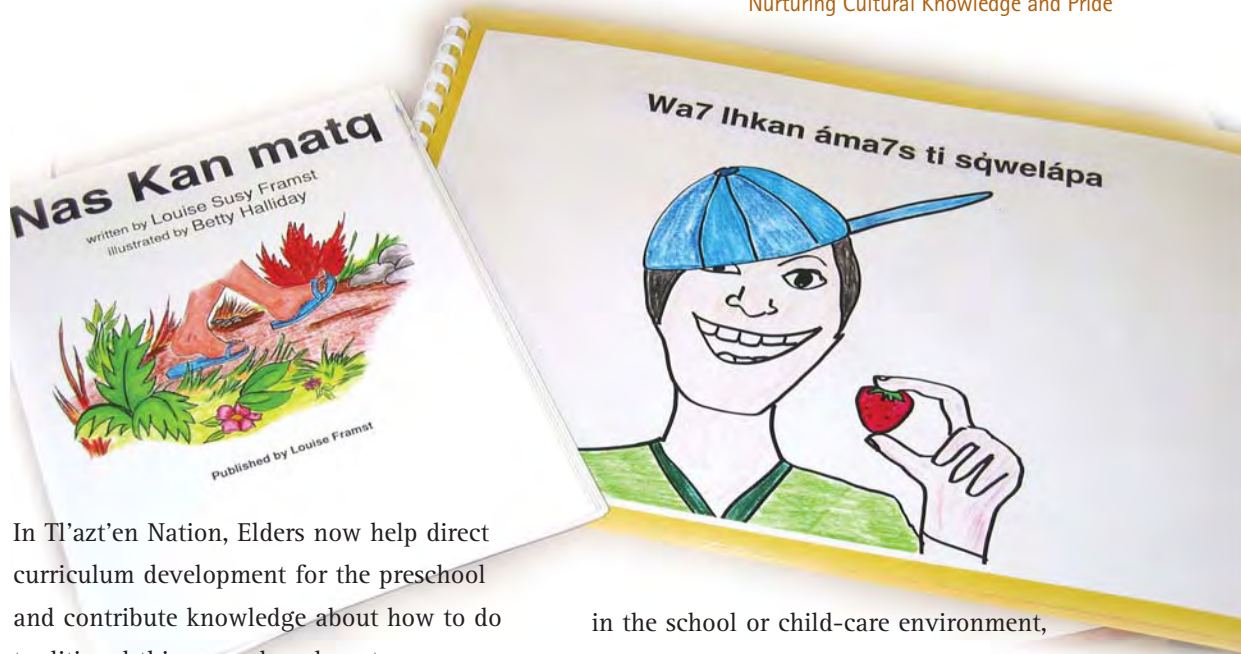
"It seems that there is a lot of talk in First Nations education and in Canadian heritage circles about the value of our own language and about preserving it and starting with the young ones. But trying to get the money and resources to do anything is something else. We need to begin with training our community members who speak our language to be able to work with children. We need to develop our own curriculum resources from scratch. We need to have auxiliary programs for the parents of children in a language nest or other type of learning program, so that they'll understand. All this costs money and the trick is trying to find any."

THROUGH THE INVOLVEMENT OF ELDERS

All of the communities have attempted to involve Elders in child-care programs as a way to incorporate or transmit Indigenous knowledge, as well as to create a sense of belonging and source of enjoyment for Elders, but with varying degrees of success.

In Lil'wat Nation, a cohesive group of Elders, most of whom are fluent in their Indigenous language, actively support the child-care staff. Intergenerational relationships are particularly easy here since the same core group of Elders played substantial roles in delivering the early childhood care and development training program. Nevertheless, the staff at Lil'wat Nation reported that they have not had many Elders participating directly in the child-care programs.

"The Elders are old. It's tiring for them to be in the rooms with all the children. And they don't necessarily know what to do or how to deal with the children climbing on them. Sometimes they come for special events, and that's enough, as far as they are concerned. But they do come to the centre [the multiplex housing the child care programs] and children often see them sitting out there, or enjoying a lunch, and they talk with the kids out there. So it's not like the children have no opportunities to be around Elders. They do, because of the centre."



In Tl'azt'en Nation, Elders now help direct curriculum development for the preschool and contribute knowledge about how to do traditional things, such as how to snare a rabbit or prepare an animal hide, and about community history. Initially, however, child-care staff told us that they had some difficulty in working with the Elders, which they saw as largely due to the Elders not being used to dealing with very young children.

"The Elders also need new skills. We had Elders coming in from the beginning. They need to keep the songs short, use pictures and props, teach words first, then the songs. We provide them with a topic or a theme and make materials and resources as they go along. We use animal games, board games, bingo games."

The First Nations in the Treaty 8 Tribal Association are still working on integrating Elders into programs, although Elders do participate in special activities for such events as National Aboriginal Day. Program staff in some of these First Nations told us that it will take time as well as creativity to think of ways to make Elders feel comfortable

in the school or child-care environment, possibly because the Elders' experience of "school" may have been negative, or because of the disruption of traditional family roles and community structure caused by Residential Schools. In addition, because the extended family is gradually giving way to more nuclear family arrangements in some communities, both child-care practitioners and Elders seem unsure of the role and place of Elders within this new structure.

The Need for Outsiders to be Culturally Aware

Many of the people we interviewed emphasized that it is critical for practitioners coming to a First Nations community to learn about the cultural beliefs, practices and ways of being of the families and communities they will be serving.

We asked contracted service providers, experienced in "working from the outside in" with First Nations, to offer their advice to other outside practitioners. They recommend that outside practitioners:

- Be aware of diversity within and between local communities. The diverse cultural

and historical experiences of community members should be respected as valuable sources of knowledge that can and should be considered in practice decisions; practitioners should not just rely on Western knowledge and practice models.

- Be comfortable in declaring when they do not know something – for example, what is transpiring socially, or where a conversation with a parent will lead, or how to interpret an interaction. They should not need to be “right” and “in control” all the time. This extends to participating in discussions with parents and other community members to decide on a course of action, rather than maintaining a colonialist, expert stance of always knowing what is true and best for people.
- Find mentors – members of the community who can provide guidance on cultural protocols, insights about what practice approaches are likely to be effective with which families, and friendship to help alleviate the stress of being an outsider.
- Use a population-based approach and work to integrate services targeted at children with special needs or children at risk into programs for all children in the community.
- Work toward strengthening the ability of parents to meet their children’s developmental needs and carry out remedial programs, and the capacity of the community to staff and manage their own

services. In this way, practitioners will avoid fostering a community’s dependence on outside “experts.”

This advice is consistent with a family-centred practice model.^{31 32} In this model, the provider works to build on the goals of parents for their children and their resources for achieving them, and to ensure that parents have the information and support they need to make their own decisions about their children and to carry through on strategies to secure positive developmental outcomes.

Conclusions

Our research indicates that the more community members are involved in training, program design and implementation, and in workshops, gatherings and child care, the more the community’s culture becomes part of the program.

By valuing Indigenous knowledge and incorporating it into child-care programs – and by demanding from outside practitioners a willingness to learn about the cultures in the community and to shift from being “experts” to partners with parents and other practitioners – these communities are increasing their capacity to deliver services at the same time as they are ensuring that the imprint of their cultures on services will grow stronger.



³¹ Crais, E. (1991). Moving from “Parent involvement” to family-centered services. *American Journal of Speech-Language Pathology*, Sept., 5-8.

³² Guralnick, M. (2001). A developmental systems model for early intervention. *Infants and Young Children*, 14 (2), 1-18.

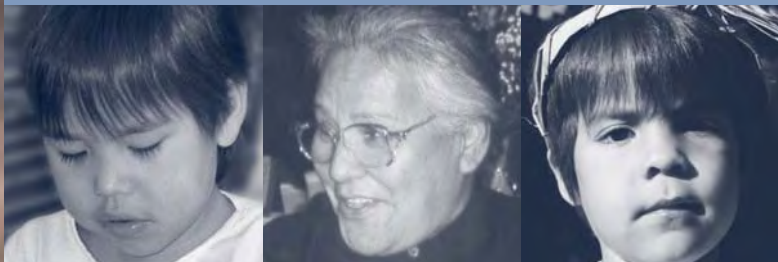
RECOMMENDATIONS

Based on this research, we recommend that:

- ➔ Funders support First Nations in achieving their goals for building community capacity through culturally informed training programs that prepare community members to assume staff positions in programs that serve First Nations children and families.
- ➔ In recognition of the fact that First Nations content in a curriculum delivered by non-Aboriginal people is likely to produce First Nations cultural literacy only and not cultural identity, program administrators actively recruit and employ First Nations people to work in programs where there are First Nations children and families, to provide an authentic cultural representation and positive role-modelling that will promote positive identity development among young First Nations children.
- ➔ Funders and community administrators provide funding for child-care practitioners to hold gatherings of Elders to explore ways they can become involved in child-care programs and to assure Elders that their cultural and historical knowledge is valued and has an important place in child-care programs and in professional development for the staff.
- ➔ Child-care practitioners help Elders to anticipate what it might be like for them to visit the child-care program and to plan for activities with very young children, and make an assistant available to help Elders when they are in the child-care centre.
- ➔ Child-care practitioners prepare young children for visits from Elders, explaining to them how to be respectful, gentle, and calm with these senior community members.
- ➔ Communities require and actively assist contracted service providers from outside of the community to learn about the cultures in the community, to engage in participatory and family-centred practice, and to show how they will work to increase the ability of community members to deliver the required services.







CREATING

successful and
sustainable
programs

QUESTION:

Are the current child-care programs successful, and can that success be sustained?

General Findings

There is no doubt within these First Nations about the positive effects of their current child-care programs – for the parents, the communities, and most especially the children.

In interviews and in group forums, community members and service providers spoke at length about how they see the new child-care programs resulting in positive changes in the children, including:

- more cooperative social skills on the playgrounds and at home
- greater use of heritage language
- greater clarity in expressing themselves in English
- a bigger vocabulary and more interest in books
- a longer attention span, and
- improved overall “readiness” for school.

For example, the principal of the band-operated school at Tl’azt’én Nation pointed out that there was a sharp decline in the number of children with significant language delays at entry to Kindergarten after the community mounted integrated service programs for young children through their child-care programs. The principal identified the Aboriginal Head Start program as particularly effective in improving school readiness, because of the way it facilitates both English and heritage-language learning and its emphasis on overall cognitive stimulation and social skills.

This research project, however, did not extend to a systematic examination of the effects of participation in new programs on children’s development. Rather, the focus was on the extent to which the community was supporting the development of children through new community-operated programs.

The communities all agreed that their capacity for providing children’s programs has been developed and strengthened, and that conditions for young children and families in these communities have, for the most part, been improved substantially. Many parents and external service providers told us



NEW RESEARCH

Community administrators and child-care practitioners in every one of the First Nations communities expressed a desire for further research to evaluate program effects on children and to follow children from infant and toddler programs through to their later childhood years.

Preparation for this new research focus is now underway as part of the program of research in Early Childhood Development Intercultural Partnerships (www.ecdip.org) at the University of Victoria.



that they are certain these new supports for child development have contributed to a demonstrable growth in their children's development and in their quality of life.

While Lil'wat Nation, Tl'azt'en Nation and the Nations in the Treaty 8 Tribal Association are at different stages in the development of community-based services for children and families, all have had remarkable success in implementing their long-term plans and developing programs to fit their population size, geographic and social circumstances, and community goals. They all also identify similar keys to that success, including:

- financial, administrative, and overall community commitment to promoting the well-being of children, youth and families as a long-term planning goal
- sufficient start-up funds/access to resources
- a key visionary person who perseveres in spite of setbacks or challenges

- at least one mentor with practice expertise (an early childhood educator, for example, or community health nurse, business administrator) to lead the way
- friendships among those individuals who play key roles in the implementation process
- a culturally appropriate training program and ongoing professional development opportunities
- rigor and accountability (through an accredited training program and/or efforts to achieve program licensing, for example), and
- child care and family support for those at work.

Administrators emphasized that most of these enabling conditions will need to remain in place to ensure the programs and services these communities have already developed can be sustained into the future.

Six Keys to Success

1. ACCESS TO CULTURAL AND FINANCIAL RESOURCES

To sustain their current thriving and successful programs, community leaders also told us that they must have in place:

- cultural resources, such as capable and interested Elders and fluent heritage-language speakers
- safe and suitable hard infrastructure (such as buildings, indoor and outdoor equipment)
- a sufficient number of qualified personnel, and
- sufficient funding.



Graduates, however, emphasized that while each of these elements is necessary, all must present and used in a planned, coordinated way to be effective.

For example, at Lil'wat Nation, there is an abundance of cultural resources and Elders who know Lil'wat culture and the heritage language, and enough trained community members to fully staff children's programs. But the community does not have a van available for transporting Elders to the child-care program, staff do not have paid time allotted specifically to plan activities involving Elders, and there is no funding available for purchasing materials for activities with Elders or for providing Elders with a gift in thanks for coming to the child-care program – leaving both Elders and

practitioners dissatisfied with the level of involvement by Elders.

Practitioners in the Tl'azt'en Nation child-care program described a similar situation, including a low level of Elder involvement and minimal explicitly planned cultural activities. In contrast, funding for the Tl'azt'en Nation's Aboriginal Head Start program covers virtually everything: transport for Elders, planning time for staff, and materials and honoraria to cover Elders' activities with children in the program.

Community leaders believe creative solutions are needed to help bridge resource gaps in the future, and that these solutions may sometimes require flexibility on the part of external agencies. For example, a safe and suitable building might not fit requirements for a licensed group child-care facility, which right now would prevent certain kinds of funding. An allied health professional told us of a remote fly-in community that wanted and needed a child-care program, and the only suitable building was a school. According to child-care licensing regulations, a school is usually not a suitable building, and therefore not eligible for funding such as operational grants, etc. The community did not get its child-care program.

In addition, community administrators and graduates who are managers of child-care programs at Lil'wat Nation and Tl'azt'en Nation identified the need for longer-term funding than is currently available for pilot



programs that they are introducing gradually as part of the hub of early childhood care and development programs. They observed that implementation and full adoption of community-based programs takes time, and that some initiatives take a few years to “catch on with some of our families” and “prove their worth.” (They cited parent-education programs to facilitate children’s English-language development and heritage-language immersion or “nest” preschool programs as two outstanding examples of programs that take a few years to become well attended and to demonstrate success.) The Romanow Commission also repeatedly recommends longer-term funding for community-based pilot programs that address early childhood health and quality of life.³³

2. COMMUNITY SUPPORT FOR EARLY CHILDHOOD SERVICES

Staff and community leaders identified community commitment to an agenda of supporting young children and their families as critical to first establishing children’s programs, and then ensuring their continued success and sustainability.

In all the First Nations communities, a common vision – typically articulated by community leaders as a vision for a strong and healthy future that rests on the healthy development of the next generations – provided the foundation for action in starting their children’s programs.

“In the beginning we distributed a training survey to all the member bands (within the Tribal Association). One of the important things that was reported was that adults were not taking training because they had no child care, especially no long-term child care. This also prevented people from going to work, especially single mothers/parents. Rather than just setting up a program, we set up a training so that communities could get self-sufficient.”

The community leaders we interviewed see programs and services for young children as an essential part of their vision, and clearly value Elders, program staff, children and program supporters for their contribution to the future of the community.

This clear support and trust in the quality of children’s programs, and in the qualifications and skill of staff, has in turn generated enrolment and community participation in programs, as well as practical supports, such as budget allocations.

Several child-care practitioners and administrators told us how regular external evaluations, such as the Aboriginal Head Start evaluation, help to sustain high community support and encourage adequate budget allocations and high morale among practitioners.

³³ Romanow, R. J. (2002). *Building on values: The future of health care in Canada*. Ottawa: Commission on the Future of Health Care in Canada.



"We have had very positive evaluations by Aboriginal Head Start, and it makes us feel good about what we're doing here, and that it's worth the effort – that trying to provide high quality care does matter and is recognized. Our Education Society sees that, our Band Council sees that, and it justifies the budget we are asking and the expenditures they make to ensure that our programs provide quality and to keep our highly trained community members in our staff positions. External evaluations, and also the licensing officer, give us feedback, and make us feel that: Hey, people are paying attention, and what we are doing does matter."

3. SUPPORT AND PROFESSIONAL DEVELOPMENT FOR PROGRAM STAFF

Participants identified support for staff as both a foundation of success and key to growth, development and sustainability. This support includes:

- mentoring
- succession planning
- staffing relief
- professional development, and
- appropriate appointment of people to staff positions.

In each of three programs where our review of records indicated high levels of program use, stability, and success in the integration of services, a senior external professional from outside the community purposefully (and voluntarily) mentored community members who were moving into positions of leadership.

Succession planning for the people we interviewed means looking forward and training new people to take the place of current staff. Staff in small communities told us that investment in personnel is an important means of supporting leadership development and career development, enhancing community capacity to serve children and families, and maintaining individual satisfaction.

Staff in all communities told us that they appreciate professional development, such as workshops, conferences, and the Aboriginal Head Start network of training, which has enhanced their ability to address specific issues and deepened their professional knowledge. Staff in small and rural communities pointed out that travel, sponsored by the community, is always a part of their professional development, so they find administrative support is also key. (This

is unlike the private sector in an urban area, where individuals are responsible for travel.)

4. GOOD GOVERNANCE

The question of what makes a program sustainable has to be considered within the context of other community priorities and community governance. Within most of the communities we studied, children's services are in the portfolio of a director or coordinator who reports to committees and, through the Band Manager, to an elected Chief and Band Council.

Community administrators and child-care practitioners told us that good governance for children's programs includes:

- formal relations dedicated to supporting and maintaining both the program and the community vision for the future
- the participation of traditional authoritative structures, such as Elders
- strong organization and effective program and community-level administration
- direct input by program staff (where program staff had more control and say in the allocation of resources, they were more able to develop and fulfil program mandates), and
- effective use of external networks, such as tribal associations or professional associations.

They also told us that *exceptional* governance includes coordinated long-term planning

involving the members of the Band Council, key administrative personnel, allied services administrators (from schools, health centres, or wellness programs, for example), citizen committees (such as an Education Committee) and Elders. In our observations, as well, we could see the positive contributions of well-defined, coordinated, socially inclusive governance structures to sustainable and growing community development.

PROJECT SUSTAINABILITY

Similar to the First Nations people we interviewed for this project, a report for the Vancouver Foundation completed in 2000 identified six primary determinants of project sustainability:

- vision
- leadership
- passion
- understanding community/client needs
- financial sufficiency
- logistical support.*

*The Vancouver Foundation (December 2000). *An Examination of Project Sustainability*. Author: Vancouver, BC.

Other research on factors influencing program sustainability also underscores the importance of good governance. One report notes: "Oppressed communities may benefit more by putting organizing before development."³⁴ In other words, good organization can create development opportunities, but when communities are not

³⁴ Coccariarcelli, S. (2004). *Child care and community development: A community development approach to child care creation and neighborhood revitalization on the Northwest side of Lansing*. Report to the Michigan Family Independence Agency: Michigan State University.



To ensure good governance, the people we interviewed for this project suggest:

- clearly articulating the development goals and potential positive outcomes of the collaboration
- providing staff with a positive view of the collaboration by giving examples of positive outcomes of previous collaborations that achieved community goals
- using a system of incentives for individuals or agencies participating in the collaborative effort

organized first, development of community-based capacity and service delivery is less likely to happen or to be sustainable.



Another recent study specifically explored the sustainability of collaborative initiatives that called for collaboration or integration of institutions, departments in a community organization, or agencies that are usually fragmented.³⁵ The authors point to the special challenges of attempting to create the kind of integration that has been achieved, to varying degrees, by the First Nations we studied, and state that “It is important that people embarking on an interagency collaboration recognize that ‘turf’ issues are likely to occur and cannot be ignored.”

- engaging in serious pre-planning to anticipate and minimize potential turf issues, and
- forming a steering committee to identify potential problems, key issues and similarities and differences between the participating departments or agencies.

The First Nations involved in our study – particularly the two largest – followed a similar path by involving community leaders, steering committees, education societies and Band Councils in supporting the implementation, growth, and full adoption of integrated early childhood care and development programs.

³⁵ Johnson, L., Zorn, D., Tam, B.K.Y., Lamontage, M., Johnson, S.A. (2003). Stakeholders' views of factors that impact successful interagency collaboration. *Council for Exceptional Children*, 69 (2), 195-209.

THE IMPORTANCE OF A CHAMPION

Our research revealed the significant and pervasive role played by a community member who “championed” the vision, planning and implementation of early childhood programs.

In every community, a single community leader was repeatedly identified as crucial to success, by first anchoring the political will to providing funding for training and services, then successfully:

- initiating a partnership with the University of Victoria to co-deliver training in the community
- keeping the community focused on making the capital expenditures necessary for creating the hard infrastructure for community-based programs
- encouraging the community to commit operating funds for innovating new programs, and
- engaging community members in the design and use of services.

Other research on the sustainability of community development initiatives also points to the key role of a champion for the initiative who is also a member of the community, and one report specifically stresses the role of a program champion in brokering relationships between the home community and other communities and institutions whose contributions or support are needed for launching pilot programs.*

*Community Solutions (2004). *North Okanagan Falls Prevention Program Sustainability Study*. Vancouver: Interior Health Populations Health Planning and Support Unit.

5. HIGH PROGRAM PARTICIPATION

A sustainable program is one that is well used. In most of the communities we studied, more than half the children, and sometimes as much as 80% of the children who were eligible, were attending child-care or other children’s programs.

The three groups of First Nations communities in this research project have achieved full enrolment and participation through the effective management of waitlists, and through carefully distributed

financial support to parents to access programs, convenient hours, a socially comfortable milieu, and funding to provide Elders with gifts in appreciation of their visits and teachings (following cultural protocol).

Providing transportation is also a vital support to continued program use, both because many reserve residents do not drive and because some communities have two or more program sites (in one case, 45 minutes away from each other by car) or share costs by serving outlying villages. In all the First



Nations communities involved in this project, at least some of the children attending child-care and/or Aboriginal Head Start programs were transported by the school bus that brings older children to band-operated schools. Most of the programs in this study also offered some kind of vanpooling or pick-up service.

In several very small communities where there were not enough young children to mount a full child-care program, we found that the communities were using off-reserve programs or sharing with other communities. (This networking or service sharing helps to overcome the barrier of small numbers, but only works when communities are close by.) We also saw stand-alone services or

drop-in groups being used, rather than ongoing program offerings like Aboriginal Head Start or centre-based child care. While these options may not meet all needs, they do extend the reach of early stimulation, socialization and intervention services and support to more children and parents.

6. GOOD COMMUNICATIONS

The staff and community leaders we interviewed stated that open and regular communication between program and community administrators is essential to sustainability. Good communication ensures

that administrators know about the program's needs and can effectively inform community members and Band Councils, and funding bodies about those needs and about the achievements and benefits of the program. This helps, in turn, to maintain trust in, and financial commitment to, the program and affirm the community vision for the future.

They told us that formal communications within the programs, such as regular staff meetings, also allow staff to coordinate programming and deliver curriculum, ensure that each staff member's cultural knowledge is used to the best advantage, and address specific issues for particular children. For example, one of the First Nations in the Treaty 8 Tribal Association currently uses inter-disciplinary case conferences between allied service providers to provide preventive support to families that might be at risk.

Conclusions

While sufficient resources – human, physical, cultural and financial – must be present to have successful programs, once they are present, other factors are more important in creating a sustainable program.

These other factors include community understanding of, and commitment to, a vision of supporting young children and their families, which in turn leads to greater participation and enrolment in children's programs, and greater trust in program staff and support for their development.

RECOMMENDATIONS

Based on this research, we recommend that:

➔ Communities consider the development of early childhood programs as a central part of good governance and sustainable community development.

➔ Communities consider the benefits of regularly scheduled, structured meetings to articulate, review and revisit:

- the community vision for child development and well-being
- the community planning process for generating and supporting social cohesion, cultural revitalization, and
- the development of hard and soft infrastructure for community-based services.

➔ Communities provide targeted funding and resources to support both the employment of First Nations community members in child-care programs *and* the delivery of a cultural curriculum, as part of the minimum conditions necessary for programs that:

- will be well-received by First Nations parents
- contribute to cultural revitalization and cultural learning by children, and
- act as catalysts for social cohesion.

➔ Funding agencies and communities find innovative ways to support communities with small populations of children and provide some level of community-based

support for parents who work or have other demands upon them.

➔ Community administrators formally incorporate succession planning and professional development as a part of their plan of action for sustainable development.

STRATEGY FOR SUPPORTING SMALL COMMUNITIES

In small communities, especially, funding and implementing integrated program development through inter-sectoral partnerships and pooled resources can be very effective. This integration allows programs, such as early childhood care and development, to take a broad, coordinated approach to addressing the needs of families, rather than trying to have separate programs focusing on particular family members or particular developmental, social or health needs.

The Romanow Commission proposed a Rural and Remote Access Fund as a method for funding smaller communities based, not on population size, but rather on need and the capacity of the community to pilot an innovative approach that holds promise of positive effects on well-being.*

*Romanow, R. J. (2002). *Building on values: The future of health care in Canada*. Ottawa: Commission on the Future of Health Care in Canada.





CONCLUSION:

four years later

CONCLUSION

Four years after community members completed the early childhood care and development training program, we found that:

- All 28 graduates we interviewed (80% of the 35 who graduated, out of 40 originally enrolled) were working full-time as staff or managers in child-care programs and other services for children and families within their own communities.
- All three groups of First Nations had mounted child-care programs, two had also started Aboriginal Head Start programs, and all communities were delivering at least one additional program to improve the development of infants and young children.
- All programs were thriving.
- All child-care programs had waitlists for infant care.
- All programs were actively planning and seeking resources to expand.

The approaches currently being explored by the First Nations that participated in this research project clearly warrant close attention.

Their work strongly suggests that a community-centred model that uses early childhood care and development programs first as a “hook” to attract community members by delivering the quality child care



they both need and want, and then as the centre of a “hub” where community members can find other family development and health services may be more effective in meeting the diverse needs of children and families in First Nations communities than the dominant problem- and need-specific model. In fact, the “hub” model may work for other communities as well, particularly those in rural and isolated areas and in low-income, urban neighbourhoods, where the accessibility and coordination of services is a persistent barrier to program use and effective family participation.

Why the “Hub” Model Works

CREATING COST AND RESOURCE EFFICIENCIES

Integrated service delivery yields a number of efficiencies, which are important when both funds and human resources are in short supply, as they are in most rural and remote communities.



In the communities participating in this research project, most programs are co-located with other services – either schools or health services – and share support personnel, administrative duties and building infrastructure costs. This relieves the smaller communities, in particular, of the need to spend a great deal of time and human resources raising funds separately for new construction, building and grounds maintenance, office equipment and administration.

In addition:

- All the community administrators we spoke to were involved in grant and proposal writing and reporting to funders and regulatory bodies. They told us that being able to communicate easily and share both skills and resources helps to facilitate coordinated and successful funding applications and reporting.
- Many elderly people do not drive, and fewer First Nations people hold driver's licenses and own vehicles than the Canadian average. Because most of the programs in this study offer some kind of vanpooling or pick-up service, adults have the opportunity to access services for themselves and for other family members in the same location as they access child care, and communities are more efficient at supporting the needs of parents and therefore the family. Co-location of services also means that the community needs to invest less in drivers, vehicles and maintenance costs.

- Co-location of child care with other services and programs facilitates the crossover of staff and clients from one program to another. In several communities, staff support each other across programs, act as substitutes to assist as needed in co-located programs, and share responsibilities.



- Co-location facilitates access to cultural resources. In Tl'azt'en Nation, for example, a heritage language teacher available in the school also provides services to the child-care staff. In Lil'wat Nation, a heritage-language teacher in a "language nest" preschool program joins the primarily English-language preschool program in the afternoons to lead traditional language, dance and drumming circles with the children.



- Co-location enables regular inter-disciplinary staff meetings, which, especially when the co-location includes health services, is particularly beneficial for meeting the needs of children with special developmental or health needs.

PROVIDING LADDERS TO ADDITIONAL SERVICES

Integrated service delivery is also one way to “hook” parents and other relatives who bring a child to child care into a variety of “laddered” services that can directly benefit:

- children, by allowing communities to help children-at-risk without invasive monitoring or calling in external child protection services, and to identify when children might need early intervention because of specific developmental delays, and
- adults, by leading them to cultural and social programs and health services – such as alcohol and drug treatment and healing programs – that can help them to be healthier, more productive and better parents.

Through access to a series of add-on services, parents and other relatives may then find it easier to move on to training and education programs, and to full-time employment.

ENABLING PROFESSIONAL ACCESS

Many small communities in Canada are faced with the challenge of “fly-in” (or drive-in or boat-in) services. Communities that are too small to afford their own public health nurse, for example, rely on federally funded nurses who make scheduled and emergency visits to communities.

The fly-in practitioners we interviewed reported several barriers to providing services in communities that remain dependent on the common model of fragmented, externally provided services. One barrier is lack of trust by community members, either for historical reasons or because of the often short-term nature of northern professional service providers – all the practitioners emphasized the need to be available to community members regularly over a period of years in order to build trust between the community members and themselves. Another barrier is lack of access: practitioners told us they often cannot find the children or parents they need to visit. This may be because making appointments in advance is culturally dissonant in some communities, or because matters arise at the last minute that prevent community members from keeping appointments.



INTEGRATED SERVICES

An integrated service delivery site provides a place for service providers to “come in” to rather than having to create a space – an office, for example – that community members are scheduled to visit. Also, when a service professional, such as a physiotherapist, can enter into a space such as a child-care centre, she or he can observe children in a natural setting, and receive help from staff to learn about culturally appropriate ways of doing things.

Staff at the child-care centres also learn from the visiting professionals in these settings, and can in some cases provide children with greater continuity of care. For example, one speech and language pathologist told us that she could provide only about 5% of the therapy an individual child would need, and that children receive the greatest benefit from repetition. By working with qualified child-care educators who understand children and their development, the therapist can ensure that her interventions are applied consistently: she now has a partner “on the ground” to maintain the intervention.

Creating a space for service professionals to “come in to” also enables child-care staff to monitor service delivery levels and to help explain to parents, in culturally appropriate ways, the services their children are receiving – from dental hygiene instruction, vision testing and immunization, to more specialized support and treatment services.

ENSURING CONTINUITY AND A CULTURAL FRAME OF REFERENCE

By placing community-based professional and para-professional staff at the centre of the hub, an integrated service delivery model helps to ensure continuity in the delivery of services and to create a cultural frame of reference around services.

Community staff members work both to explain services to community members, and to explain the community’s cultural protocols, values, and expectations to other satellite service providers who come into the hub. These community staff members are repositories of “memory”: they know who the children and their families are, what they need, how they tend to use services and how a family’s way of life may affect a child’s well-being.

BUILDING COMMUNITY CAPACITY

The graduates of the early childhood care and development training program expressed deep gratitude for the mentors, support networks and professional development opportunities they were exposed to first during their training and now through their current workplaces.

In an integrated service delivery setting, staff are regularly exposed to the work of other professionals. As many interviewees pointed out, the cross-disciplinary nature of early childhood care and development work is especially suited to workers in rural and northern communities, where it is always

difficult to attract, retain or get enough specialized professional services. Several graduates working in child-care programs described how, as staff learn more about each other's work, they are building a shared body of knowledge in the community, thereby strengthening community capacity to deliver services and providing a buffer if a staff member departs.

CREATING LEADERS

Four years after the first cohort completed the early childhood care and development training program:

- graduates have assumed leadership roles as directors or managers of integrated services in two of the three groups of First Nations communities we studied, and
- one First Nation has enrolled a second cohort in training to become early childhood educators, and is looking to past graduates as potential mentors for the new trainees.

The opportunity to work closely with other professionals (therapists or nurses, for example) inspires staff to continue their education and training, and to think about what else their community might need. The graduates point to networks, such as the Early Childhood Educators of British Columbia professional association and the Aboriginal Child Care Society of British Columbia, as providing ongoing professional

development opportunities and supports that are not as readily available to staff who are working alone in rural and remote communities. Even if only one or two staff directly associated with a program have the opportunity to travel to a professional conference or workshop, when they return to work, they share their learning by applying it in the program setting.

PRODUCING A RIPPLE EFFECT

Involving community members in planning and developing child-care training and programs, and later in the delivery of integrated services, causes significant spin-off benefits.

Once these communities began training child-care practitioners and establishing stable, high-quality and culturally vital programs for both children and families – and as more and more community members and program staff began to invest their personal time and creativity into new ways to support the children and families in their communities – support for children's programs and for children in general became more and more widespread.

Our research shows that the presence of child care and development programs and of Aboriginal Head Start programs has the capacity to generate other community programs or activities that are consistent with the aims of early childhood programs in supporting both healthy children and parents.

For example, at Lil'wat Nation, a group of Elders who had come together regularly to teach in the training program formed a Lions Club when the training program ended and the child-care program opened. They held various fundraising events that generated enough money to support a child with special needs to attend a summer camp. A staff person in the same community is now applying for a bursary to enable enrolment of a child with special needs into the child-care program. At Tl'azt'en Nation, staff formed a parenting club through the community school to encourage and create family-centred recreational activities. This club involves new parents who may be considering bringing their children to the child-care or Aboriginal Head Start program, and it provides a forum for parents whose children have moved into formal schooling to continue to meet and support one another. And in one of the Treaty 8 First Nations, a father of two girls in the child-care program started collecting household recycling items that could be used in the child-care program. This expanded into a larger recycling program in the community, as well as a parent-led activity group that shows parents how to use disposable household materials to make simple toys and crafts for and with their young children.

All of the First Nations that participated in this study have created some type of program for young children to learn their heritage language. Most of them have begun programs of traditional dance and drumming, both at the preschool and school levels, and



increased efforts to interest and prepare children to participate in traditional ways in cultural ceremonies and celebrations. Participants in all of the communities reported that, because of the success of involving Elders in the child-care program, they have continued to involve Elders in other aspects of community life, and to provide them with luncheons and other meeting opportunities.

Promising Practices

Many BC First Nations are moving towards greater capacity to establish, staff, and govern children's programs and services. Many have expressed a desire to create models of service delivery that reflect their holistic views of child and family well-being and their community-driven approach to achieving developmental and cultural goals. They seek to avoid the fragmentation and professional "turfism" so familiar in mainstream education, health, and social services, calling instead for the pursuit of "Aboriginal ways" for Aboriginal people.

Elsewhere throughout the world, early childhood centres that integrate primary

health, education and social services have long been advocated as a means of addressing the effects of poverty, supporting good parenting and delivering public health programs, yet there is still a preponderance of theory and rhetoric, with few concrete examples of inter-sectoral service models.

These First Nations communities are doing it.

These communities have surmounted great challenges to successfully coordinate service providers across professional disciplines, and integrate a range of programs for children and families. Early signs of success – in terms of improved access, efficiency, effectiveness and cultural congruence of

KEYS TO SUCCESS

A commitment to the concept of family-centred practice is key to the promising practices and approaches now in use in the First Nations communities that participated in this project. Also key is the concept of providing supports and services for children within the broader scope of their culture and their community.

The participating First Nations are all working on long-term, comprehensive community development plans similar to the "comprehensive community initiatives" that have been discussed elsewhere in Canada as promising approaches to poverty reduction, community revitalization, and sustainable development:

"Comprehensive Community Initiatives are holistic, developmental, and long-term. They are multisectoral and seek to be inclusive. They are concerned with both process and outcomes ... They seek to create opportunities for individuals and families to improve their lives in many different ways. Various projects may be undertaken to ensure access to nutritious food, provide training that will help lead to decent employment or promote access to high-quality, affordable child care."*

*Torjman, S. & Leviten-Reid, E. (2003). *Comprehensive community initiatives*. Ottawa: Caledon Institute of Social Policy.

programs for young children and strengthened community capacity – indicate that these are promising practices from which we all can learn.

The models being developed in these communities provide culturally appropriate, holistic ways of addressing diverse needs and are inherently strong models for other rural and small communities. They create efficiencies that in turn lead to greater program stability, and they enable staff development and mutual support. The result is both coordinated and continuous service for children and, through co-located programs, “laddered” supports and services for parents.

ROMANOW

The Romanow Commission strongly recommended inter-sectoral service delivery, particularly for improving the health of Aboriginal people and Canadians residing in rural and remote settings. In the Commission’s report, the National Aboriginal Health Organization states that: “...one of the essential ingredients in creating effective Aboriginal health systems is a multi-jurisdictional approach to health service reform.”*

*Romanow, R.J. (2002). *Building on values: The future of health care in Canada. Final Report of the Commission on the Future of Health Care in Canada.* Ottawa: National Library of Canada.

However, because First Nations cultures are diverse, it is unlikely that any one vision, plan or model will be universally applicable for all First Nations communities or, indeed, for any other communities that share the goal of developing a coordinated, culturally informed and useful approach to promoting the well-being of young children and families.

IN CLOSING

Experts anticipate that the number of young children in the Aboriginal population in Canada will grow at twice the rate of young children in the rest of the Canadian population over the next decade.

It will require a significant commitment of funding to support community-driven initiatives to strengthen the capacity of First Nations communities to:

- provide post-secondary training in early childhood care and development that is delivered in or near the students’ home communities to ensure high retention and completion, and
- implement and operate coordinated, comprehensive child-care and development services.

Communities that are ready and have the will to see a vision through to successful implementation will need funding to develop both the hard infrastructure (buildings and equipment) and the soft infrastructure (including enabling policies, training in human services, effective governance for



service developments and delivery, the appointment of administrators and management) that is required to support the delivery of services to First Nations children and families. Researchers, too, will need funding to develop “community-relevant” criteria and tools for measuring program performance, and to enable the effective communication of new knowledge so that further promising practices can be identified and shared.

In addition, within this broad framework, targeted funding will be needed:

- to plan and deliver the cultural curriculum, including the teaching of heritage language, and to transport Elders and provide honoraria for Elders’ visits to the child-care program, and
- to cover expenses for child-care staff to attend professional development training and conferences and to support substitute staff during their absence, as well as for professional mentors to assist front-line staff in developing leadership skills.

Our research also underscores the need – within rural Canada in particular – for funding agencies, branches of government, regulatory bodies, community administrators and training institutions to open up the foundations of how community development and service delivery are conceived and

supported. Institutions, as well, need to work cooperatively across professional disciplines and jurisdictional boundaries, streamlining both access to resources and accountability requirements. And they need to engage in supportive, long-term partnerships with communities that will enable the communities to evolve and to implement creative approaches over time.

The promising practices demonstrated by the First Nations that participated in this research have shown how good governance, forethought, ingenuity, and an ability to think holistically can create service systems that:

- are cost- and resource-efficient
- increase access to social support, child care, health care and family services, and
- are tailored to the culture, circumstances, readiness, needs and goals of their own populations.

It is clear that capacity-building initiatives must be anchored deeply within each community’s own socio-historical context, geography, culture and mission. Successful innovations build on a community’s existing strengths, potential for cultural reconstruction, and ability to push forward strategies for achieving internally identified goals. Each community that shares the goal of developing a coordinated, culturally informed and useful approach to promoting the well-being of young children and families must be given enough flexibility and long-term support to evolve and implement its own long-term vision.

Lil'wat Nation

"We are working hard in Lil'wat Nation to develop our human resources and to create strong programs, and I think that having the interest from the university in what we're doing here is very positive. It holds a mirror up for everyone to see what we're doing, and it amplifies the excitement. We want to retain the staff we have helped to develop and keep qualified people working in our community. So for them to hear from researchers that other people are interested in what is going on here, and that we are doing things here that can be useful for others to learn from, that's good. It makes a few people here who might have thought about looking for work in a bigger centre or in the city realize that this is a really good place to work. And especially in the way that the research is being done – developing long-term relationships, making sure everyone knows what they are agreeing to, and ensuring benefit to the community itself, and not just beyond the community – there is a mutuality and respect that I think is exemplary."



- Sheldon Tetreault, Senior Administrator, Lil'wat Nation

Feedback and Additional Copies

We welcome feedback about this report and about the process of building community capacity to promote the well-being of young children. To comment or for additional copies of this report or reports of other projects underway in the Early Childhood Development Intercultural Partnerships Program, please contact:

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