



**Talking Points:  
Exploring Needs and Concepts for  
Aboriginal Early Childhood Language  
Facilitation and Supports**

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**Concept Discussion Paper  
Prepared for: Public Health Agency of Canada  
Aboriginal Head Start in Urban and Northern  
Communities**

***We're taught that our language comes from the Creator and that speaking it acknowledges our connection. We're taught that our voice is a sacred gift and that there is a lot of power in our words. When we speak, our words go around the world forever.***

Sharla Peltier,  
Speech-Language Pathologist,  
Nipissing First Nation

## **PREFACE**

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### **Sources**

This Concept Discussion Paper was based on consultations in 2005 with colleagues working in Canada in various ways to support Aboriginal children's language development, literature reviews, and the author's own research and teaching on Aboriginal early childhood care and development.

Consultation with Aboriginal scholars, specialists and program managers involved in speech-language pathology and therapy services, language education, early literacy education, early childhood education, and early childhood assessment has been a rich source of perspective and emphasis. Input was gratefully received from:

- Aboriginal community-based service providers;
- University faculty of speech-language pathology programs;
- Speech-Language Pathologists in practice who have experience with this topic, including the three Aboriginal Speech-Language Pathologists in Canada known through membership in the Canadian Association of Speech-Language Pathologists and Audiologists;
- The Centre of Excellence on Children and Adolescents with Special Needs;
- Representatives of post-secondary institutions that have programs of training in early childhood education with a proven track record of success in contributing to Aboriginal capacity building.

The names of contributors and their affiliations are provided as an Appendix.

### **Acknowledgements**

The author thanks the Public Health Agency of Canada for the opportunity to address this important topic, the many people who offered the richness of their experience and their deep commitment and concern to ensure effective supports to secure the well-being of Aboriginal children in Canada.

### **Disclaimer**

The views presented in this Concept Discussion Paper are solely those of the author and do not represent the policies or priorities of the Public Health Agency of Canada, Aboriginal Head Start in Urban and Northern Communities. Neither does the paper necessarily represent the views of the individuals who contributed to ideas in a preliminary discussion for development of the paper, or the organizations with which they are involved. The author takes full responsibility for the views expressed in this paper, and encourages broad national discussion to define a conceptual framework for strategic action.

This paper as well as a chapter synopsis of the paper is available online at <http://www.ecdip.org/reports/index.htm>

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## **EXECUTIVE SUMMARY**

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### **Talking Points: Exploring Needs and Concepts for Aboriginal Early Childhood Language Facilitation and Supports**

#### **Concept Discussion Paper Prepared for: Public Health Agency of Canada Aboriginal Head Start in Urban and Northern Communities**

**Jessica Ball**

Aboriginal children's language environments and experiences with language are unique in many ways compared to non-Aboriginal children and require a fresh perspective. The important roles of language in securing Aboriginal children's cultural identity and their connections with family, community, and spiritual life call for new forms of culturally-appropriate supports.

Giving children the best start in life is one of the most important investments we can make in Canada. Research shows that early childhood is the developmental stage with the greatest long-term impact on quality of life. Language develops rapidly from infancy throughout the preschool years. Language delays and difficulties are best prevented and addressed during these early years.

Quality childcare programs have been shown to contribute positively to children's development in many circumstances. There is an extensive literature addressing questions about criteria for defining and measuring quality, the content of caregiver training programs, access to continuing professional development for childcare providers, strategies for involving parents, and impacts of multilingual learning environments. This literature is a rich source of informed ideas for promoting infant and child development within a Euro-Western framework of values, goals for children's development, family characteristics, and community resources.

Outstanding challenges concern the nature and provision of social learning environments at home and in community settings that are culturally and linguistically congruent with the goals of Aboriginal parents for their children's development. New ground needs to be cultivated for supporting Aboriginal parents and educating early childhood care and development practitioners who do not necessarily subscribe to the same developmental goals for their children as do parents of European descent.

Aboriginal caregivers and programs are needed that reflect, reproduce and enhance the diverse cultures and languages of Aboriginal families and communities in Canada.

**The overwhelming emphasis of contributors to this paper was on a population-based approach; that is, a ‘whole community’ approach aimed at improving the social and language environment and the language proficiency of all Aboriginal children and their families within a community-defined agenda for holistic child and family development.** Contributors to this Concept Discussion Paper made no use of the term ‘at risk’, while only a few mentioned ‘special needs’ in their descriptions of the most pressing needs and existing strengths in Aboriginal communities.

Given the importance of early language development for social inclusion, cultural identity, cognitive development, school readiness and educational achievement, new investments of federal funds are needed for a national Aboriginal Early Language Facilitation and Support strategy. This strategy would enable:

- regional and national networking and leadership development specifically for those working on Aboriginal Early Language Facilitation and Support through virtual and on-the-ground conferencing;
- development, delivery and evaluation of post-secondary training curricula to extend the capacity of Aboriginal early childhood practitioners to facilitate and support children’s language development through an additional year of for-credit, diploma-level training;
- development, delivery and evaluation of post-graduate (pre-service) training curricula and professional development (in-service) training curriculum to better prepare Speech-Language Pathologists to work effectively with Aboriginal children, families, programs and communities;
- community-based development, piloting, and ongoing delivery of community-fitting events and programs involving multi-generational family interactions that promote and enrich children’s language development (e.g., story-telling circles, family play and drama, singing groups);
- community- and consortium-based production of culturally-specific language resources for teaching heritage languages (e.g., video- and audio- recordings of local stories and songs, books, posters);
- community-university research partnerships to develop culturally appropriate language assessment tools, establish community, regional and national data bases for monitoring progress, evaluate pilot training programs, workshops, and early childhood program strategies and to disseminate knowledge about new and promising practices.

Investments for these initiatives would engender the emergence of a new field of knowledge and practice driven by Aboriginal community agendas and organizations, dedicated to improving Aboriginal children's language environments and developmental outcomes. Partnerships across Aboriginal organizations, Centres of Excellence, post-secondary institutions, and across sectors including health, education, and childcare would support this endeavour. Effective practice in Aboriginal Early Language Facilitation and Support would:

- promote cultural continuity;
- help to retain endangered heritage languages;
- counteract prevalent misconstructions of cultural and language differences as developmental and parenting deficits;
- reduce the social exclusion of Aboriginal children from the fabric of Canadian society.

An Aboriginal early language initiative using a community development approach would strengthen the capacities of Aboriginal families and communities to facilitate and support their children's optimal development and opportunities for success.

## **1 SCOPE OF THIS PAPER**

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This ‘Concept Discussion Paper’ has been prepared as a focal point for dialogue and development of a national strategy for strengthening the capacity of Aboriginal communities and organizations to support Aboriginal young children’s language development. Over the past five years, there has been an increasingly vocal call from the emerging field of Aboriginal infant and early childhood development for a planned and supported strategy to support Aboriginal children’s language development – including heritage language learning - and to identify and address speech-language difficulties in the early years, before children start school. This paper was requested by Aboriginal Head Start in Urban and Northern Communities of the Public Health Agency of Canada in order to explore ways to respond to this call.

### **Goal**

The goal towards which this Concept Discussion Paper is directed is to begin an exploration of needs and possibilities for a national initiative that will effectively strengthen Aboriginal capacity to support Aboriginal young children’s language development.

### **Needs assessment**

This paper establishes the need for a significant, federally supported, community-driven strategy by reviewing available evidence from:

- the demography of Aboriginal peoples;
- perspectives of colleagues in the field of Aboriginal Early Childhood Care and Development who were asked to contribute evidence of need;
- findings of a recent study of Speech Language Pathologists’ experiences serving Aboriginal children;
- community-specific, anecdotal reports by Aboriginal advisors, program managers, and front-line practitioners at early childhood conferences and training workshops (e.g., Aboriginal Head Start).



## **Designating a distinctive field of policy, knowledge and practice**

►► As a first step, a way of referring to this field of inquiry and potential training and practice is needed that:

- identifies it as focusing on young Aboriginal children and on any language, including a heritage, Aboriginal language, English, French or another language or dialect;
- avoids references to deficits (e.g., disorders, pathology);
- carries a positive, pro-active message; and
- emphasizes a supportive role, rather than an expert or specialist role or an adjunct, assistant, or para-professional, second-in-command role.

►► The term ‘**Aboriginal Early Language Facilitation and Support**’ (AELFS) is suggested as a title to designate this field of training, knowledge and practice.

## **Consultation**

This Concept Discussion Paper has drawn upon consultations with a number of Aboriginal and non-Aboriginal advisors, educators, specialists, and front-line practitioners who have worked extensively in the area of Aboriginal young children’s language development or closely related fields. An overwhelming positive response was received from nearly all those who were asked to comment on and contribute to the ideas in this paper (89% response over one month) – just one indication of the sense of urgency that is felt about this topic across Canada. Virtually all contributors affirmed that a national strategy would be timely and would have the potential to make major contributions to:

- Aboriginal human resource development;
- Aboriginal community-based program implementation; and
- Aboriginal young children’s optimal development, school readiness and achievement.

►► The brief time frame for completion of the Concept Discussion Paper precluded the extensive consultation that would be a first step to formulating a comprehensive national strategy for Aboriginal Early Language Facilitation and Support.

## 2 SAY WHAT? DEFINITION OF KEY TERMS

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For the purpose of this paper, key terms have been defined as follows.

<b>‘Aboriginal people in Canada’</b>	Refers to approximately 1,321,000 First Nations, Inuit, and Métis descendants of original inhabitants of the land now called Canada who identify as Aboriginal.
<b>Community</b>	Used here to refer both to geographic communities and to community of people served, for instance, by community-centres or child and family service agencies.
<b>Primary caregivers</b>	This term is used more often than ‘parents’ to expand the scope of consideration and practice beyond biological or adoptive ‘parents.’ In Aboriginal cultures and communities, primary care for a child may be the responsibility of a parent, grand-parent, auntie, uncle, older sibling, and others. It is suggested that practitioners encompass this variety of caregivers in communications and programs.
<b>‘Language’</b>	Systems of communication comprised of elements (e.g., sounds, words) and rules for combining these elements (i.e., grammar).
<b>Dialect</b>	A language may be a group of slightly different systems, called dialects. English, French, and Aboriginal languages include several dialects (or varieties).
<b>Bi/multi-lingualism</b>	Generally refers to a capacity to communicate proficiently using more than one language system.
<b>Language development</b>	The emergence and elaboration of expressive and receptive speech and language.
<b>Language facilitation</b>	Active strategies to promote and enrich language development and use.
<b>Language supports</b>	Planned strategies to create contextual conditions or specific forms of help to remediate or reduce language communication difficulties and their secondary consequences, and to prevent regression or suppression of the development and use of language.
<b>Early Childhood Care and Development</b>	Includes a broad range of programs and services available to children and families to promote their health and well-being. ECCD may include infant development programs, aboriginal

head start, child care, family day homes, pre-school, language immersion ‘nests’, child development programs, outreach, family resources centres, parent-tot programs, literacy programs, and other types of programs to promote development from 0 to 5 years.

**Early intervention**

In work with infants and young children, early intervention typically refers to planned strategies delivered, sometimes in collaboration with caregivers, by speech-language pathologists, occupational therapists, physiotherapists, and other ‘expert’ service providers. Early intervention includes strategies introduced into the life and/or ecology of a child from 0 to 60 months of age in order to produce improved pace or outcomes of development and /or to improve the contexts of development.

**Special needs**

Areas of difficulty or delayed development of competencies well beyond age norms, usually identified through diagnostic assessment by a professional.

**Abbreviations used in this report:**

<b>ECCD</b>	Early Childhood Care and Development
<b>ECE</b>	Early Childhood Education
<b>IDP</b>	Infant Development Practitioner
<b>AIECCDP</b>	Aboriginal Infant and Early Childhood Care and Development Program
<b>SLP</b>	Speech-Language Pathologist
<b>CDA</b>	Communicative Disorders Assistant
<b>AELFS</b>	Aboriginal Early Language Facilitation and Support
<b>CASLPA</b>	Canadian Association of Speech-Language Pathologists and Audiologists

►► A national working group should establish a common terminology for communicating about key concepts, domains of development, professional service fields, and the emerging field of practice focused on Aboriginal children’s language development.

### **3 DEMOGRAPHIC PROFILE OF ABORIGINAL CHILDREN IN CANADA**

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The demography of Aboriginal children in Canada is one kind of data base for inferring the potential size of the 'need' for a language focused program of supports to Aboriginal children and families. As discussed subsequently, a population-based approach may be a preferred strategy, rather than an approach targeted at children designated with 'special needs.' There is no known provincial or national data base indicating the prevalence of speech-language difficulties or other 'special needs' among Aboriginal children.

#### **Aboriginal population growth**

- Approximately one million people in Canada identified as Aboriginal in the 2001 census conducted by Statistics Canada: North American Indian, Métis or Inuit (Statistics Canada, 2001).
- Aboriginal peoples represent approximately 3 % of the population in Canada.
- The population of Aboriginal people is growing at a rapid rate.
  - The Aboriginal birth rate is 1.5 times that of the birth rate of non-Aboriginal peoples
  - The proportion of Aboriginal peoples under 5 years of age is approximately 70% greater compared to the proportion of non-Aboriginal youngsters.
- Overall, the population of Aboriginal peoples is younger than other Canadians by about 10 years.
- Inuit have the youngest age distribution among population groups in Canada.

#### **Family life**

- While some Aboriginal families are thriving, there are a large number of Aboriginal families who are struggling. Basic challenges evidenced in the 2001 census include sub-standard housing, low levels of education, low employment, poverty, and geographic isolation, resulting in lack of access to services.
- Overall, 52% of Aboriginal children live below the poverty line.
- There are more adolescent mothers in the Aboriginal population.
- More Aboriginal mothers than non-Aboriginal mothers are likely to be single.
- Over 1000 Aboriginal children live in families headed by a single father.
- Among urban-dwelling Aboriginal children, 50% live in single-parent homes, compared to 17% of non-Aboriginal children living in single-parent homes.
- In some provinces, Aboriginal children are greatly over-represented among children in government care.

- For example, in B.C., Aboriginal children are seven times more likely to be in government care compared to non-Aboriginal children. Aboriginal children in B.C. usually make up 45% of the number of children in government care, while they comprise only 8% of the total population of children in B.C.

### **Geographic dispersion**

- Half of Canada's Aboriginal peoples live in urban areas, while half live in rural areas, including about 38% on reserves.
- Aboriginal people in rural areas live in over 800 communities, including 77% with populations under 1000 people.

### **Childhood language**

The 2001 census showed the following distribution of first language spoken by Aboriginal children 0-4 years of age:

- 89.6% English
- 4.7% French
- .6% English and French
- 5.1% Neither English nor French
- The home language of Aboriginal children 0-4 years of age was:
- 82.9% English
- 4.4% French
- 0.3% English and French
- 12.4% Aboriginal language
- 50% of Inuit participating in the 2001 census reported an Aboriginal home language.

### **Health and services**

There have been important strides in Aboriginal health over the past two decades, such as marked decrease in infant mortality.

Significant problems in the health and development of Aboriginal children persist. Many developmental challenges are understood to reflect the cumulative effects of oppressive colonial policies, persistent racism, and pervasive poverty. The First Nations and Inuit Health Branch regularly reports on indicators of First Nations and Inuit children's health and social well-being that reflect these effects, such as:

- higher incidence of acute illnesses resulting in permanent disabilities, such as hearing impairment
- chronic illnesses such as early onset diabetes
- higher rates of dental surgeries
- higher rates of respiratory illnesses
- higher rates of iron deficiency.

Aboriginal youth have higher rates of suicide attempts and deaths due to suicide and violent assault.

Life expectancy of Aboriginal peoples, though improving, is lower than that of non-Aboriginal peoples: 7.4 years less for Aboriginal males and 5.2 years less for Aboriginal females.

There are long-standing disparities between Aboriginal and non-Aboriginal children in overall health and access to health services, particularly for First Nations children living on-reserve and for children in remote and isolated communities.

►► A strategy for Aboriginal Early Language Development and Supports should take advantage of the planned post-censal **Aboriginal Children's Survey** conducted by **Statistics Canada** in 2006 to obtain basic data about Aboriginal children's home language use, language development, and referrals and services for language difficulties.

#### 4 THE IMPORTANCE OF LANGUAGE DEVELOPMENT WITHIN AN ABORIGINAL CHILDREN'S AGENDA

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Aboriginal communities in Canada are prioritizing quality infant and early childhood care and development programs as a way to ensure safe, stimulating environments that will promote:

- optimal child development;
- pride and competence in traditional culture and language; and
- a strong foundation for psychosocial well-being and economic prosperity.

Aboriginal leaders are seeking ways to ensure that their own goals for their children's development are what drives government and agency agendas and determines the allocation of resources for Aboriginal children. This is true for child development services in general, and in relation to Aboriginal children's language development in particular. The First Nations perspective below reflects this goal.

*“Early childhood education provides First Nations children with a head start in acquiring preschool cognitive and motor skills. Early childhood education is needed to support the development of quality education programs and the economic development activities of First Nations communities. These programs need to incorporate local culture and use Aboriginal languages to ensure that young people will be able to fully participate in the culture of the community. The Elders of the community can contribute valuable expertise to these programs. Funding is required for First Nations governments and organizations to establish, staff, and operate early childhood education programs.”*

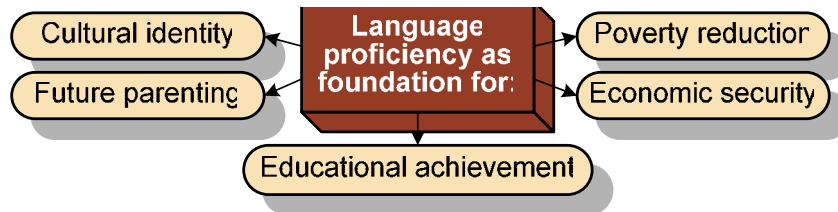
Assembly of First Nations (1998), National Indian Brotherhood,  
Tradition and Education: Towards a Vision of Our Future.

Within the emerging field of Aboriginal Infant and Early Childhood Care and Development, there is growing recognition of the importance of early language development. Leaders are looking for resources to support parents, early childhood care and development practitioners, and service specialists in creating language rich environments - including heritage language - and promoting all children's language development, right from birth. There is also concern to identify atypical speech-language development and to enable parents, other primary caregivers, and community-based service agencies to intervene early with culturally and linguistically appropriate services when a child appears to have speech-language difficulties.

## Why is early language development a priority within an Aboriginal children's agenda?

*Figure 1* shows the foundational role that language skills play in nearly all developmental outcomes.

**Figure 1**  
The foundational role of language proficiency.



Jessica Ball, 2005

### 1. The sensitive early years

A basic assumption informing the development of this Concept Discussion Paper is that early childhood, from 0 to 60 months of age, is the most sensitive time for language development and the most opportune time to promote language learning and to intervene to remediate difficulties. While research shows that communication capacities continue to develop during middle childhood and beyond, and older children can benefit from language promotion and early intervention programs, the most advantageous time to stimulate language development starts at birth.

### 2. The pivotal role of language in development

Language is central to how children gain access to cultural knowledge and learn to participate and grow within their cultures (Blank et al., 1978; Heath, 1983). In mainstream child development research, the importance of language development for supporting intellectual and social development in the preschool years and academic achievement is well established. Studies show how children use language to improve memory (Myers & Permuter, 1978), guide perception (Stiles-Davis, Tada, & Whipple, 1990), build number concepts (Saxe, 1979), solve problems (Kohlberg, Yaeger, & Hjertholm, 1968) and discover social categories (Rice & Kemper, 1984).



Language proficiency in childhood has been shown to be the best predictor of future cognitive performance in children (Capute, 1987). Most researchers today view reading and writing, including spelling, as applications of language skills that rely on an oral language basis (Brady & Shankweiler, 1991; Catts & Kamhi, 1999; Gerber, 1993; Golsworthy, 1996; Kavanaugh & Mattingly, 1972; Paul 2001; Snowling & Stackhouse, 1996; Velutino, 1977). Decreased language ability has been identified as an important factor leading to lower academic achievement of children from lower socio-economic families compared to children from middle and higher socio-economic families (Schuelle, 2001).

### **3. The language-thought-culture nexus**

Language, thought, and culture are inextricably bound. Language and the way we use it are passed down through previous generations within our respective cultural communities. Linguists agree that language shapes the way people perceive the world as well as how people describe it. Much of our thinking is done in words and communicated to others using language. Culture is embodied, in part, in the words we use and how we use them (Bruner, 1975).

Aboriginal patterns and values relating to language development and use (e.g., Aboriginal home language, Aboriginal dialect, variations of English or French) are at the heart of how Aboriginal peoples embody cultural values. As the Royal Commission on Aboriginal People (1996) explained, fluent speakers of Aboriginal languages believe that without their languages, their cultures will be lost, because it is impossible to translate the deeper meanings of words and concepts into the languages of other cultures. This concern has frequently been expressed by First Nations Elders, observing that younger generations know little of their heritage language, other than perhaps a few ceremonial prayers and songs. Promoting Aboriginal children's language development is one powerful way to engender their cultural identity, cultural knowledge, and connectedness with their cultural community.

Different cultures hold widely different values and beliefs on matters of care giving, language socialization, and language use. For example, there are wide cultural variations in such social practices such as who talks to young children, about what topics and in what contexts (Schieffelin & Eisenberg, 1984), interaction rules around turn-taking, the value of talk, how status is handled in interactions, beliefs about interpretations of intentionality and beliefs about teaching language (van Kleeck, 1994). To illustrate, among Athabascans, researchers found that *“children who do not begin to speak until five years or older are interpreted as growing up respectfully, not as being language delayed”* (Scollon & Scollon, 1981, p. 134). In a study involving Inuit children, Crago told an Inuit teacher about a young Inuit boy who was very verbal and who she thought was very bright. The teacher replied, *“Do you think he might have a learning problem? Some of these children who do not have such high intelligence have*

*trouble stopping themselves. They don't know when to stop talking*" (Crago 1990a, p. 80).

Culturally appropriate practice extends to the facilitation of language development, education and support for parents about how to stimulate language development at home, and interventions to remediate apparent atypical features of children's speech and language. Nearly all prescriptions for language facilitation and intervention derived from so-called 'best practices' or 'evidence-based practices' have been developed and proven effective with French and English speaking children and families of European-heritage. These models could work in unexpected and undesirable ways with Aboriginal children and families if they are not congruent with Aboriginal caregivers' goals for their youngsters. Characteristics of Aboriginal children's speech and their use of language in different contexts could be a result of purposeful language socialization practices in their community. Supporting early language development of Aboriginal children requires approaches that reflect unique cultural values, beliefs, and experiences of Aboriginal communities. Yet, this does not occur for many Aboriginal children.

►► Support is needed for the emergence of a new field of social policy, knowledge and practice recognizing culturally-based care giving practices, goals for children's development, and the pragmatics of language in various Aboriginal groups in Canada.

#### **4. Early identification using valid assessment and diagnostic approaches**

There is a growing perception among Aboriginal parents and practitioners that assessments and interventions that have been developed and validated with a European-heritage orientation are generally not appropriate or helpful for Aboriginal children. In a current study exploring child development assessment practices in Aboriginal communities (Ball, in progress, [www.ecdip.org/child/index/htm](http://www.ecdip.org/child/index/htm)), many Aboriginal parents and practitioners have expressed frustration about culturally inappropriate assessments that labelled their children deviant or deficient, when it seemed to these onlookers that the assessment process, tool, or norms were culturally biased and inappropriate. The very concept of "testing" and ranking the developmental levels of children, as practised in many methods of child development assessment, is offensive to many Aboriginal parents. Assessment may be viewed as discordant with cultural values that affirm the 'gifts' of each child, acceptance of children's differences, and the wisdom of waiting until children are older before making attributions about them.

Aboriginal leaders and agencies across Canada have argued that culturally inappropriate education, specialist services, and assessment procedures, as well as lack of services, frequently result in serious negative consequences for Aboriginal children (Assembly of Manitoba Chiefs, 1997; B.C. Aboriginal Network for Disabilities Society 1996; Canadian Centre for Justice 2001; English, 1996; First Rider & Scout, 1996; Royal Commission on Aboriginal Peoples 1996). Problems include:

- over- and under-recognition of children with developmental challenges;
- services directed at a misinterpretation of the primary problem;
- services introduced too late;
- undermining of heritage language and cultural goals for development through an over-valuing of standard urban English and of monolingualism;
- cultural alienation;
- low levels of school readiness; and
- high rates of placement in non-Aboriginal foster care.

►► Investments in research and documentation of promising practices in Aboriginal Early Language Facilitation and Support are needed to explore questions such as:

- What criteria and assessment strategies can differentiate between speech-language disorders and sociolinguistically normative characteristics of communication in Aboriginal families and communities?
- How can parents, childcare practitioners, and specialists belonging to diverse cultures work together to create needed and culturally appropriate, socially accountable strategies and supports for Aboriginal early language development within the context of the ‘whole child’? What do we need to know as starting points, or as guiding principles?

## 5. School readiness

Canadian studies have shown that, at school-entry, group differences can already be found in school readiness and achievement, with children who are higher socio-economic class and who are not Aboriginal possessing more of the ‘right stuff’ to do well in the mainstream. These findings have been used to argue that in order to reduce achievement differences between social groups; we need to secure optimal developmental conditions for all children before they reach school age.

It is well known that success in school requires vast experience and proficiency in oral language. Poor language development in pre-school years is a strong predictor of school failure. Research indicates that early childhood care and education programs that effectively facilitate language development have the potential to significantly reduce later school failure (Campbell & Ramey, 1994; Wong & Snow, 2000). The distribution of resources for Aboriginal early childhood care and development programs in many provinces and territories is intended to address inequalities in educational attainment among Aboriginal children compared to non-Aboriginal children.

Educational difficulties faced by Aboriginal children are sometimes linked to cultural and linguistic differences between the home and school. A disturbing example is in Labrador, where 35 per cent of Innu children never attend school, partly due to being plunged into an alien cultural and language (Philpott, 2005). For Aboriginal children

whose home language is either a non-standard variant of English or French, or another language altogether, some kind of bridging or transition support is needed to prepare them to succeed in school (Malcolm et al 1999, Philpott, 2005; Walton, 1993).

Schools also need help to become prepared to receive Aboriginal children whose home language is not the language of instruction. This is also important for children whose home culture may have values about talk or language usage that do not match the generalized mainstream language values embedded within most public schooling curricula (Walton, 1993; Wilgosh & Mulcahy 1993). For example, children whose culture values listening, observing and doing as a major mode of learning are likely to be marginalized in a school or program setting that places a high value on verbal explanations and oral participation.

In Australia, Aboriginal English has been described as the main language of 80% of Aboriginal Australians (Speech Pathology Australia, Fact Sheet 2.4). Aboriginal English dialects differ from 'standard' (urban school) English in their content, form and use (Ball & Bernhard, in progress, [www.ecdip.org/dialect/index/htm](http://www.ecdip.org/dialect/index/htm); Malcolm, Haig, et al., 1999). In a recent survey in Canada, Speech-Language Pathologists with experience serving Aboriginal children observed many of the same characteristics of among Aboriginal children as have been observed among speakers of Aboriginal English in Australia (Ball & Lewis, 2004). These Speech-Language Pathologists pointed out that understanding trends among Aboriginal peoples with regards to the role of language and the value of talk can shed light on cultural bias in mainstream SLP practice, early childhood education, and in public schooling. Cultural bias and lack of appreciation of cultural differences have contributed to the sense of risk that some Aboriginal parents perceive in accessing preschool programs, mainstream education, school-based speech-language development and early intervention programs, and other programs for their children.

## **6. Social exclusion**

Social exclusion is a result of many interacting forces and it is manifested in multiple, inter-linked problems. Integrative theories of children's development (e.g., Coll, Lamberty, et al., 1996) have helped us to understand the ecology of disadvantage better than ever before. In addition to causal factors including racism, discrimination, and poverty, social exclusion is also a result of low levels of attainment in specific areas of development including speech, language, and literacy. Higher levels of language proficiency can increase the probability of school success, opportunities for employment, and economic security (Bird & Akerman, 2005).

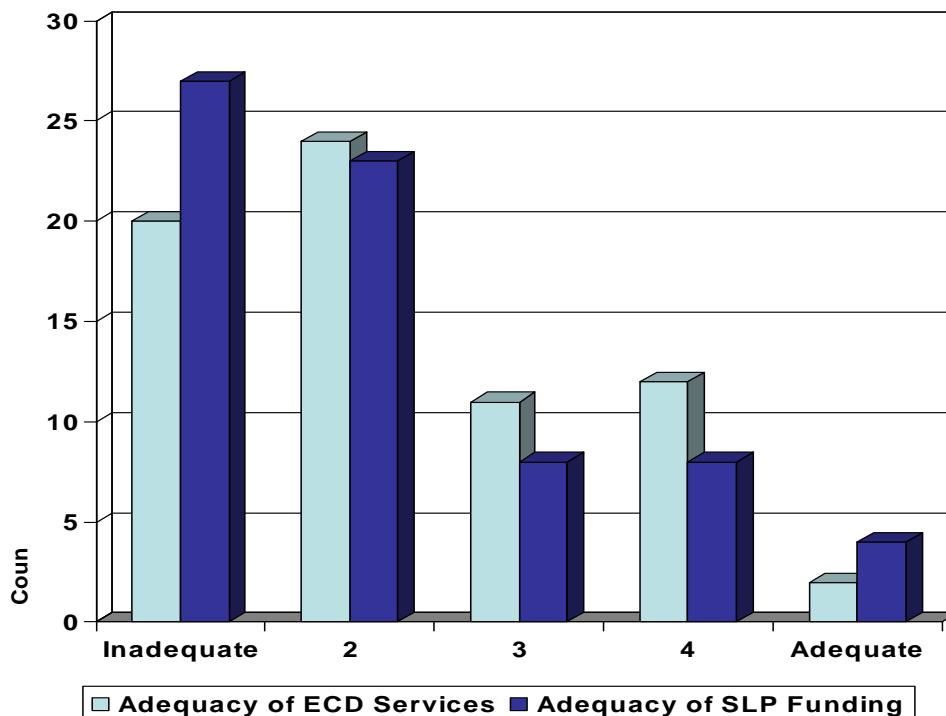
Tackling social exclusion should be a priority of the federal government. Ensuring Aboriginal children's social inclusion will require a large-scale and sustained effort on many fronts. Providing strategic resources and supports for them to maximize their full potential for language is one important component of a multi-pronged effort.

## 7. Equitable access, including rural, remote and northern communities

A basic value in Canada is that, regardless of where children live in this country, and regardless of their ethnicity, programs for promoting their optimal development should be accessible, available, and linguistically and culturally appropriate to them (Canadian Centre for Justice, 2001). It is widely acknowledged that services to support optimal child development are least accessible to children and families living in rural, remote and northern communities. It is generally understood that a significant proportion of Aboriginal infants and young children have special needs. Many programs for children with special needs are available in Canada, aimed at decreasing the risk for speech-language disorders, associated mental health problems, school failure, learning disabilities and other developmental difficulties. Few of these programs have focused on Aboriginal children with special needs living in rural and remote communities.

In a survey of Speech-Language Pathologists from across Canada who have experience serving Aboriginal children and families, respondents overwhelmingly indicated that funding provision for early childhood development services and for Speech-Language Pathology services are 'inadequate' for Aboriginal children and families in the settings that they have observed (see Table 1).

**Table 1**  
**Adequacy of ECD services and SLP funding provision to Aboriginal communities perceived by 70 Speech-Language Pathologists serving Aboriginal children and families**  
(source: Ball & Lewis, 2004)



Similarly, contributors to this Concept Discussion Paper also emphasized that funding for infant development and early childhood care and development programs is inadequate. Many contributors observed that some communities, especially in rural areas, do not have any child care or development programs or family support workers. Aboriginal Head Start is widely identified as the early childhood program most wanted by communities that do not have the program. Speech-Language Pathology services are non-existent or seriously under-funded in many communities, especially in First Nations on reserve, because this is a non-insured benefit.

The Romanow Commission (2002) emphasizes that service needs and models of service delivery for rural, northern and Aboriginal communities need to be conceptualized differently than for other populations. Service strategies need to take into account geographic and social circumstances, cultural factors, distance from specialists and acute care services, and different kinds of challenges as well as resources of rural, northern, and Aboriginal communities. The Romanow Report urges that flexible, long-term funding be provided to these communities to innovate and evaluate creative new strategies that hold promise for equivalency of supports and services in the urban south. Similarly, the Canadian Centre of Excellence for Children and Adolescents with Special Needs urges exploration of the potential of new and emerging technologies, the efficacy of traditional approaches to dealing with challenges in children's development, and new areas of training in order to define a new service environment for Aboriginal children and children in rural and remote communities in Canada.

## **Conclusion**

Significant gains have been made in the survival, growth and development of some populations of Aboriginal children in recent years. Yet, there remain significant gaps in health and well-being of Aboriginal children as whole. School readiness and educational achievement continue to present serious challenges, particularly in rural, remote and northern communities. The decline of heritage language learning among younger generations is a serious concern from the points of view of many Canadians, especially in the north.

►► A dedicated strategy focused on improving home and community environments and programs to support Aboriginal early language development can contribute to Aboriginal children's cognitive, social, emotional and behavioural development and their subsequent success in school. Special consideration must be given to Aboriginal children in rural, remote and northern communities, where reliance upon specialists is not effective as a primary strategy. Canadian values of social justice and equitable opportunities for success call for funding to pilot and test many new approaches.

## 5 VIEWS FROM THE FIELD

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To explore sources of evidence, level of support, and ideas for development of a national strategy to promote language development among Aboriginal infants and young children, a set of questions was sent by the author to a partial list of known practitioners, educators and investigators in Aboriginal Infant and Early Childhood Care and Development.

Circulation of the question set was intended to obtain an initial glimpse of what some colleagues in our field think about the need and direction for a possible initiative. It was not intended to be a comprehensive survey of all the many individuals, groups, organizations and educational institutions in every province and territory that are involved in this field. Many contributors identified other colleagues who, in subsequent consultation and planning exercises, would have valuable contributions based on their positions in government, relevant field experience, or roles at post-secondary institutions that could develop or deliver training.

►► A first step in developing a national strategy would be to gather together a national working group to further develop the concept and approaches to Aboriginal Early Language Facilitation and Supports.

### **Discussion Questions and Response Summary (39 Respondents – among 44 sent)**

#### **Strengthening capacity to support Aboriginal infants' and young children's language development**

- What is the need?
- What perspectives and methodologies are helpful in thinking about how to meet the need?
- What would be the goals of a national training initiative?
- What would training involve?
- What competencies should be developed?
- Where would it happen?

*These broad questions can begin a dialogue about capacity building in early language development and support for Aboriginal children, families and communities.*

*A **Concept Discussion Paper** on this topic is being developed this month. It is intended as a focus to start off further discussion. It will not be a proposal. Rather, it will begin to bring together evidence of the need for more programmatic effort and training to support Aboriginal children's language development, and it will present a number of possibilities for what strategies could be undertaken.*

***Your experience and ideas are sought** at this very initial step of exploring possibilities.*

*It would be appreciated if you would answer some or all of the questions posed here with as much detail as you wish. Add whatever you think may be important anywhere it seems to fit or at the end.*

***Acknowledgement.** If you feel comfortable being acknowledged by name for your input to this initial exploration, there is a place to indicate that at the end.*



## 1. Need.

*Describe what you think is the current situation with regards to support for language development of Aboriginal infants and young children. What are strengths to build upon? What is lacking, or what are the specific challenges in regards to 'language' in the community/ communities / programs you are involved with?*

### **Strengths**

Respondents identified the following strengths:

- Commitment of Aboriginal leadership to make positive changes.
- Commitment of Aboriginal communities to serve children and families.
- Commitment of community-based agencies to be creative in delivery of services.
- People/ programs/ sectors willing to work together in Aboriginal communities.
- Existing infrastructure in many communities, including Aboriginal Head Start, Aboriginal IDP, Aboriginal ECD, CAPC and CPNP, where staff are eager and well positioned to play roles with parents, other caregivers, and children in language facilitation and support.
- Strong motivation of ECE staff to learn more, and especially to be more involved in language development activities.
- Strong desire of parents to 'do the best' for their children.
- Elders' strong interest in young children's development.
- Intergenerational family involvement.
- For the North, there is strong interest in heritage language learning, some strong Inuktitut speakers, some successful models, some funding, and impending legislation to support Inuktitut reclamation.
- A possible 'strength' (or resource that could be harnessed) is the availability of television, and it was noted by 2 respondents involved as consultants in remote communities that parents rely on TV to teach their children English.

There was unanimous agreement that there is a 'high' need and that there are serious deficiencies in supports, services, and the language environment and also, in some instances where residential school has taken a toll on parenting, in the socio-emotional environment for Aboriginal infants and young children.

### **Lacking:**

Respondent's observations of what is lacking focused on:

- services, including infant development and early childhood programs and early intervention services, especially on-reserve
- coordinated, coherent, culturally appropriate approach

- training in language facilitation for staff who are caring for children
- language enhancement resources, especially in heritage language
- language proficiency among parents and also among those caring for children in programs, not only in the heritage language, but in any language.

#### Lack of services.

Nearly all respondents noted MANY services lacking, especially on-reserve, for example:

*"Complete absence of early language programs," "absence of child care programs or adequate child care spaces," attenuated SLP services (e.g., "3 visits per year in our isolated communities") and long waiting lists (e.g., "up to one year for direct assessment or therapy through the local health unit's preschool communication services").*

One respondent cited examples of children whose caregivers bring them off-reserve to access programs, adding: *"this does hinders carry over into every day situations and limits access to those who can/will travel off-reserve."*

One respondent noted that some children living on-reserve attend child development centres or pre-schools off-reserve where they may be assessed as requiring early intervention but there are no programs offered on reserve. She noted that this often prevents or limits parents' involvement in programs.

One respondent noted that the public school district serving children on-reserve in her region bills the bands astronomically for a seemingly unlimited amount of (often ineffective and disjointed) SLP services to large numbers of Aboriginal children attending the public schools. She suggested that these services should be contracted and supervised by the band, and alternatives should be explored involving a family-centred approach and exploring opportunities for coordinated, culturally appropriate services.

#### Lack of coherence of services.

Three respondents offered detailed accounts illustrating extreme lack of coherence of assessment and services, combined with interventions that were both culturally inappropriate (e.g., the Hanen program "It Takes Two To Talk" was cited in two of these illustrations) and offered in a way that was inaccessible (requiring transportation, offered in the evening when parents and children need to be at home) and culturally unsafe (e.g., offered as part of mainstream services primarily for non-Aboriginal families). These illustrations pointed to a need for more team work, coordination, a 'case management' approach, and sensitivity to reaching parents and children where they are. As one respondent concluded: *"These*

*children/families needed a different kind of support for language development than what was available or accessible."*

Lack of skilled Aboriginal practitioners.

Many respondents noted 'huge shortage' of skilled Aboriginal practitioners in Infant Development, Early Childhood Care and Development, support for children with special needs, and therapies.

Lack of awareness.

One respondent noted: "*Lack of awareness of the powerful role of families in child development, particularly social, emotional, language and cognition in the first years of life.*"

Lack of resources.

Lack of resources such as books, videos, CDs and materials in the heritage language was emphasized by almost half of respondents, including all those from areas where Inuktitut is the first language.

Lack of language rich environment.

Some respondents noted that parents need language programs to enhance their own language proficiency because:

- their heritage language has been lost or is weak due to assimilation policies
- they are not proficient in English or French
- they are not proficient in any language
- they have a language variety or dialect and need to know about code switching so they can help their children learn code switching for school readiness

A serious concern with apparent 'bi-illiteracy' or semilingualism (i.e., apparent lack of fluency in ANY language among parents) was described by a few respondents, especially those speaking to needs in the North. In these communities, it was described how the heritage language is deteriorating, with few speakers using a fully articulated, elaborated code of the heritage language, while few people in the communities are fluent in either English or French. As a result, many parents do not speak either their heritage language or a colonial language fluently, and are therefore not able to support language fluency in their children. Many are illiterate in either language, and cannot read to their children or support their children's early literacy.

One respondent from the North suggested that attention should be paid to BICS (basic interpersonal communicative skills) and CALP (cognitive academic language proficiency) in terms of implications for heritage language revitalization,

understanding and support for children's language development. (The social construction of semilingualism is challenging and calls attention to a critical issue in understanding the ecologies of some Aboriginal children's language development - see 'key references' in this document.)

A somewhat similar challenge was noted by 2 respondents working in small rural communities in the south; namely, the exclusive reliance on 'restricted code' with heavy reliance on non-verbal gestures, and an overall paucity of language mediated social interaction in these small communities where everyone knows everyone else and share a common context and many events. As a result, children are exposed only to an abbreviated dialect of their language (whether this is English, French, or a heritage language)

*One respondent noted: "For whatever reasons, particularly in communities on reserve, children do not necessarily have the everyday modeling and expansion required to facilitate normal speech and language development, or to reach their potential."*

Further discussion of issues pertaining to assessment and evidence is provided subsequently.

## 2. Indications of need in the area of 'language' in the early years.

*Please provide any **evidence** you know of that points to the need for more resources to support Aboriginal young children's language development.  
e.g., rate of referrals or early identification within a program or community,  
STORIES of children/families who needed a different kind of support for language development than what was available or accessible, reports of Aboriginal program staff relevant to this issue....etc.*

**All respondents stated that there is a 'huge' 'significant' or 'immediate' need to address and improve Aboriginal children's language development. Many added that this is the 'number 1 priority/need' for Aboriginal children. Expressions underscoring the sense of urgency were varied but unanimous among contributors.**

Some respondents pointed to the trajectories of Aboriginal children once they reach school-age. For example, *"Aboriginal children are scoring poorly on standardized literacy tests, which can be taken as one indicator of poor language skill development."* *"Aboriginal children continue to have high placement in learning resource programs and special needs classes, low achievement, and high drop out, all of which is understood to reflect the conditions that result in poor communication skills."*

Lori Davis Hill (Iroquois (Six Nations) SLP) reported that in a recent Provincial assessment of children at Six Nations, many children scored 2 or 3 grades below age level and many children's tests were 'unscorable' due to written language and literacy deficits.

One respondent reported a study that had been conducted by Dr. Art More (UBC Professor Emeritus) for B.C. First Nations Education Steering Committee, finding that there were 'developmental concerns' about 30% of children in band schools, including a high prevalence of learning disabilities including many language-based learning disabilities.

Many respondents noted that Aboriginal children in their community or the region they serve are growing up without much language stimulation and with poor speakers of any language, and as a result are only partially fluent in any language by the time they enter school.

Respondents from the North unanimously noted the rapid decline of heritage language proficiency among children and their parents.

Many respondents noted that there is no national or regional data base measuring need.

One respondent noted that an 'Early Development Inventory' in B.C. has recently shown that teachers perceive more Aboriginal children on the 'low' end of scales thought to measure language and communication skills.

Most respondents noted inappropriate/invalid assessment practices as reasons for an inadequate evidence base.

Most respondents noted lack of screening and assessment services as a reason for lack of a 'hard data' evidence base.

Some respondents noted that low level of referrals was a result of low level of skilled child care and other services that would recognize an emerging language difficulty.

Two respondents noted that the use of an English or French variety or dialect resulted in over-referral and, when therapy is actually offered, over-correction.

It seems that only a few communities have records 'objectively' indicating 'need.' In all of these communities, respondents reported that at least 50% of children screened have been identified as requiring some further assessment or early intervention, primarily expressive and articulation issues, compared to 5 - 10% of non-Aboriginal children referred from a community or school.

One respondent noted: *"The rate of referrals from early childhood programs to speech-language programs in the non-Aboriginal population is typically 10%. It is over 50% for the Aboriginal population in the catchment area that I serve."* This high rate of referral has frequently been cited by Aboriginal front-line practitioners and managers at Aboriginal ECD conferences in the recent years.

Some respondents noted high prevalence of otitis media and other hearing problems as contributing to/confounding language difficulties.

Many respondents noted that when assessments have been done, this has served little purpose because of lack of specialist services to follow up with interventions, inappropriate interventions, lack of involvement of parents in interventions, and need for more community-based capacity to identify children with difficulties and

provide basic language facilitation and support 'on site' (e.g., at home and in child care programs).

Some respondents noted that expressions of need by ECE staff for more training in language learning and facilitation can be seen as pointing to an area of need among children in their care.

Further discussion of assessment and evidence is provided subsequently.

**3. Capacity building goal.**

*If there was an initiative to strengthen community level capacity to support language development in the early years, what would be the goals of the initiative? That is, what kind of capacity should the training aim to create?*

<i>Respondents' Priority</i>	<i>Respondents' Recommendation</i>
1	More training for child care practitioners on how to support early language development
1	Community members trained as specialists in early language support
2	More community members trained to be child care staff
3	More Aboriginal people becoming certified Speech-Language Pathologists
	<i>Other: SLPs need to be educated about how to be sensitive and useful to Aboriginal peoples</i>
	<i>Other: Elders also need to be trained in early language support</i>
	<i>More ECE's and community members need training to support early development of First Nations and Inuktitut languages</i>



**4. Do you think a new training initiative in the language area should involve:**

<i>Respondents' Priority</i>	<i>Respondents' Recommendation</i>
1	Workshops for anyone, not at a post-secondary level
1	College courses that are accredited (i.e., shown on a college transcript)
1	University courses that are accredited (i.e., shown on a university transcript)
2	Workshops for program staff, not at a post-secondary level
3	Graduate level (i.e., after a degree)

**5. Competencies. What should people who take the training learn how to do? That is, what competencies would be developed?**

*Understanding processes of normal language acquisition and approaches to facilitating language development in children's programs.*

*How to find out how Elders view community development, child development and language development.*

*How to involve Elders in work with children to support their language development.*

*How to implement concrete strategies for speech and language stimulation.*

*How to identify need for diagnostic assessment and treatment by an SLP.*

*How to discover what adults are doing to stimulate language development, and their own 'theories' for what they are doing.*

*How to work with adults to help them stimulate language development.*

*Experiential and constructivist approaches to language facilitation that are culturally grounded and context-relevant.*

*How to provide consultation.*

*How to report language development to varied audiences (e.g., the parent, the caregiver, the physician, the audiologist, the school).*

*How to work in partnership with community leaders towards community development goals.*

6. Delivery. How should the training be delivered?
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<i>Respondents' Priority</i>	<i>Respondents' Recommendation</i>
1	Community-based (e.g., through partnerships)
2	Conference-based (e.g., through workshops/courses)
3	Internet (distance education)
3	Combination
0	College campus or university campus based

3 respondents suggested that in communities where Inuktitut is the first language, the training should be in Inuktitut.

Several respondents gave examples of successful community-based training both for college/university credit and for community development.

Distance education: Nearly all respondents who commented on internet or distance education noted that their experiences had shown, through various disappointing outcomes, that *"distance education just doesn't work for our people", "we have to have the face-to-face, personal approach" etc.*

The respondents who endorsed "Internet/distance education" were all addressing needs in the North (Nunavut and Northern Quebec).

Two respondents from northern Ontario noted that there is a very low availability of Internet in their areas of practice.

Campus-based education: Several commented that community members who had tried campus-based education or training had been *"overwhelmed", "too homesick", "couldn't relate what they learned there to what their community needed", or "people back home asked them if they were trying to be white when they came back."*

Northern respondents and faculty of SLP training programs suggested a combination of campus based courses and community-based practica. One respondent noted previous success in the North with "book-end" courses that have been successful, involving face-to-face/direct instruction for one week at the beginning and end of a course when students can go out of community or instructors can visit into community, and field-based work in the middle months of a course. One respondent urged: *"Reach, don't push. Use different approaches for different groups."*



**8. Trainees/ Students.**

*If there was a training program in the language area, who do you think SHOULD take it?*

<i>Respondents' Priority</i>	<i>Respondents' Recommendation</i>
1	Child care staff
2	ECD / IDP staff
2	Early interventionists
3	Heritage language specialists
3	Parents
4	Elders
6	Speech-Language Pathologists and SLP administrators
7	Teachers
8	Librarians
9	Public Health Nurses

One respondent clarified: *"Two or three persons from each community who would be identified by the health board and the local childcare centre."*

## 9. Barriers.

*If there was a training program offered, what are possible barriers to making it accessible so that people who are best suited for it could take it?*

Several inter-related barriers were anticipated by respondents as follows:

<i>Respondents' Priority</i>	<i>Respondents' Recommendation</i>
1	<i>Location - many isolated communities</i>
2	<i>Transportation</i>
3	<i>Cost</i>
4	<i>Probability of disputes about whether the provincial or federal government should fund and take the lead in making a comprehensive approach to Aboriginal children's language development actually happen. Whose responsibility is it to provide training, fund Aboriginal positions to staff programs, and finance operating costs for outreach to parents?</i>
5	<i>Opportunities for hands-on practice</i>
6	<i>Belief that it is important</i>
7	<i>Would there be enough funding to mount an effective initiative in very small communities?</i>

Again, many respondents noted that training would need to be delivered in communities rather than at a distance (e.g., in urban centres or on colleges campuses) because the people who should take it are also part of large families with important child care responsibilities and they would not like to be away from home.

A few respondents noted that if training or workshops were provided online, a barrier would be lack of access to hardware, lack of familiarity with software, lack of local support for training in use of technology and equipment maintenance.

## 10. Challenges.

*What do you see as some of the most probable challenges to mounting this training initiative in your region?*

<i>Respondents' Priority</i>	<i>Respondents' Recommendation</i>
1	<i>Travel / location / cost (e.g., providing substitute staff to operate existing programs while permanent staff are receiving training)</i>
2	<i>Parent involvement - having them attend, be involved, cost of providing child care during parents' participation in programs</i>
3	<i>There is an existing shortage of trained Aboriginal Early Childhood Educators and Infant Development practitioners who could take advanced training focused on language facilitation.</i>
4	<i>Lack of heritage language capacity in the community that is needed to support a 'linguistically appropriate' language facilitation training or child/family service.</i>
5	<i>Heavy-handed centralized delivery of training or service models would present a challenge to what should be a community-tailored, community-driven initiative.</i>
6	<i>View that all populations have access to currently available programs and no group should be provided with more than any other group.</i>
7	<i>Vast range of professionals and paraprofessionals to link with</i>
8	<i>Cultural and language diversity across Aboriginal communities</i>
9	<i>Competing community priorities</i>
10	<i>Funding to provide supports to students in training, beyond the training curriculum and supervision (e.g., tutoring, counseling, job placement, social support)</i>
11	<i>Absence of knowledge about culturally-based child rearing practices, which increases risk that training curriculum and community programs will be based on non-Aboriginal or pan-Aboriginal approaches that will are not likely to succeed.</i>

*Respondents addressing goals for the North noted that the language for training should be an Inuit language (e.g., Inuinnaqtun and Inuktitut) but there are few Inuit practitioners and fewer of those who are fluent in L1.*

**11. Designation.**

*Do you think that there should be a designated credential awarded for successful completion of a training program in Aboriginal early language facilitation?*

Yes \_\_\_\_ No \_\_\_\_

100% of respondents preferred a designation of some kind.

One respondent cautioned that if training and subsequent designation is linked to required attendance, exams, supervision and so forth, the training might not reach the very people one hopes to reach (e.g., Elders, parents).

*If yes, then what credential? (e.g., a certificate from an Aboriginal Early Childhood organization, a certificate from a government agency, a certificate from a government ministry, such as a 'post-basic ECE' certificate, a certificate or diploma from a college or university, etc)*

For trainees, post-secondary (one-year) certificate from accredited or 'recognized' college or university. Several respondents suggested: *"Post-Basic Early Childhood Education Certificate"*

*For parents, certificate of participation.*

One respondent suggested that a certificate should be from an Aboriginal Early Childhood organization.



**12. What to call it.**

*If the training was IN ADDITION to IDP or ECE training, what do you think would be an appropriate name for this area of specialization?*

Suggestions included:

- *Aboriginal Early Language Facilitation*
- *Aboriginal Language Resource Worker*
- *Early Language Resource Worker*
- *Language Specialization*
- *Specialization in Early Speech and Language Development*
- *Early Childhood Communication Instructor*
- *Aboriginal Early Childhood Intervention*
- *Aboriginal ECD Culture/Language Resource Workers*

**13. Keeners!**

*If you know of particular people or existing training programs that may be interested in contributing to this initiative, should it go forward, by being involved in development or as a pilot site or in some other ways, please name these people / institutions below:*

Six post-secondary education providers were identified.

Respondents from B.C. identified a number of individuals, organizations, and cultural foundations.

**14. Acknowledgement.**

*Please indicate your agreement to being acknowledged by name (and /or your organization) for giving your input to Concept Discussion paper.*

YES \_\_\_ NO \_\_\_

All but 1 respondent agreed to be acknowledged (see appendix).

## 6 NEEDS FOR A FOCUSED ABORIGINAL EARLY LANGUAGE FACILITATION AND SUPPORT INITIATIVE

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### Areas of greatest need

This paper suggests that the kinds of supports most needed to facilitate optimal language development outcomes among Aboriginal children involve:

- **increased quantity** of Aboriginal Infant and Early Childhood Care and Development Programs especially in currently under-served communities;
- **extended scope** of Aboriginal Infant and Early Childhood Care and Development Programs to encompass language facilitation and early detection;
- **community-based outreach** to parents, other primary caregivers, and the community as a whole to promote more language rich home and community environments for Aboriginal children, including heritage language; and
- **improved access** to Speech-Language Pathologists with specific training in family-centred practice, cross-cultural communication, and collaborative, population-based approaches to meeting needs of Aboriginal children, families, and communities.
- production of resources to support heritage language teaching and learning in the preschool years;
- **construction of curricula and delivery of training partnerships** between post-secondary institutions and Aboriginal communities to build Aboriginal capacity for home, community and centre-based programs to facilitate and support Aboriginal early language development.

### Regional variation

A review of contributions to development of this paper from Nunavut and from post-secondary institutions serving Nunavut, northern Quebec, and Labrador suggests that the needs, objectives, resources, opportunities and challenges in these regions differ to some degree from those of other parts of Canada. Some differences may be a relatively greater emphasis on heritage language learning in the north, and a readiness for more workshop based training rather than post-secondary level training to build community capacity.

►► Consultation to develop this concept should involve representatives from all provinces and territories and should determine:

- Do needs and objectives vary among urban, rural and remote populations, among language groups, and across provinces and territories?
- What are specific quantifiable targets for early language promotion initiatives and how do various groups prioritize them?

## Indications of need

### 1. National, provincial and territorial surveillance

A report on Aboriginal Head Start programs states that the most prevalent form of developmental delay in urban and northern Aboriginal communities is speech-language delay (Minister of Public Works and Government Services Canada, 2002). A survey conducted by a Task Force of the Centre of Excellence for Children and Adolescents with Special Needs found that among 59 Aboriginal ECD centres surveyed, the largest number of diagnoses of special needs involved speech-language deficits and delays (de Leeuw, Fiske, & Greenwood, 2002).

There are no national, provincial, or territorial baseline data sets on language development or the prevalence of speech-language delays or disorders among Aboriginal children between 0 and 5 years of age. There are several reasons for the lack of large-scale, 'hard' evidence.

- Many Aboriginal children are not seen by developmental specialists (e.g., infant development consultants, child care practitioners, speech-language pathologists, pediatricians) during the early years;
- Speech-language services are extremely limited for children living on-reserve, since this is a non-insured benefit and many communities do not contract SLP services.
- Many Aboriginal children do not have access to child care programs.
- Aboriginal children were not sampled in the two national longitudinal studies of the growth and development of Canadian children and youth (*National Longitudinal Study of Children and Youth* and *Understanding the Early Years*).
- There are no screening or diagnostic tools that have been created for or validated for use with Aboriginal children. All assessment tools have been developed and 'normed' in research with heterogeneous, predominantly white children in urban settings with English as their first language.\*

\* NOTE: This means that until new assessment tools have been developed, or the validity of existing tools have been established and norms have been gathered, any epidemiological data obtained through ‘universal’ screening and assessment of Aboriginal children would need to be interpreted with extreme caution.

## **2. Views from Communities**

As previously noted in the synopsis of responses of contributors to the survey questions, there are a few known examples of Aboriginal communities where systematic assessment has been done using a combination of standardized tools and observation by people who know the children well. In these communities, serious attenuation of heritage language capacity has been noted, as well as a high prevalence of delays and challenges in English language fluency.

Marcia Dean, a long-time early childhood consultant to Aboriginal communities, offered the following report: *“The two communities I have been most involved with are the Dogrib communities of the Northwest Territories, and Old Massett, on Haida Gwaii, in British Columbia. In both areas, language development was the primary issue, and similar challenges arise. Both communities are remote. In both communities, there are far fewer speakers of the native language than there were 20 years ago. In both communities, children exhibit extremely low levels of both receptive and expressive language, in both the native language and in English. This was determined both by language assessments and by observation of parents, community members, and preschool/day care staff. In both communities, the reliance of parents on television to help their children learn English is striking. In both communities, parents want the best for their children, and when they are asked to be involved in solutions, and they are comfortable with the facilitator or helper, they are more than willing to learn new ideas. In both communities, parents are thirsting for knowledge to help their children. Both communities could benefit from training at all levels, from training for everyone to post-secondary training, as long as these are provided in the community and not by distance.”*

Margaret Gauvin, a contributor to this concept development, noted that in Nunavik, a *“fairly high percentage of pre-school children attending child care programs had language or speech development problems according to assessments conducted by an Anglophone Speech-Language Pathologist.”* This contributor also commented that *“there are no Inuktitut speaking SLPs.”* As several contributors commented, when assessments are done by SLPs who do not speak the language of the children they are assessing, the reliability and validity of assessment results are questionable.

## **3. Language delays and disorders**

There is an abundance of anecdotal reports of serious problems with language delays and disorders from front-line practitioners in Aboriginal communities. At national and provincial conferences and training workshops involving practitioners in Aboriginal Infant Development and Early Childhood Care and Development, one of the most

frequently cited areas of need is the area of children's language development. Practitioners have called for increased commitments of funding both for language promotion training and resources, and for early detection and special services. Contributors from the B.C. Aboriginal Child Care Society note that this organization continuously receives requests from community-based ECD program managers for training, support, and resources related to speech and language issues. (This has prompted development of a new resource, "Moe" described in an Appendix.)

#### **4. Attenuation of heritage language learning**

Contributors from the north particularly expressed concern about rapid decrements in transmission of the heritage language to the youngest generation. The Assembly of First Nations (1999), First Nations scholars (e.g., Kirkness, 1998), linguists (e.g., Phillipson, 1992) and others have also registered grave concern about current decline in heritage language learning in the youngest generation.

#### **5. Dialects**

Some contributors described children who are fluent in a dialect of English or French that differs to some degree from 'Standard English'. When these children start school, or move to other communities, they encounter problems because other people do not understand them completely, and they may be seen as having a language delay or disorder. Aboriginal English dialects have been described by a few linguists. A current study is completing a review of the literature on this topic, and exploring the nature and implications of dialect learning for supporting Aboriginal young children's language development (Ball & Bernhardt, [www.ecdip.org](http://www.ecdip.org)). Contributors to this Concept Discussion Paper noted that Aboriginal children who use a non-standard variety of English are often referred for speech-language assessment. They speculated that dialect learning may in fact account – at least in part - for the high rate of referrals of children, especially in rural and isolated communities. There is little understanding of the extent to which speech-language problems perceived in Aboriginal children are due to divergent expectations about dialect learning.

#### **6. Restricted code**

Some contributors noted that children in small communities may have little exposure to the full expression of their home language and may arrive at school with capacity to communicate effectively using a limited or restricted code, or a system of communication that relies heavily on non-verbal gestures (e.g., facial expressions, head and hand movements). This system of communication may be functional for social interactions conducted in their home community and for discussion of things and events in the immediate surroundings. However, as Dr. Don Taylor, Faculty in Education at McGill University notes, familiarity only with a restricted code does not prepare children for the expanded scope of discussion and learning in school, or prepare them for transitions to life in other communities if they move.

## **7. 'Semilingualism'**

Several contributors noted that in communities where the heritage language is valued but is not well preserved, children may be partially fluent in their heritage language and partially fluent in English or French. Contributors suggested that these children need language enhancement programs in order to become fully fluent in one or both languages. The concept of 'semilingualism', used by two contributors, is controversial (see Cummins, in press; MacSwan, 2000). Yet several contributors underscored the difficulties they have observed or encountered, particularly in remote and isolated Aboriginal communities, where many adults do not speak any language fluently, and therefore cannot expose their children to 'fluent' language in their home. Two contributors raised issues about implications of 'semi-fluent' or 'partially fluent' language environments for children's cognitive development, and for their future opportunities to succeed in education or employment outside of their home communities. Clearly, it is important to develop more understanding of this circumstance through research, in addition to conceptualizing effective programmatic responses.

## **8. Auditory problems**

Many practitioners and researchers in health, infant development, and early childhood have noted that Aboriginal children have a high incidence of ear infections (*otitis media*) (Bowd, 2002). Ear infections are a good example of the complex determinants of language development. Ear infections can directly affect speech and language development. In Aboriginal children, prevalent causes of ear infections are thought to include hereditary and constitutional factors, infant feeding practices, sleeping position, and mold in poorly ventilated homes. Addressing care-giving practices (e.g., breastfeeding, nutrition, sleeping position), housing conditions, and other environmental risk factors (e.g., exposure to smoke and organochlorines), and increasing community-based capacity to detect and refer affected children for treatment, may reduce the incidence of hearing loss. This in turn could prevent speech-language delays and deficits, and also limit secondary effects such as learning challenges, social and behavioral difficulties.

## **9. Need for language appropriate resources**

In the north, in particular, the need for program resources in the various heritage languages was identified by most contributors as a high priority. Books, songs, stories, posters, and materials for activities in the heritage language are in very short supply. These are costly and time-consuming to develop, and beyond the capacity of individual community-based programs to develop. For example, although Inuktitut is the first language spoken by almost all Inuit in Nunavik, there are few resources available to support language development of young children.

## 7 AN ECOLOGICAL PERSPECTIVE ON ABORIGINAL CHILDREN'S LANGUAGE DEVELOPMENT

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### Strategies

Policies and decision-making about promising strategies for Aboriginal early language facilitation can be guided by:

- principles and protocols for practices that support the self-determination of Aboriginal communities and agencies;
- research-based literature on strategies to protect and promote heritage language;
- principles for good practice in cross-cultural community collaboration;
- a growing body of knowledge about Aboriginal Early Childhood Care and Development based mainly on experiences of caregivers and trainers in front-line practice, especially in Aboriginal Head Start programs and Aboriginal Infant Development Programs;
- research on child development and child care;
- research and program reports on effective components of post-secondary programs to build Aboriginal capacity to mount programs for children and families.

This section draws attention to these sources for further discussion on strategies, and incorporates the ideas of contributors to the development of ideas for this paper, and the author's own experiences in Aboriginal ECCD training and research done in partnership with First Nations communities in BC, Saskatchewan and Manitoba.

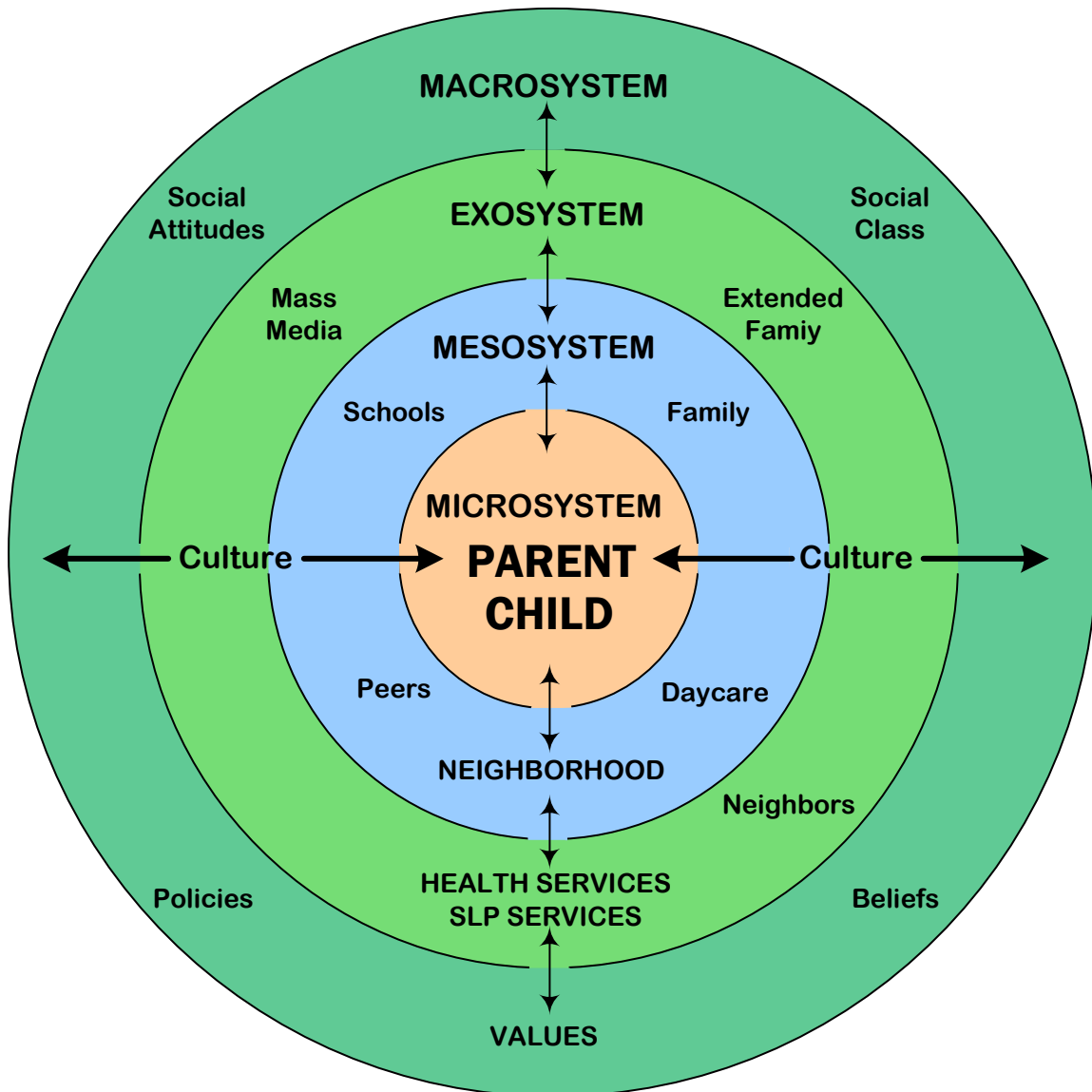
### Holism

*“Our children need to be understood as part of a whole that includes their family, their community, culture, and the natural world we all live in.”*

Lil'wat Nation Elder

This holistic perspective, which is ubiquitous among Aboriginal peoples in Canada, is reflected in the diagram in **Figure 2** showing systems of a child's ecology that affect early language development.

**Figure 2**  
**An ecological view of development**  
 (Adapted from Bronfenbrenner, 1979)



An ecological model helps to conceptualize influences of social systems and culture on children's development (Bronfenbrenner, 1979). This model suggests that all aspects of a child's development occur as a result of many direct and indirect levels and types of interactions and transactions between the child, his/her primary caregivers, and the environment in which they are embedded.



- The inner circle, the **microsystem**, contains the settings in which the child is directly involved, such as the home, child care, neighbourhood, and community groups.
- The second circle, the **exosystem**, includes the settings in which people who interact with the child are directly involved, and which directly influence or are influenced by the settings in the microsystem.
- The third circle, the **macrosystem**, includes all the political, social and economic expectations, understandings, values and priorities within the country as a whole.
- All of these interacting systems occur in a particular time-space continuum or **chronosystem**.

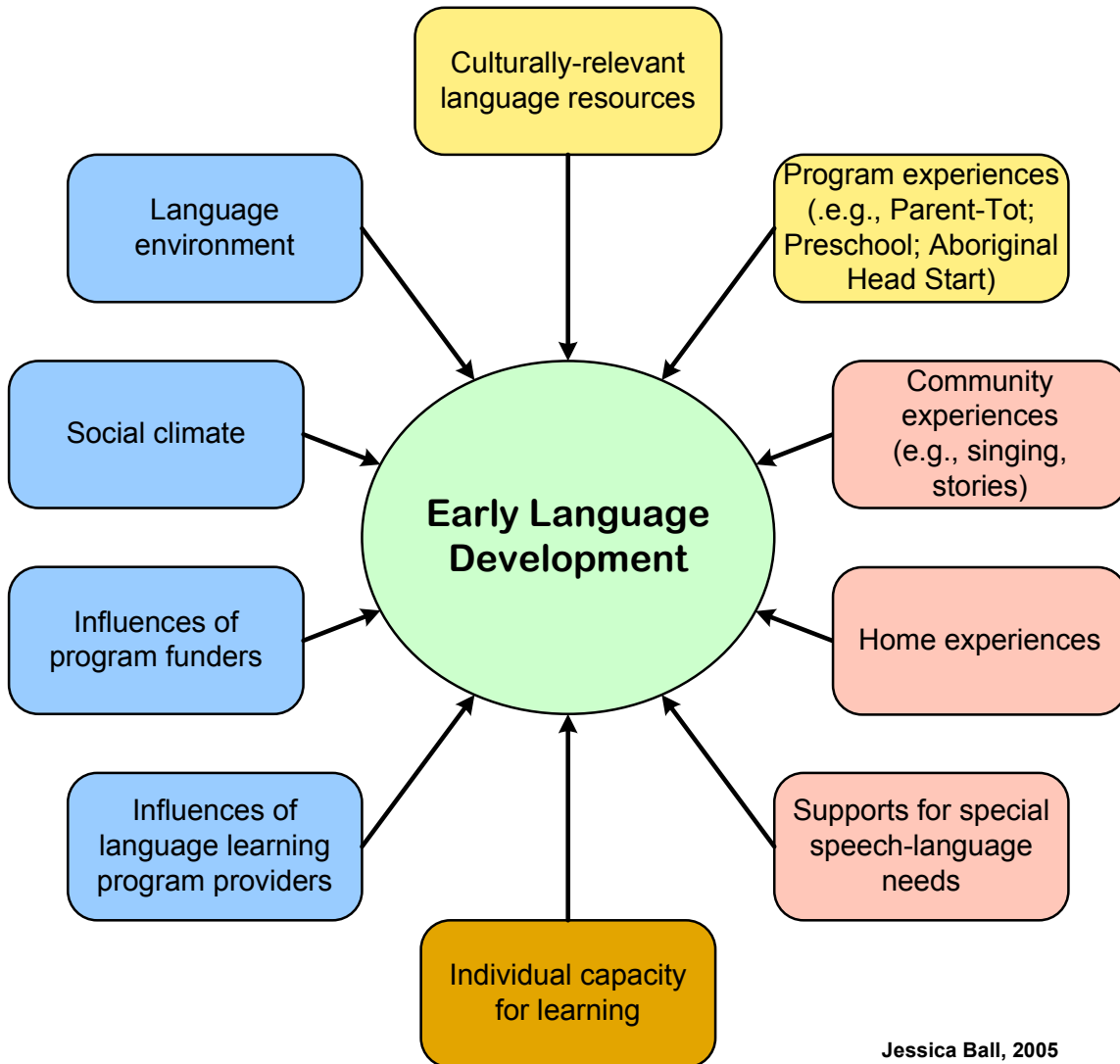
**A sense of time.** Children’s ecologies and their experiences as active participants in their ecology have a connection to the past and have implications for the future. For example, Aboriginal children’s ecologies are socio-historically conditioned by the history of colonialism in Canada, including the Residential Schools era, as well as changes over time within their own heritage cultures and languages. Aboriginal children’s ecologies are dynamic, and what happens to Aboriginal children and their environments today will have implications for the future of Aboriginal children and their communities. It can help to situate current work to change social policies and improve Aboriginal children’s language environments and developmental outcomes within this chronological perspective. It can be encouraging when progress is slow.

►► A socio-historical perspective yields an appreciation that a sustained effort over a long time will be required to affect the kinds of systems change that will secure equitable opportunities for optimal development of Aboriginal children.

### **Key influences on Aboriginal early language development**

Many factors can influence a child's language development – biological, social, cultural, emotional, environmental, and perhaps other factors about which we have little knowledge. There is no single approach that will result in improvements for all children. *Figure 3* shows key influences on Aboriginal early language development that were emphasized by contributors to this Concept Discussion Paper and in a review of relevant literature. All of these could be optimized in a national strategy to improve language development outcomes.

**Figure 3**  
**10 key elements for Aboriginal early language development**



Jessica Ball, 2005

## A journey on ‘many pathways’

*“Finding our way to wellness among diverse communities of children and families requires many paths up the mountain. No one approach, no one program model, will reach or work for everyone.”*

Louis Opikokew, Meadow Lake Tribal Council Elder

A journey on many pathways must be undertaken to achieve improved Aboriginal early language development in Canada. A map of some of the ‘large paths’ can be constructed from the recommendations of contributors to this Concept Discussion Paper who are experienced in the field, as well as a review of relevant literature, and considerations of the guiding principles of many Aboriginal community-serving agencies. Large pathways discerned from a consideration of these sources are suggested below.

1. Development, delivery and evaluation of post-secondary training curricula to extend the capacity of Aboriginal early childhood practitioners to facilitate and support children’s language development through an additional year of for-credit, diploma-level training.
2. Development, delivery and evaluation of post-graduate (pre-service) training curricula and professional development (in-service) training curriculum to better prepare Speech-Language Pathologists to work effectively with Aboriginal children, families, programs and communities.
3. Community-based development, piloting, and ongoing delivery of community-fitting events and programs involving multi-generational family interactions that promote and enrich children’s language development (e.g., story-telling circles, family play and drama, singing groups).
4. Community- and consortium-based production of culturally-specific language resources for teaching heritage languages (e.g., video- and audio- recordings of local stories and songs, books, posters).
5. Regional and national networking and leadership development specifically for those working on Aboriginal Early Language Facilitation and Support through virtual and on-the-ground conferencing.
6. Community-university research partnerships to develop culturally appropriate language assessment tools, establish community, regional and national data bases for monitoring progress, evaluate pilot training programs, workshops, and early childhood program strategies and to disseminate knowledge about new and promising practices.

An elaboration of these pathways is provided subsequently.

►► Consultation with key stakeholders is needed to assess the appropriateness of choosing these pathways, where they might lead under various circumstances, and how they could be optimized.

*Figure 4* (following page) portrays ‘nested’ systems that could be strategically engaged to meet needs and achieve improve outcomes for Aboriginal children’s language development.

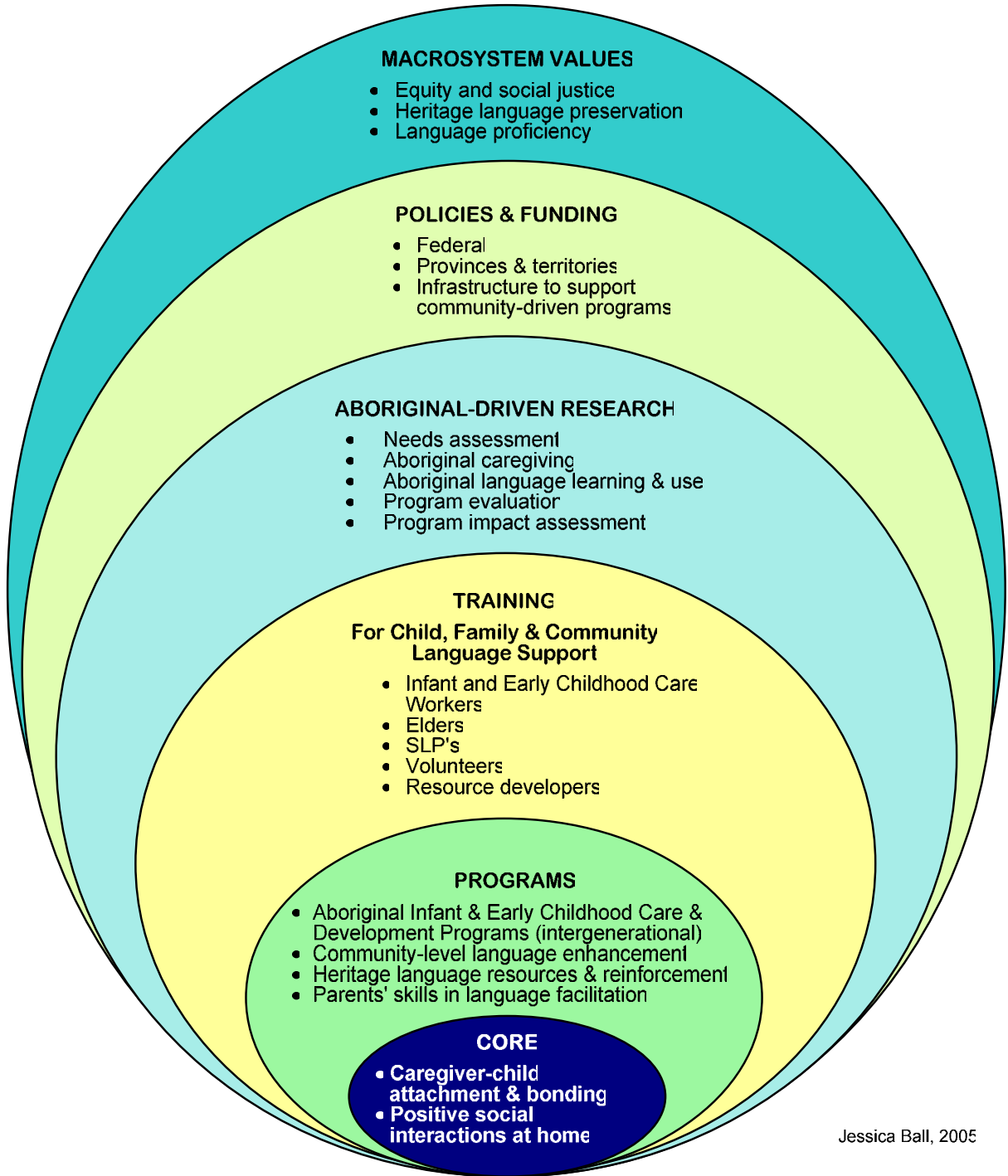
1. **The core** - or heartland - is the child’s experience in their home.
2. **Programs** can enhance the language experiences of children and families and provide extra supports where needed.
3. **Training** is a pre-requisite to enable effective program delivery.
4. **Research** can help to identify key determinants of Aboriginal language development and program effectiveness.
5. **The policy and funding environment** must support these initiatives in communities.
6. **The macrosystem**, which embodies the ethos of Canadian society, must hold Aboriginal children’s well-being in the contexts of their families and communities as a core value.

### **Flexibility as a touchstone for community-based initiative**

Flexibility would be a touchstone for funding initiatives driven by and for Aboriginal communities and community organizations. Flexibility will promote maximum creativity and the emergence of new knowledge and new strategies, as well as revitalization and re-fitting of culturally traditional ways.

*‘No one size fits all’* has been a recurrent learning point across health, education, community development and other sectors over the past decade. Especially in Aboriginal agencies and communities, a healthy skepticism is growing up around franchises for ‘branded’ programs. In the fields of child and youth care, social work, and community development, there is a movement away from ‘universalistic’ principles of child, family, and community development and away from the illusion of ‘best practices’ that could be dropped into any setting. These concepts are the remains of a modernist socio-political agenda that was driven by the hegemony of Euro-Western worldviews and values.

**Figure 4**  
**Systems of support for Aboriginal young children’s language development.**



Jessica Ball, 2005

Contemporary ‘best practice’ parenting programs and children’s services have drawn largely on understandings of how urban-dwelling, English and French speaking children of European-heritage learn language from their parents and preschool teachers. There are many resources and program models developed for Euro-Western children and families, and claims about their efficacy, often based on careful research. But almost none of these program models have been tested with Aboriginal children and families, and many Aboriginal communities are seeking support for initiatives that can proudly be ‘community owned and operated.’

As discussed earlier, in Aboriginal families and communities, there may be different kinds of communication contexts and styles that play important roles in stimulating language development, different approaches to teaching young children may be valued, and different situations and people may be available to promote and support children’s language development. There are many reasons for pursuing an Aboriginal agenda and program of exploration, including:

- Aboriginal families and practitioners are more likely to participate in initiatives that they have helped to plan and design and in which they see reflections of their own culture and language;
- Aboriginal community leaders and program managers have their pulse on what children, families and program staff are ready for and what they need, and are more able to roll out ‘community-paced’ initiatives that respond to known needs, goals and readiness of community members;
- programs designed, adapted or adopted by communities are more likely to fit within the community’s larger visions for community development, increasing the likelihood of coherence and coordination of language initiatives with concurrent or consecutive initiatives; and
- sustainability is increased when a community or community-based organization initiates programs in which they have a sense of ownership, control and pride.

►► During the pilot phase of an Aboriginal early language facilitation strategy, a wide range of community-identified, culturally grounded approaches should be encouraged as demonstration projects. Clear pilot project evaluation plans will ensure opportunities for creating a repository of new knowledge about promising practices (and less successful practices) for achieving goals.

## 8 DESIGNATED DRIVERS: COMMUNITY-DRIVEN, PARA-PROFESSIONAL, AND EXPERT-DRIVEN MODELS

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Three fundamentally different models for building capacity to facilitate Aboriginal early language development were considered at the outset of developing this Concept Discussion Paper:

- A. a community development model driven by community-based leadership and trained practitioners;
- B. a distributed expertise model using para-professionals supervised by professionals; and
- C. an expert-driven model relying primarily on Speech-Language Pathologists.

For most people, and within most government and service agencies, each of these three approaches is founded on fundamentally different ideas about what matters, where knowledge resides, how change happens, and, to borrow a phrase from Robert Chambers (1997), *whose reality counts*. While some of the elements may be the same across approaches, the approaches differ significantly in the hierarchical ordering of the elements, ideas about who makes decisions, who delivers services under whose auspices, who determines whether goals have been achieved, the way community participants ‘hold’ and experience programs, and the sustainability of programs and services. They also differ in costs, feasibility, and implications for training.

Core elements of each model are outlined below as a suggestion for discussion. There are numerous ways that these models could be defined and implemented. No doubt, there are ways that all three models could be combined or deployed variously in various settings.

### **Model A. Community Development Model for Population Based Capacity Building**

*“The identity and well-being of Aboriginal children and their families is inextricably bound with the identity and well-being of their Aboriginal community.”*  
(Schouls, Olthuis, & Engelstad, 1992, p. 12)

Key approaches within an Aboriginal Community Development Model are suggested below.

- Begin with an understanding of cultural care giving practices and language socialization goals in the family.

- Innovate approaches that are driven by the community's agenda for development.
- Focus on home and community environments for children's language development and not only on characteristics of individual children.
- Address family characteristics and needs, bringing primary caregivers into focus as 'first teachers' in all types of facilitation and support strategies.
- Use family-development activities to strengthen confidence among Aboriginal caregivers about being able to raise their children – for First Nations, helping with Residential School recovery.
- Support development of all infants and young children through a wide range of community-wide, home-environment and centre-based programs. For communities with high rates of referrals of children for speech-language diagnosis and therapy, (e.g., reports of 30-50% in some communities), targeting services to individuals is neither feasible nor effective given the lack of SLP services.
- Add to the capacity of current Aboriginal practitioners in community-based child care and development programs through community-based, culturally informed, advanced training in Aboriginal Early Language Facilitation and Support.
- Avoid excessive dependence upon Speech-Language Pathology services which may be non-existent (e.g., many First Nations on reserve), expensive, culturally incongruent, and which may stigmatize the select few children who are targeted for services.
- Participate as a partner with local Speech-Language Pathology services to ensure equitable diagnostic assessment and treatment for children whose needs are best met by the specialized services of Speech-Language Pathologists, and participate in a collaborate way to guide SLPs in culturally appropriate practice.
- Produce resources for young children in the language of the community.
- Conduct research on Aboriginal children's language learning, culturally-driven program approaches, and culturally-valid ways of identifying children whose language is atypical with reference to the opportunities and expectations of their home language community.



## **Advantages of a Community Development Model (Model A)**

This model aims to strengthen community capacity through consultative, broadly participatory programs. Some advantages of this approach are noted below. A look at some principles that often guide practice using a Community Development Model is provided in the next section.

- The mission statements of many Aboriginal agencies emphasize family- and community-centred practice models.
- In cultures that have been disrupted and for individuals who have been displaced, as has happened to most Aboriginal peoples, individuals often experience problems that are in part contextual or communal, rather than strictly personal. For such individuals and groups, contextual and communal responses can have significant positive effects.
- Current theory and research on social services for minority communities also emphasize the importance of cultural context and community-driven agendas as the most useful level of analysis and action for recovering healthy ways of life in families, cultural pride, and care-giving practices that promote children's development.

### **Model B. Distributed-Expertise Model for Assessment and Early Intervention**

- Train Aboriginal Speech-Language “Para-professionals” (e.g., Communication Disorders Assistants) to work under the direction of Speech-Language Pathologists, thereby extending the reach of quasi-specialist services (primarily remediation programs) to a targeted population of children with special needs in the speech-language area.

Most contributors to this Concept Discussion Paper perceived a number of serious limitations to elaborating a strategy to improve supports for Aboriginal young children's language development through an expansion of training for the para-professional roles of ‘Speech-Language Assistant’ or ‘Communication Disorders Assistant.’ A brief overview of the nature of an approach to distributing expertise through supervisory-assistantship arrangements is offered here. Potential problems with this approach are identified for further discussion.

Para-professional training programs have a long history in many professional fields where the demand for fully qualified ‘experts’ seems to be insatiable, where training for fully qualified experts is very long and expensive, or where expert-driven services have limited geographic reach. The creation of para-professional or ‘professional assistant’ designations may have an initial intuitive appeal, because of the possibility of expanding the reach of expert-driven services through supervised adjuncts. This approach has helped to meet needs in many fields and settings.

►► There is a fully developed literature describing para-professional training and service delivery in a wide variety of fields and settings, as well as research evaluating the effectiveness of para-professional service models. A review of this literature should be undertaken if investments in para-professional training programs or service models are being considered.

## **Training and roles of Speech-Language Para-Professionals in Canada**

### **1. Roles of CDAs**

Communicative Disorders Assistants are supportive personnel who work under the auspices, at the direction, and under the supervision of SLPs or Audiologists as adjuncts in specialist-driven service delivery. Communication Disorders Assistants (may be called Communicative Disorders Assistants, Speech-Language Pathology Assistants, or Audiology Assistants) are supportive personnel who work under the supervision of Speech-Language Pathologists or Audiologists. Their training informs them about therapeutic principles and approaches that are used in the field of Speech-Language Pathology and Audiology to treat a variety of communication disorders, and to prepare them for employment as Communicative Disorders Assistants. Graduates are prepared to conduct remediation programming after the Certified SLP has completed their assessment and determined the appropriate treatment approach. Typical duties of a Communication Disorders Assistant include preparing therapy materials for adults and/or children who have communication and/or swallowing disorders, conducting individual and/or group therapy sessions, reporting on therapy outcomes, and carrying out routine maintenance on clinical equipment. Communication Disorders Assistants are employed in the same settings as Speech-Language Pathologists and Audiologists, including child care centres, hospitals, nursing homes, clinics, school boards, specialized rehabilitation centres, and private practice.

### **2. Training of CDAs**

Currently there exists a **Communicative Disorders Assistant Association of Canada** (CDAAC) that recognizes *Communicative Disorders Assistants* and *Speech Language Assistants* who are students or graduates of approved college programs.

Graduates of the following three programs in Canada are eligible for membership in the Communicative Disorders Assistant Association of Canada:

- Brock University, St. Catharines, Ontario
- Georgian College of Applied Arts and Technology, Orillia, Ontario
- Durham College, Oshawa, Ontario

Applicants to these three institutions must have completed degrees with prescribed pre-requisite course work such as the 'Speech and Language Sciences stream degree' or 'Hearing Sciences stream degree' (at Brock U) or equivalent with a minimum overall average of 60 percent.

►► There is minimal prospect of recruiting and funding Aboriginal degree holders for a one-year post-graduate certificate program that would enable them to work as adjuncts to fully qualified and certifiable SLPs.

Therapist Assistant Program: Medicine Hat College, Medicine Hat, Alberta.

Graduates are not eligible for membership in CDAAC.

Medicine Hat College Therapist Assistant Program prepares para-professional health service personnel to work in a variety of environments under the supervision of Physical Therapists, Occupational Therapists, or Speech-Language Pathologists.

Speech Language Assistant: University College of Fraser Valley, Mission, British Columbia Graduates are not eligible for membership in CDAAC.

UCFV recently offered a Speech and Language Assistant diploma for adults (all with Basic ECE?) working with young children. if offered. This was a part-time, evening, post-certificate-level set of eight courses (and one daytime practicum) offered at the Mission campus of UCFV. At the time of this writing, no one was available to respond to calls inquiring about this program, and it may not be currently operating.

►► If a para-professional approach is considered, it would be useful to discover the current status, training experiences and outcomes of the two undergraduate level programs at UCFV and Medicine Hat.

### **Challenges for a Distributed-Expertise Model (Model B)**

As a vehicle for advancing an Aboriginal early language development strategy, Model B does not have the wheels needed to reach the large and dispersed population of Aboriginal children and families needing support.

- A para-professional is by definition dependent upon a fully certified, registered professional for direction. There is already a shortage of Speech-Language

Pathologists in Canada who are available to serve rural, remote, and northern communities. A contributor to this paper described an example of one Aboriginal Communication Disorders Assistant who is employed by a First Nation in Ontario but is unable to work because there is no Speech-Language Pathologist available to supervise her case work.

- Para-professional training programs need certified Speech-Language Pathologists who are qualified and skilled at post-secondary instruction. Difficulty recruiting enough qualified SLPs who are skilled and willing to devote themselves to post-secondary teaching should be anticipated.
- Para-professional training and services would rely entirely on the existing knowledge, training approaches, and practices of the field of Speech-Language Pathology, which is lacking in cross-cultural communication skill development, culturally-validated tools, and strategies with proven effectiveness for Aboriginal children and families.
- Existing training programs prepare assistants to carry out treatment plans designed by a professional for individuals diagnosed with a speech-language disorder. An approach focused only on individual treatment is of extremely limited utility within the holistic, capacity building, population-based approach preferred by many Aboriginal communities.

### **Possibilities for a Distributed-Expertise Model**

In an initiative with ‘many pathways’, there might/may be circumstances and purposes where a para-professional practitioner could effectively add to the reach of services for children with special needs in the speech-language area. Para-professional arrangements may be more feasible in urban and peri-urban settings, where there are more Speech-Language Pathologists to supervise them. Para-professional service delivery may become more effective as a strategy for rural and northern areas as online communications (e.g., innovations in telehealth) and other technologies are further explored. Dr. Genese Warr-Leeper, at the University of Western Ontario, is currently exploring applications of technology to increase accessibility of certain services delivered by SLPs.

A variant of the para-professional approach was described by four contributors to this paper as having some potential. They referred to the use of ‘speech therapists’, describing a professional trained perhaps at a post-secondary diploma level (e.g., one contributor described this as similar to a ‘two-year tech in other services.’) ‘Speech therapists’ and ‘paraprofessionals’ were described as playing an interim role, until an advanced training program for community-based practitioners could begin to increase language stimulation and support for children with special needs within infant development and early childhood programs. Another use of speech therapists was suggested by Marjorie Matheson-Maund, of Dogrib Community Services. She notes that child care staff have little time for individualized work with children with special needs.

She suggests that a ‘speech-therapist’ could work within regularly-provided children’s programs to provide individualized support.

### **Model C. Expert-Driven Model for Early Intervention**

- Train more Speech-Language Pathologists
- Fund more Speech-Language Pathology services for a targeted population of children identified with special needs in the speech-language area.
- Extend mandates for Speech-Language Pathologist to include time for relationship building, collaborative practice, and mentoring in communities.
- Recruit, retain, and deploy more Aboriginal Speech-Language Pathology graduates.
- Make Speech-Language Pathology training more culturally sensitive.
- Conduct research on Aboriginal children’s language learning, culturally appropriate assessment tools, & collaborative intervention strategies.

### **Challenges for an Expert-Driven Model for Early Intervention (Model C)**

In response to the question of approaches, one contributor to this Concept Discussion Paper was moved to quote Eber Hampton as saying, in a different context: “*We should not waste time trying to re-invent the flat tire.*” There are many limitations of current services that rely on Speech-Language Pathologists in Aboriginal settings. One of the biggest limitations is that there are not enough Speech-Language Pathologists hired by public services to meet huge needs in Aboriginal communities. Even with an increase in funding for service, there is a general expectation that there will not be enough Speech-Language Pathologists available to meet Aboriginal children’s needs in rural, remote and northern communities in the foreseeable future.

Currently, there are many frustrations with the inaccessibility – financial, geographic, social and cultural – of specialist services. At the same time, many children and families are dependent upon specialists because there is no other provision for language facilitation, early detection, remediation, or support for primary caregivers implementing remediation programs on a daily basis at home. As well, there are no Aboriginal specific or cross-culturally valid assessment tools and interventions. Most contributors noted some or all of these conditions as reasons to conclude that an expert-driven model “*will never work*” as a primary approach to facilitate and support Aboriginal early language development.

In addition to the lack of availability of Speech-Language Pathologists, on inspection, an Expert-Driven approach appears to have more than one ‘flat tire’ as a vehicle for setting out to explore a map of “Many Pathways.”

- An Expert Driven Model is antithetical to the emphasis on community-driven program capacity development, self-determination, and holism advocated by the leadership of most Aboriginal communities and agencies.
- An Expert Driven Model maintains Aboriginal dependencies upon experts who are invariably trained in non-Aboriginal programs and who are nearly all non-Aboriginal themselves. Some Aboriginal parents are not receptive to entering in to this form of dependency.
- Since there will never be enough experts to meet needs, there will always be serious service gaps, especially in areas where it is hard to recruit and retain professionals – rural, remote, isolated, and northern communities - where needs are greatest.
- SLP service provision to communities is expensive compared to other community-based services that could reach a larger population.
- The stability of expert-driven services is always threatened by cuts to funding, changes to service eligibility criteria, accessibility due to weather, turn-over among service providers (especially in the north), and other contingencies.
- We can anticipate that there will never be enough skilled SLPs willing and remunerated to spend the kind of time in northern, rural and remote communities needed to develop the kinds of rapport, cultural understandings, and partnerships that are prerequisites to effective practice with Aboriginal children and families. Effective work with parents depends upon building trustable relationships, which take months and sometimes years to develop. There is a high turn-over of specialists of all kinds in rural and northern regions, and specialists are not remunerated for hours spent at community gatherings, such as feasts and ceremonies, where they could become known to community members and develop a trustable presence. In the absence of this rapport and without this familiarity about the culture there is little likelihood of effective outreach and involvement with parents to encourage language facilitation at home.
- The field of Speech-Language Pathology is only just beginning to recognize its limited foundations in research and tool development based on European-heritage children in nuclear families predominantly living in middle-class metropolitan centres. The cultural bias and limitations of service priorities, assessment tools, intervention strategies, and curriculum for parents and early childhood educators were identified by virtually all of the 70 SLPs in Canada with practice experience in Aboriginal settings who were surveyed in a recent study (Ball & Lewis, 2004).

There is an urgent need for significant investments in research, development of tools and interventions, and improved pre-service and in-service training of SLPs to prepare them to work in collaboration with Aboriginal communities and agencies.

- Difficulties recruiting and retaining Aboriginal candidates to SLP training programs are likely to continue for the next decade. Although rates of post-secondary degree completion among Aboriginal peoples are steadily increasing, they are still far below the non-Aboriginal population. All SLP training programs in Canada have as a pre-requisite the successful completion of an undergraduate degree, including specific coursework in linguistics, research methods, and child development. An informal poll of some SLP training programs yielded reports of only a handful of Aboriginal students who had ever entered these programs. An Aboriginal person who had dropped out of one of the programs explained that they opted for a different career because their SLP courses did not seem relevant to working in Aboriginal communities: none of the content focuses on Aboriginal language speakers, the realities of practice in Aboriginal communities, or the need to adapt tools and therapies for a non-European-heritage clientele. Only three self-identified Aboriginal SLPs trained in Canada are currently members of the national professional association (CASLPA). Funding for graduate degree level training is a barrier for some prospective Aboriginal students. No graduate program in SLP delivers the program at a distance, in communities or through online coursework.

## **Optimizing Expert-Driven Services**

**Despite challenges, services delivered by SLPs are generally recognized as one important component of a Community-Driven approach with “Many Pathways.” There are many irreplaceable roles that SLPs can and do play.** A few of these are discussed subsequently. However, the focus of their work with Aboriginal communities may need to undergo certain shifts to support a more population-based orientation characteristic of a Community Development approach. This re-orientation would be helped by increased investments in SLP’s time so that they could work collaboratively with community members and in partnerships with community-based programs (e.g., service integration). New infusions of funding are also needed for: research; creation of new pre-service and in-service training curricula; and more vigorous efforts to recruit and retain Aboriginal candidates in SLP graduate training programs.

## **Conclusion**

A strong call for a Community Development approach (A) was expressed among contributors to this Concept Discussion Paper.

Some contributors noted the need to increase recruitment and ensure retention of Aboriginal SLPs and to improve SLP training as one part of a multi-pronged, collaborative, Community Development approach.

Two contributors noted the possibility of training Aboriginal community members as Communication Disorder Assistants as part of a multi-pronged approach. Yet it was clear from contributors' responses to the preliminary survey that a model that retains current dependencies of communities on Speech-Language Pathologists, who are in short supply, is not seen as a promising over-arching model to increase Aboriginal capacity to achieve speech-language goals for children.

All three models have elements that may be important for various purposes and in various settings. Communication Disorders Assistants may be able to play roles in some settings, where there is a stable supply of Speech-Language Pathologists to supervise them. Speech-Language Pathologists play roles with children with special needs that cannot be replaced by community-based practitioners.



## 9 WHAT IS A COMMUNITY DEVELOPMENT MODEL?

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There are many frameworks for community development. Some principles for conceptualizing a Community Development Model for Aboriginal Early Language Facilitation and Support are offered here as suggestions for further discussion.

### 1. Community-pacing

In a community development model, training and programs need to be *community-paced as well as community-based*. Each community will have a slightly different vision and long-range plan for their development. Each community will be at a different stage in terms articulating and realizing their vision for development. Strategies must be found to enable communities to use funding in ways that fit their vision, plans, and program needs. Aboriginal Early Language Facilitation and Support practitioners need to gauge what parents and communities are ready for, and try to follow their lead.

When practitioners, specialists, trainers, and investigators begin with where the community or caregiver is and where they want to go, the potential for reciprocity begins to open up. This sets the stage for a *'community of learners'* approach to supporting child development that can consider applications of both Aboriginal and mainstream care-giving and program practices. A strengths-based community development model casts everyone as having the potential to learn and to teach. Everyone is encouraged to ask questions and make suggestions about the 'goodness of fit' of various ways of thinking about childhood and child care.

In the design or selection of programs, rather than elevating 'best practices' and outside criteria for determining 'quality' infant and child development programs, community members make decisions based on their own community's readiness and goals for children and families. The *1, 2, 3, GO! Project* sponsored by Centraide in Montreal is a good example of community-driven, community-operated approaches to improving the environments for children's development, focusing on family and neighbourhood conditions ([www.centraide-mtl.org/centraide/static/where/go.shtml](http://www.centraide-mtl.org/centraide/static/where/go.shtml))

### 2. Trusting relationships

Community development begins with relationships among practitioners and community members involved in the care of young children (e.g., parents, grandparents, child minders, family day home providers, Aboriginal Head Start practitioners, Infant Development workers and Early Childhood Educators). An open, receptive stance that honours cultural and local knowledge about child rearing and goals for children is needed. Developing a trustable presence depends upon recognizing the values of the family or community. In contexts involving Aboriginal parents and other caregivers, this usually means appreciating the magnitude of their losses to culture, social structure, and self-esteem as a result of colonization and their ongoing experiences of oppression. It is the continuing struggle of Aboriginal parents to regain their pride and revitalize their

cultures and their communities that accounts for the priority placed upon children learning their culture and heritage languages, and upon caregivers returning to some of the traditional values and ways of raising children. It is this insistence that often puts non-Aboriginal trainers, developmentalists, speech-language specialists, and other service providers at odds with Aboriginal child caregivers. There will always be a need for reciprocity and accommodations in building useful relationships with parents and other caregivers in communities.

### 3. Strengths-based practice

A community development approach assumes that all families have strengths, and that much of the most valid and useful knowledge about the rearing of children can be found in the community itself — across generations, in networks, and in ethnic and cultural traditions (Cochran, 1988). This contrasts with assumptions about the deficiencies of communities and/or parents which inform many expert-driven approaches to professional training and service delivery.

For example, it is useful to register first what Aboriginal parents *are doing* and *can do* to support language development and on what Aboriginal children *can do* (including, for example, their abilities to listen, be quiet, and learn by observing a whole sequence of behaviours with minimal verbal mediation), and the potential for building on those attributes. All those who support Aboriginal children in their language development need to understand and build on the strengths of cultural values of the children and families they are serving and, within that framework, to clarify what goals, supports, and language development activities are most appropriate.

The usefulness and the ethics of a strengths-based approach have been emphasized by several cross-cultural investigators (Ball 2002; Crago, 1992; Johnston & Wong 2002; Schieffelin 1990; Schieffelin & Ochs 1986; van Kleeck 1994). For example, Crago reports that Inuit children are taught first to listen and learn, and then to speak. Studying teacher-led lessons and student-generated narratives of Inuit and Algonquin children, Crago and her colleagues (1997) concluded that many instances of miscommunication may originate in cultural differences regarding language use, appropriate participation and interaction structures, and narrative forms. They suggest the idea of negotiated communication, with implications for language development as well as cross-cultural communication and interaction.

Crago (1992) pointedly warns that “*practitioners who are ignorant of, or refuse to alter their practices in ways that recognize the strength of cultural patterns of communicative interaction can, in fact, be asserting the hegemony of the mainstream culture and can thereby contribute, often unknowingly, to a form of cultural genocide of non-mainstream communicative practices*” (p. 37).

#### **4. Building on existing capacity**

It is important to work with child care providers in home- and centred-based programs, and with parents, both in order to ensure sustainable supports for child development and to provide a measure of cultural safety. Great strides have been made in the past decade with the introduction of the Aboriginal Head Start programs and other Aboriginal Infant Development and Early Childhood Development programs in all provinces and territories. Aboriginal community members have been trained as practitioners in early childhood care and development, and many have now achieved a one- and two-year certificate level training in Early Childhood Education. This group of experienced practitioners would seem to be a rich human resource for further capacity development focused on Aboriginal Early Language Facilitation and Support.

Many communities have Elders and grandparents who are speakers of the heritage language. Some communities may have a tradition of volunteers who are willing to become involved in community-level activities (e.g., singing groups, story-telling, theatre). A growing number of Aboriginal communities now have experiences with post-secondary institutions for the delivery of community-based training programs through partnerships. Building upon and strengthening these capacities can contribute to community development while providing the human resource infrastructure needed for language facilitation initiatives.

#### **5. A holistic and ecological perspective**

A holistic and ecological perspective helps to draw attention to the complex and often vulnerable balance of elements in the child's ecology that must be understood and respected. The community is often the most useful unit of analysis, not the individual. Cultural practices, values, and beliefs about language socialization and development are a part of the interwoven fabric that makes up a culture. When interventions tamper with one thread in the tapestry, the integrity and strength of the whole social fabric holding a child, family, or community together may be jeopardized. We must not be naive about the ethics, not to mention the efficacy, of encouraging a culturally foreign approach to parenting, learning environments and language facilitation, or of emphasizing mainstream criteria for achieving 'school readiness', while assuming that other cultural forms characterizing family and community life will not be affected. Practitioners must have skills for working collaboratively with the community and not only with the child and his/her primary caregivers.

#### **6. Collaboration**

*"Nothing about us without us"* is a principle asserted by many Aboriginal people. Culturally appropriate and effective training and delivery of Aboriginal infant and early childhood care and development programs requires mutually beneficial collaborative relationships with parents, preschool teachers, other caregivers, and other service providers. Community members are uniquely positioned to identify core features of

language socialization, to understand the contexts of child development and care in the community, and to offer insights about the conditions, needs and goals of the community to trainers and specialists. Program staff, specialists, and trainers need to be helped to acquire skills for quickly recognizing and interpreting cultural forms and for bringing community-based program staff from various sectors alongside (health, education, early childhood, infant development) in collaborative partnerships to ensure the cultural appropriateness and coordination of programs and to work with particular children and families.

## **7. Culturally specific starting points**

Developing an understanding of how primary caregivers engage with their infants and young children, and how they are socializing their children in the use of language, is a good place to begin. The transmission of cultural knowledge and pride from caregivers to young children is foundational for their long-term development. Maintaining culturally-based practices in child care settings is an important criterion for evaluating the effectiveness of initiatives for Aboriginal Early Language Facilitation and Support. For example, in some communities, indicators of quality of care for young children may include the extent to which children are learning their heritage language, learning socially appropriate conversational turn-taking behaviours, learning to listen and watch adults without speaking, and learning to report on events in ways that conform to social expectations about how information is shared (e.g., amount of context, detail, self-reference, chronological sequencing, etc.).

Van Kleeck (1994) has offered a synthesis of studies of language socialization that exemplify various cultural practices and underscore the cultural relativity of values and beliefs about children's language. She has encouraged a thorough exploration, in each new cultural context, of several key areas that may vary significantly from one family or social group to another, including: (1) aspects of social organization related to interaction; (2) the value of talk; (3) how status is handled in interaction; (4) beliefs about intentionality; and (5) beliefs about teaching language to children. Van Kleeck (1994) encourages: "*Understanding cultural variations in language socialization should heighten clinicians' awareness of the potential cultural biases in current programs focusing on the interaction patterns of parents and their children with delayed language development.*" At the same time, this kind of enhanced cultural sensitivity should help caregivers decide on childcare and parent training curricula that are appropriate for each family and community.

Heath (1989) has suggested a distinction between societies in which children are thought to 'grow up' and those in which children are 'raised' or 'brought up.' Heath found that parents who believe children must be 'raised' engage in a distinct set of verbalizations with their children, involving highly specific verbal communication about events, requests for children to recount step-by-step features of their own actions, and so forth. In contrast, parents who believe children 'grow up' tend to make fewer attempts at dialogue with their young child, and are less likely to prompt their child to recount events in order to practice verbal communication. Examples can also be found in the pioneering

research by Crago (1990a), focused on Inuit children, and by Johnston and Wong (2002), focused on Chinese Canadian children. In both study populations, it was found that children are not actively encouraged to speak at very young ages and are instead encouraged to learn by observing.

Aboriginal infant and early childhood care and development practitioners and speech-language pathologists need to be equipped with a flexible range of language facilitation and support strategies so that they can tailor their interactions with particular children and families, rather than imposing a single approach reflecting the assumptions, values, prescriptions of theory, research and practice that have evolved in urban settings involving European-heritage children and families.

It is important for the emergence of a new field of practitioner training and program delivery to support new knowledge creation as a base for culturally appropriate programming.

## **8. Diverse approaches and targets in diverse settings**

A community development approach requires the support of policies for funding that allow for flexibility in community-based program delivery and variable, community-specific targets for program accountability, evaluation and impact assessment. While studies have shown that promotion of children's language development can be impacted by the quality of services offered in early childhood programs, for children who are not European-heritage, we have encountered limits to our knowledge and skills. There may be significantly different, equally useful and valued ways of encouraging caregiver-child attachment and bonding, and facilitating language development in children's programs across diverse Aboriginal groups. Social policies, funding and training must support what members of different Aboriginal communities are trying to accomplish in raising their children (Sternberg & Grigorenko, 1997). A community-driven framework encourages ingenuity, diversity and community initiative, such that the program 'fits' the community's circumstances, resources, level of commitment, and readiness.

While targets can be effective tools, they can have unintended consequences, including being overly prescriptive in a way that is out of sync with a community-driven approach. Within a community development model, each community should be asked to specify the targets that fit the circumstances, needs and goals of their own constituency and to articulate indicators that will show the extent to which targets have been achieved.

## 10 FAMILY DEVELOPMENT AND COMMUNITY PROGRAM STRATEGIES

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*“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”* (Royal Commission on Aboriginal Peoples, 1996, Vol. 5, Ch. 1, s4.1).

Consistent with recommendations of the Canadian Royal Commission on Aboriginal Peoples, contributors to this Concept Discussion Paper identified **family development** and **community-based programs** for children and families as the two most promising sites or entry-points for language facilitation, support, and early detection of needs for specialist services.

### 1. Family Development

- Involve primary caregivers through a variety of home-environment, community-wide, and centre-based programs to promote the kinds of social interactions which stimulate language, to promote elaborated use of the home language, and to encourage children’s self-confidence in expressing themselves and communicating.
- Within this strategy, in Nunavut, the Northwest Territories, Labrador and northern Quebec, contributors specifically and strongly emphasized home / heritage language facilitation and support.

### 2. Community centre-based programs

- Extend the reach of Aboriginal Infant and Early Childhood Care and Development Programs (AIECCDP), especially Aboriginal Head Start.
- Enrich language facilitation, support, and early detection of communication difficulties.
- Use new Aboriginal capacity to develop these programs through additional post-secondary training of community-based practitioners.

### Optimizing the Potential of Community-Based Programs

Across Canada, there have been substantial and impressive efforts over the past decade to deliver high quality Aboriginal infant and early childhood care and development programs. Aboriginal Early Childhood Care and Development is emerging as a culturally distinctive, appropriate, accessible and effective strategy for promoting Aboriginal child development. Initiatives in communities have included home-based programs facilitated by home visitors and centre-based programs facilitated by early

childhood educators and other practitioners. Many of these programs are culturally-rich and aim in part to reinforce the positive cultural identity of Aboriginal youngsters and their families. In this regard, much good work has been pioneered in Aboriginal Head Start programs. These kinds of programs are an existing community infrastructure within which to build capacity for early language facilitation for all children and supports for children with special needs.

At the same time, there are challenges that need to be addressed in order to harness the full potential of these community-based programs as an effective site for early language facilitation and support.

## **Challenges for a strategy focused on Aboriginal Infant and Early Childhood Programs**

### **1. Access**

Child care and development programs are not currently available for all Aboriginal children who need them. The need for child care programs, and for trained community members to staff them, is particularly urgent in First Nations communities on reserve, where access to off-reserve child care is severely limited by eligibility regulations, geographic distances, social and cultural barriers.

►► Funding and support are needed for broader implementation of Aboriginal community-based programs including:

- Increasing the number of Aboriginal communities with Aboriginal Infant Development Programs; and
- Increasing the number of Aboriginal communities with Aboriginal Head Start and other Aboriginal Early Childhood Development Programs, and increasing the number of spaces in existing programs with wait-lists.

### **2. Quality in child care and development programs: A ‘promising’ practice – not a guarantee**

Research on developmental outcomes of early childhood programs has shown that programs must be of ‘high quality’ in order to produce positive outcomes (Barnett, 1995; Frede, 1995; Greenspan, 1997; National Institute for Child Health and Development, 1997). In research on non-Aboriginal child care, research has found that not all programs are of the quality that is necessary to achieve positive outcomes (see Goelman, Doherty, Lero, LaGrange & Tougas, 2000). There is a long-standing debate as to what defines quality, and particularly whether there is a universal ideal of quality for children of all cultures (Dahlberg, Moss, & Pence, 1999; Moss & Pence, 1994). A language facilitation strategy focused on Aboriginal community-based programs needs to identify the components of programs that have what it takes to produce improved language

development and accurate early detection of difficulties (see Goelman, 1988). These effective components are likely to vary across communities and settings.

►► Investments in training and programs need to be sufficient to ensure quality in community-based care and development initiatives.

### **3. Relevant, accessible training**

There is broad agreement among contributors to this Concept Discussion Paper that infant and early childhood care and development practitioners need to be skilful in facilitating young children's language skills. They also need to be skilled in working with primary caregivers as partners in stimulating language at home and supporting children with special needs. This raises the challenge of providing access to training and continuing professional development, and introducing certification processes and perhaps other forms of regulation (see Doherty, 2003). Certification at the 'basic' level for early childhood educators (ECE) has been addressed to varying degrees across provinces and territories (see Ogston, 2003).

►► Additional training would be a first priority to enable an Aboriginal Early Language Facilitation and Support initiative in community-based early childhood programs.

### **4. Aboriginal knowledge base**

As described earlier, studies that have explored language facilitation across cultures have often revealed strikingly different patterns of caregiver-child interaction (e.g., Crago, 1990a; Schieffelin & Ochs, 1986; van Kleeck, 1994), as well as distinctive beliefs and values that motivate these patterns (e.g., Johnston & Wong, 2002). The current lack of knowledge about what kinds of strategies are likely to improve language stimulation in Aboriginal children's home and community-based programs present a serious challenge for training, program delivery and program evaluation. On the other hand, there is widespread agreement that supporting improved language development of Aboriginal children is a top priority, and social development movements must start somewhere.

►► The lack of empirical knowledge calls for a strategy that:

- recognizes the need for flexibility
- encourages and celebrates community initiative and creativity
- holds the development of this new field as a 'generative' endeavour combining innovative, community-driven strategies with practices borrowed from a variety of other cultural contexts and fields of endeavour
- values the opportunities for new knowledge to be created as approaches to training and program delivery are tested, evaluated, studied empirically, and reported in a nationally networked, Aboriginal-driven, 'community of learners' (which could be formalized as a nationally networked Centre of Excellence).



## **11 TRAINING INITIATIVES TO SUPPORT COMMUNITY-BASED ABORIGINAL EARLY LANGUAGE FACILITATION AND SUPPORT**

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A national strategy for Aboriginal Early Language Facilitation and Support will require substantial funding for human resource development to conceptualize, plan, and deliver programs. A community development strategy emphasizing family-focused, home-based supports, as well as community-based programs calls for a new kind of training. It is suggested that priority be given to funding development of new curricula and delivery of an advanced year of post-secondary training to Aboriginal community members who are already trained at the ‘basic’ level of Early Childhood Education or Infant Development. This will begin to create a pool of community-based practitioners who can mount language facilitation initiatives with families, through community-wide activities, and in child care and development programs. This concept is included in the various training components listed below, and elaborated in greater detail subsequently.

Several kinds of training could help to support many pathways to Aboriginal early language development.

### **1. Advanced Early Childhood Development Certification in Aboriginal Early Language Facilitation and Support (Post-Secondary)**

- Advanced post-secondary (for college or university credit) training curriculum is needed for (primarily) Aboriginal students following their successful completion of the course work, practica, and work placement needed for certification as an Early Childhood Educator.
  - In most provinces, though not all, the suggested prerequisite training would entail a minimum ten-month, full-time, post-secondary program.
  - The specialized training in Aboriginal Early Language Facilitation and Support would entail a subsequent ten-month, full-time, post-secondary program.

An available model is the ‘Level 3’ training for Early Childhood Educators in Alberta and Manitoba. This corresponds with the ‘Post-Basic Certificate in Caring for Infants and Toddlers’ or ‘Post-Basic Certificate in Caring for Children with Special Needs’ in B.C.

Graduates would obtain an advanced Early Childhood Education Certificate in Aboriginal Early Language Facilitation and Support (AELFS).

## **2. Professional Development Workshops**

- Aboriginal Early Language Facilitation and Support training workshops (not for college or university credit) are needed for primary caregivers, and for professional development/continuing education.

Workshops could be offered in the community and at conferences. This approach was given a high priority by contributors to this Concept Discussion Paper, especially by those in the north. A useful examination of professional development strategies for child care and development practitioners has been reported by Candice St. Aubin (2003).

## **3. Cultural Practice Curriculum for Speech-Language Pathologists (Post-Graduate, Pre-Service)**

- Improved post-graduate course work is needed for Speech-Language Pathologists, focusing on how to form partnerships with communities and with families, cross-cultural communication skills for practitioners, multi-disciplinary team approaches to case identification, management and service delivery, and new, culturally appropriate approaches to assessment and intervention.

## **4. Cultural Practice Curriculum for Speech-Language Pathologists (Post-Graduate, In-Service / Professional Development)**

- Continuing education course work is needed for certified Speech-Language Pathologists, focusing on how to form partnerships with communities and with families, cross-cultural communication skills for practitioners, multi-disciplinary team approaches to case identification, management and service delivery, and new, culturally appropriate approaches to assessment and intervention.

## **5. Aboriginal Recruitment in Speech-Language Pathology**

- Accommodations in SLP training programs are needed to recruit and support Aboriginal people to become certified in Speech-Language Pathology.

At present, SLP training is exclusively delivered through M.A. level programs, all of which are lacking specific Aboriginal content and have had low/no success in recruiting Aboriginal graduates. Although there is a steady increase in the rate of post-secondary completion among Aboriginal students, many challenges remain. Recruitment and retention of Aboriginal students in two-year post-graduate programs of training in Speech-Language Pathology is a long term goal.

►► Consultation needs to address strategies both for expanding training in infant and early childhood care and development, and for delivering advanced training in Aboriginal Early Language Facilitation and Support. The specific challenge of how to ensure that community members in rural, remote and northern settings can access the training also needs to be addressed.

### **Concept for Aboriginal Early Language Facilitation and Support Practitioners**

Contributors to this Concept Discussion Paper gave highest priority to the following two competencies for practitioners who could carry out early language initiatives:

- More capacity to facilitate the development of language of all children being cared for at home, in Aboriginal infant development programs, and in early childhood care and development programs; and
- More capacity to work effectively with parents and other primary caregivers so that they are more confident and effective in interactions with their children that provide the social foundation for language development.

Second highest priority was given to:

- Capacity to identify children who may be having difficulties with language and should be referred.

### **Roles for Aboriginal Early Language Facilitation and Support practitioners**

Possible roles include:

- stimulate language development of children from 0 to 5 years old;
- facilitation of involvement of Elders in interactions with young children;
- contribution as part of a team to develop heritage language resources appropriate for use by primary caregivers and young children;
- promote language awareness through information campaigns in the community;
- engage in ‘whole community’ approaches to enhancing the language environment for children, including special events (oration, theatre) and ongoing activities (e.g., story-telling, community singing);
- work with individual caregivers and families to enhance home language environment;

- identify possible speech-language difficulties through the use of narrative assessment approaches and basic screening tools, in order to make appropriate referrals to specialized speech-language services for assessment;
- partner with speech-language specialists (SLPs) to orient SLPs to: the cultural and social context of children’s communities; norms for the pace of language development; characteristics of communication typical of the child’s speech community; and protocols for interacting with children and primary caregivers in the community; and assist with home visits and communication with parents about assessment outcomes and remedial strategies;
- assist with language intervention, for example by supporting primary caregivers in carrying out therapeutic practice between specialist visits.

### **Build on existing capacity**

There is already a large pool of Aboriginal and non-Aboriginal practitioners in Canada designated as Early Childhood Educators. There appears to be a growing number of post-secondary programs across Canada that are learning about how to play effective roles as partners with Aboriginal communities and organizations to strengthen Aboriginal capacity to deliver child and families services, especially Early Childhood Education. Building on these existing strengths in communities and in post-secondary institutions offers a strategic and potentially effective approach.

►► Support should be provided for the development of an extension of curriculum in Early Childhood Education programs, rather than creating an entirely new field of practice requiring entirely new fields of study. Building on prior learning in ECE, additional specialized training would:

- extend the scope of many programs from ‘preschool’ (3-5 yrs.) to encompass infant and toddlers care and development;
- develop a specific year-long stream of course work and practica focused on early language learning, facilitation, and support.

►► Creation of a program of training to build Aboriginal capacity in Aboriginal Early Language Facilitation and Support needs to involve consultation with Aboriginal leaders and those who have worked closely in support of Aboriginal capacity and child development. This leadership can establish a clear agenda, clear goals for Aboriginal young children’s language development, and a commitment to an Aboriginal Community Development Model.

## **Concept for post-secondary training for Aboriginal Early Language Facilitation and Support practitioners**

►► Development of advanced practitioner training curricula could involve a pluricultural ‘generative’ process, with collaboration among Aboriginal leaders, Aboriginal and non-Aboriginal researchers, educators, specialists, and consultants in relevant areas including:

- Aboriginal infant and child development;
- early language development;
- services to children with special needs;
- speech-language disorders;
- bilingualism;
- heritage language revitalization and stabilization;
- community development;
- early childhood curriculum and program development;
- early childhood program evaluation.

### **Additional year of specialized training**

Priority areas for course work and practica during an advanced certificate year of post-secondary practitioner training include:

- Early Language Learning in Infancy and Early Childhood
- Early Language Facilitation in Home and Community Program Settings
- Atypical Early Language Development and Support
- Family Centred Practice
- Promoting Socio-Emotional Attachment and Development in Infancy and Early Childhood through Caring Family Relationships: Working with Primary Caregivers
- Principles of Community Development, Collaborative and Consultative Practice, Inter-sectoral Partnerships, and Multidisciplinary Team Work.

## **Challenge: Lack of culturally focused professional training programs**

Professional development in the area of Aboriginal early childhood care and development emerged in the 1990s as a touchstone for the implement of Aboriginal Head Start and other early childhood development services for Aboriginal children. However, great strides have yet to be made in creating professional training programs that prepare practitioners to work effectively with families and communities and to create and deliver programs for children that embody the children's cultures and help children develop along cultural lines specified by or desired by parents. European-heritage lifestyle values and assumptions, goals for human development, and research findings based on studies of white families are implied throughout most human service fields.

In early childhood education, while guidelines for 'Developmentally Appropriate Practices' have been suggested, a deep appreciation of the ways that culture is embodied in all aspects of children's programs and policies regarding family involvement has not emerged as a salient feature of children's services. This is undoubtedly due in part to the lack of preparation in programs of training for students to learn about how to work within communities. Students especially need to learn how to engage in partnerships with primary caregivers in order to learn from them about cultural values and goals for children's development and to find ways for culturally driven, community-guided program design and delivery.

Culturally relevant, accessible programs to train community members to create and operate services for children and families are urgently needed. Like programs for children and parents, programs for training infant and early childhood care and development practitioners embody the cultures of those who design and implement them. When training programs are designed according to dominant cultural values and goals that are reified in mainstream research on white, middle-class populations (e.g., individualism, autonomy, fluency in the language of public school instruction), they may conflict with and even undermine parenting approaches and goals for children in Aboriginal families and communities (Crago, 1992; Heath, 1989).

## **Starting with Aboriginal community-identified goals and directives**

In order to create an effective professional practice in Aboriginal Early Language Facilitation and Support, new ground must be cultivated to ensure that Aboriginal community members have access to training that is culturally responsive and prepares them to work with communities in creative, flexible ways. As Dr. Rod McCormick, a Mohawk professor of Counselling Psychology at the University of British Columbia has underscored with reference to school-based services for Aboriginal students, training and services need to start with Aboriginal values, concepts and ways of doing things in order to be meaningful. Mainstream theories, research, and practice models are important, but these are not promising *starting points* for creating capacity for services that will resonate with and reach out effectively to Aboriginal children, families and communities.

## What language(s) are we speaking?

A good example of working towards community-identified goals for children's language development is asking the question: Which language(s) do the primary caregivers in this community want their children to learn after they are born, before beginning school?

How best to support young Aboriginal children's speech and language development is a complex and politically sensitive topic for many Aboriginal parents and communities. Different families and different caregivers within families may have divergent aspirations for their children, for example with regards to which language will be considered primary and the relative importance of retaining cultural traditions and identity versus engendering bicultural or assimilated identities. In a recently completed study (Ball & Lewis, 2005), First Nations parents' and Elders' goals for their children's language development were found to vary across a wide spectrum: some want their young children exposed to bilingual and bicultural experiences; some want their toddlers to develop a solid grounding in their Aboriginal mother tongue exclusively before learning English or French as an additional language in primary school or even later; and some want their children to develop English first and foremost.

Among the Inuit, Innu and Innuvialuit peoples in northern Canada, Shirley Tagalik, of the Centre of Excellence for Children and Adolescents with Special Needs, emphasized the very high priority that leaders place upon teaching young children their mother tongue. Their goal is to secure and stabilize these languages, which are rapidly falling into disuse, and to secure young children's attachment to older generations and to their cultural heritage. Margaret Joyce, a member of the Government of Nunavut Ministry of Education, notes that "*there are two Inuit languages in the region served by Kitikmeot Schools – Inuinnaqtun, which is endangered, and Inuktitut/Netsilik dialect, and there is a goal to build capacity for bilingual revitalization in early childhood development.*" It has been suggested that this training that could be developed in partnership with CEJEP de St. Felicien in Quebec.

A serious challenge was noted by contributors reflecting on communities where early learning of an Aboriginal language is the highest priority. Many adults whose Aboriginal language skills are strong are typically not fluent in French or English, but post-secondary programs are offered in French or English. Thus, those who are most needed to support early Aboriginal language development, and who are also uniquely able to detect speech-language difficulties because they speak children's home language, are least able to access mainstream training programs to become certified. One contributor reported that an ECE training program has been delivered in Nunavut using a post-secondary instructor working alongside an Inuktitut translator.

►► Creative approaches and community-fitting curriculum objectives for training need to guide education to build community capacity for Aboriginal Early Language Facilitation and Supports.

## **Preparatory programs for post-secondary training**

Aboriginal community members who may be highly suited to become certified in Early Childhood Education or Infant Development, and subsequently in Aboriginal Early Language Facilitation and Support, are likely to need ‘pre-post-secondary’ upgrading. Aboriginal completions of secondary and post-secondary education are steadily increasing. However, completion rates remain well below those for non-Aboriginal students, for many reasons. Many recruits in communities may not have completed a full program of secondary studies. Many may have been out of school for many years. In some communities, families need time to prepare for a mother or father to become devoted to a program of post-secondary studies.

Marjorie Matheson-Maund at Dogrib Community Services notes that a nursing program currently being offered in the Northwest Territories began successfully with upgrading courses offered as part of the intake process. Pre-program preparatory course work ranging from two to twelve months is a routine part of the First Nations Partnership Programs co-delivered by the University of Victoria and First Nations communities.

Preparatory course work may include a thorough introduction to the field of Aboriginal Infant and Early Childhood Care and Development, so that recruits know what to expect of the training and the profession. Preparatory course work may include upgrading in communication skills, reading, group work, time management, and personal readiness.

## **Aboriginal driven criteria for certification and licensing**

Professional certification criteria and child care program/facility licensing regulations often drive the philosophy and content of practitioner training programs and what practitioners do in the field. Gillian Doherty (2003) and Don Ogston (2003) have offered a useful overview of professional certification and post-secondary accreditation processes in the field of early childhood education in Canada. The rather narrow focus of Early Childhood Education training programs on children and primarily centre-based curriculum approaches may reflect how criteria for certification of early childhood educators are leading professional training programs. For example, in B.C., the Ministry of Children and Family Development prescribes certain numbers of hours of training in specific practice areas. Currently, none of these areas specifies community development and cross-cultural communication skills. Correspondingly, courses titled ‘community development’ or ‘cross-cultural communication skills’ are not found in any of the accredited post-secondary ECE training programs in B.C.

►► Partnerships need to be forged between Aboriginal policy leaders in government and in communities with post-secondary institutions and regulatory bodies in provinces and territories. An important goal is to ensure that Aboriginal-driven criteria for determining ‘quality’ in Aboriginal infant and early childhood care and development



inform criteria for professional certification and program licensing, rather than the other way around. Promising work on defining a ‘quality’ framework by and for Aboriginal child care practitioners has been started by the B.C. Aboriginal Child Care Society (2003).

Subsequent discussion of this concept could explore the advisability of forming an Aboriginal authority in Canada, or in individual provinces and territories, to regulate Certification in Aboriginal Early Language Facilitation and Support, in consultation and collaboration with selected post-secondary institutions.

### **Scan of post-secondary institutions contributing to Aboriginal capacity development**

A preliminary scan of post-secondary programs of training in Early Childhood Education was conducted with a view towards courses on community development, family-centred practice, cross-cultural or multi-cultural curriculum development, cross-cultural child development or the cultural nature of development, and courses on Aboriginal issues. Courses with these words in the course title are *conspicuously absent* from course lists in any of the programs reviewed. However, course titles do not convey course goals and objectives, readings or discussion topics. In-depth review is needed to establish the extent to which training programs in Early Childhood Education are aimed at developing cultural and community-development competencies.

►► Contributors to this Concept Discussion Paper were asked to identify post-secondary institutions that are currently playing a role in strengthening Aboriginal community capacity for early childhood program delivery in their regions. They were asked especially to identify institutions that may have the flexibility, creativity, will and mandate to play a role in the initiative currently under discussion. A list of those identified is provided in Appendix D.

►► **Pilot projects** to develop and test the concept of training and community-based programs for Aboriginal Early Language Facilitation and Support are an advanced step in elaborating this concept. Planning for pilot projects should follow regional and national consultation with stakeholders including Aboriginal leadership, speech-language service providers, and post-secondary institutions.

**One approach to pilot projects would be to form partnerships between three or four groups of Aboriginal communities in the north, east and west and a consortium of three post-secondary institutions. Over five years, these partnerships could co-construct, co-deliver, and evaluate community-based training, and/or combinations of community-based and distance or campus-based training. It is suggested that one of these pilot projects should involve a heritage language orientation.**

## 12 PARTNERSHIPS FOR ABORIGINAL CAPACITY BUILDING

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There is new ground to be discovered in developing the field of Aboriginal Early Language Facilitation and Support, and the unknown can open up the possibility of creating new knowledge. No one knows as yet which ‘mainstream’ concepts and methods for early language development or for involving primary caregivers will fit with the cultural knowledge or community development goals of particular communities. This section suggests that by using a co-constructive, generative curriculum development approach involving partnerships between Aboriginal communities and post-secondary institutions, communities of learners can be created to consider what would be effective concepts and strategies for Aboriginal Early Language Facilitation and Support in their particular cultural and linguistic community.

The following discussion draws upon the author’s experience and research showing positive impacts of an approach to partnerships with rural and remote First Nations communities in B.C. called the First Nations Partnerships Program ([www.fnpp.org](http://www.fnpp.org)). These partnerships are aimed at strengthening First Nations’ capacity to mount and operate Aboriginal Infant and Early Childhood Care and Development Programs. The partnerships began in 1989 when the Meadow Lake Tribal Council in Saskatchewan, frustrated with mainstream ECE training curricula, approached the University of Victoria about the possibility of establishing an innovative ECE training program through a partnership.

Dialogue began on how curricula might be created to incorporate the language, cultural practices, and child care goals of the nine Cree and Dene communities around Meadow Lake. The Tribal Council made it clear that they would be in the driver’s seat and would steer the development of a training program while the university would be a desired and necessary passenger. Through the 1990s, more partnerships between the university and First Nations communities consolidated a framework for community-based ECE training. Ten groups of First Nations across western Canada have now worked with a university-based team to deliver ECE training in their own communities.

Principles that have guided these partnerships and that have led to successful outcomes are offered as suggestions for planning training initiatives for Aboriginal Early Language Facilitation and Support.

- 1. Community-based training.**
- 2. Community-involving training.**
- 3. Co-constructing curriculum. A ‘Generative Curriculum Model.’**
- 4. Reinforcing cultural and linguistic heritage.**
- 5. Reinventing wheels fitting each community’s developmental pathways.**
- 6. Students as role models in their communities.**
- 7. Community transformations: Ripple effects across the community.**

## 1. Community-based training

Contributors to the Concept Discussion Paper unanimously agreed that all training initiatives for Aboriginal Early Language Facilitation and Support should be delivered in Aboriginal communities, or through a combination of community-based practica and campus-based courses delivered on intensive ‘institute’ schedules (e.g., one or two weeks full-time). Trainees need to be recruited from within Aboriginal communities that have identified Aboriginal Early Language Facilitation and Support as a priority within their long-term plans for community development. Community members need to be able to access the training within their familiar community surroundings.

Aboriginal students still do not find their traditions and values represented in mainstream ECE curriculum or on mainstream post-secondary campuses. However, surrounded by daily reminders of the distinct cultural and linguistic heritage of their Aboriginal community, the emotional well-being and learning capabilities of the learners is enhanced. In familiar surroundings, learners can actively engage in an on-going process of articulating, comparing, and integrating cultural knowledge, knowledge of the local language (where applicable), and Euro-Western knowledge, as they construct and develop their own understandings and practice skills.

Marcia Dean, an Early Childhood Development consultant serving Aboriginal communities in the Northwest Territories, notes that students in Yellowknife succeeded in post-secondary courses on Early Childhood Education when there was direct, community-based instruction: *“For students in the Dogrib communities, modelling, a variety of explanations, local examples and hands-on experiences appeared to be vital to their motivation and learning. When courses are paired with an instructor within students’ own community, students are motivated and engaged, resulting in success. Our experiences with distance courses without direct instruction and participation have not been successful.”*

Another compelling and practical reason to deliver Aboriginal Early Language Facilitation and Support training in the community is that in all likelihood, nearly all those with a keen interest in the program will be women (though efforts must be made to recruit men). Most of these women will have significant responsibilities for caring for children and older people in their community. Going away to study is often not possible. Training that is closer to home will enable recruitment of the most capable and eager community members into the profession.

Shirley Tagalik, a member of the Centre of Excellence for Children and Adolescents with Special Needs, representing child development concerns in Nunavut, noted: *“The training must be field-based. Most of our workers are sole supporters of large families. Barriers to an effective training strategy would be distance, cost, and providing staff to operate programs while permanent staff is being trained.”* She notes that some communities have been sending staff to CEJEP courses, but not all communities have this capacity.

Indeed, it can be said that for many people living in rural, remote, and culturally distinctive communities, the real meaning of ‘distance education’ is that which is delivered on mainstream campuses in the south, at a social, cultural and geographic distance from where learners need to be in order to develop community-relevant professional skills and to succeed in a challenging training program.

## **2. Community-involving training**

In the First Nations Partnership Programs, training is guided by a structure that is implemented by the community.

- Community leaders (e.g., Band and tribal councils, Community Advisory Boards, or steering committees) take the lead in recruiting students, instructors, Elders, an intergenerational facilitator, and a community-university liaison.
- Community members actively engage in ongoing generation of ideas that are studied as part of the training curriculum.
- Communities designate a community member as an Intergenerational Facilitator, with responsibilities to involve Elders and grandparents needed to support the learners and to help them learn more of their heritage language.

Experience in the partnership programs has shown that a community must trust, know about, and agree with the general thrust of what community members are learning in a training program. When there is community involvement in training, the community becomes predisposed to accept, help and participate in programs delivered by community members who have completed the training.

## **3. Co-constructing curriculum: A Generative Curriculum Model**

A partnership approach to co-constructing curricula about Early Childhood Care and Development was innovated in the First Nations Partnership Programs. The approach came to be known as the ‘Generative Curriculum Model’ (Pence & McCallum, 1994; Pence & Ball, 1999; Ball & Pence, 2000, [www.fnpp.org](http://www.fnpp.org)). Aboriginal partners, university-based educators, and students engage in a creative process to co-construct curricula that explore culturally relevant concepts, resources, and practice approaches as well as Euro-Western theory, research, and practice approaches. One First Nations chief remarked: *“We can consider what mainstream theories say and if we choose to believe them and use them in our work, that doesn’t make us less Indian. And if we choose to assert the importance of our cultural traditions and ways of raising children, that doesn’t make us wrong. This program recognizes and encourages this give and take, pick and choose. It doesn’t cage us and expect us to act like Europeans.”*

Course instructors are recruited from local communities whenever possible to work with students and knowledgeable community members, including Elders, to

generate curriculum that fits the culture, language, circumstances, and developmental goals of the community. Specific activities are written into curricula to draw out community participation. For example, Elders are asked to contribute at designated points throughout the training by sharing stories from their past, conveying their views on contemporary child rearing practices and values, and teaching their language and culturally traditional skills. Experience has shown that meaningful Elder participation in a program requires preparation and respect for cultural protocols. An Intergenerational Facilitator who is familiar with the cultural community and with program goals helps to involve Elders.

In partner communities, there has been resurgence in the role of Elders in many aspects of community life as a result of their integral roles in the training program. A corresponding revitalization of cultural pride and traditional value systems is evident as well. Elders become conduits between the classroom and students' involvement in their cultural community.

A synergy of knowledge and action is achieved through:

- continuous input from community members and dialogue with Elders;
- five practica in community-based agencies;
- the physical proximity of children and families, whose embodiment of the culture of the community keeps student and instructors ever mindful of their constituency.

Over the two-year training programs, students are challenged by the tensions between theory, community objectives, and cultural considerations, and by their daily interactions with children in practice settings. As a Meadow Lake Elder observed, the bicultural and community-specific features of this model are as *“two sides of an eagle feather,”* noting that *“both are needed to fly.”*

The core curricula for the partnership programs is structured as 20 university-level courses that are equivalent in terms of post-secondary course credits to those offered in mainstream university programs, and that lead to a two-year university diploma. Each course includes regularly scheduled classes and a structure of activities and assignments. A university-based team provides part of the curriculum as well as ongoing consultation-liaison support to community-based instructors and administrators. Courses cover topic areas and skills that are common to most early childhood education training programs, such as child development, program development and delivery for infants, toddlers, and preschoolers, involving parents, communication strategies, professional ethics, and practica in a variety of settings. Activities include weekly sessions in which students meet with Elders to explore questions related to child and youth care and development. Elders' contributions, as well as the students' own life experiences, and considerations of the local circumstances and goals of the community, are all valued, emergent content in the curricula.

#### 4. Reinforcing cultural and linguistic heritage

Community-specific cultural practices are an integral part of what learners need to know in order to work effectively with children and families. In addition to learning mainstream theory, research and practice about language acquisition and support, culturally appropriate practices in Aboriginal Early Language Facilitation and Support can be constructed through dialogue among learners and instructors about:

- unknown or forgotten cultural and language practices described by Elders;
- contemporary social conditions and socialization goals, including language socialization goals, for children in the community; and
- ideas and research found in mainstream texts and practicum observations.

One of the graduates from a First Nations Partnership Program with Treaty 8 Tribal Association, Nancy Anderson, credits her experience in a community-based training program with enriching her knowledge of her own culture and helping her to integrate her First Nations identity and ECE skills. With direction and encouragement of her Sauleau community on the edge of Moberly Lake in north-eastern B.C., Nancy created an Aboriginal Head Start program. She emphasizes the colours and symbols of the Medicine Wheel in the physical environment of the centre. Items are labelled in the traditional Cree language of the children as well as in English. She teaches native Cree songs to children and translates nursery rhymes, plays, and stories into Cree. She relies on Elders to introduce traditional stories, arts, and crafts to the children as a regular part of their daily experience. Children are introduced to traditional activities such as snowshoeing and making miniature snowshoes, tepees, and moccasins. At the same time, the children are introduced to reading in English and to computers. Nancy summarizes her program:

*From the training program, I learned more about my culture and the Elders' teachings that will remain forever in my heart. I firmly believe that reserves need preschool programs to help our children get ready for Kindergarten but also to form a foundation for a positive Cree identity. I really believe that the children in the Cree-ative Wonders program are developing their social, intellectual, spiritual, and physical needs. They are learning their culture, and they love it.*

## 5. Re-inventing wheels fitting each community's developmental pathways

Using the Generative Curriculum Model, each time the training program is delivered, it is shaped by the knowledge and experiences of participants. Thus, no two programs are identical.

Few training models in the human services invite communities to develop a curriculum together so that the learning outcomes are not predetermined at the outset. Yet, recognizing the limited transportability of social knowledge and practice, many educators and researchers are encouraging a more dialogical, open-ended approach to capacity building through training, community-based programs, and development of new knowledge (Bernhard, 1995; Cheng, 1991; Cole, 1989; Correa, 1989; Goffin, 1996; Harry et al, 1993; Westernoff, 1992). The goal is always to develop new, community-fitting knowledge.

Further, it is understood that Aboriginal people must have ownership of child care and development at all stages. This should extend to the content of training curricula.

Scripted courses and supplementary materials developed at the university are not 'final' when offered to the communities; rather, they are just beginning their 'generative life.' Funding agencies that contributed to the elaboration of this model in its formative stages (1989-1995) had hoped that once the effectiveness of the curriculum had been demonstrated, it would be portable in its entirety to other Aboriginal communities. While the *model is definitely portable*, the entire curricula are not. Meeting an expectation of transportability would revert back to the mainstream road, where the journey would likely end with pre-emptive, prescriptive, 'pan-aboriginal', 'one size fits all' curricula. A key feature of a generative approach to Aboriginal capacity building is that the training partnerships are process-oriented so that on-going collaboration between post-secondary institutions and Aboriginal community partners is possible.

At the same time, the university-based portion of the curriculum for each course in the training program can be portable. In the First Nations Partnerships Program, the university-generated portion of each course is explicit about its predominantly Euro-Western perspective (although Aboriginal research, theory and practice are included when available), with the understanding that community partners where the program is delivered will generate a significant portion of the curriculum for each course through the 'generative curriculum' process.

There are some constraints within which the partnerships operate, particularly the need for the program to have academic credibility, to meet requirements for a university awarded diploma (prized by many First Nations), to meet provincially legislated licensing and accreditation criteria, and to enable graduates to ladder on to degree level courses at other post-secondary institutions if they choose. These are many 'task masters' and they introduce some tensions in negotiating content and competency requirements that are sometimes useful and sometimes not.

## 6. Students as role models in their communities

Evaluation research on the First Nations Partnership Program has shown substantial benefits to the community as a whole when community members who are known and respected successfully complete a training program that community members can see and understand. Most students who enter the partnership training programs have completed high school. They live in rural communities with extended families and social networks providing practical and emotional support. Students soon find that they become a source of information for community members. As an Elder in Tl'azt'en Nation said: *"They start to know now they are gifted for this."*

Students' self-esteem increases as they become recognized by other people in their community for their leadership capacity in working with children. Self-identity and self-confidence is fostered within a stable, cohesive student group who goes through the training program together as a cohort. There is a tremendous sense of being valued and of having the home culture and language valued as they work through and contribute to the generative curriculum over an extended period. A former Indigenous instructor in a partnership program involving Nzen'man' Child and Families Services at Lytton, B.C., Dr. Lisa Sterling commented: "In both literal and symbolic ways, students find their Indigenous voice." A program instructor in a partnership program with Tl'azt'en Nation in B.C., Liz Burch, described:

*"There was a lot more sharing as the course went on, because people became confident, they found a voice for themselves. I really remember the women coming into my classroom at first. They would speak with their heads down, and in a voice so quiet that you couldn't hear it. And now, I can honestly say that every single student can speak out and say what they need to say."*

Strengthening voices, especially 'Indigenous voice', would be a key outcome of any training program for community-based language facilitation practitioners.

An evaluation of the First Nations Partnership Programs completed in 2000 found a high rate of student retention and program completion (Ball, 2000). In B.C., nearly all students achieved ECE certification compared to a national average completion rate of 40% or below among Aboriginal students in other post-secondary educational programs. Many others took over staff positions in existing services for children and youth in their communities. In addition, 65% of graduates initiated new programs in their home communities, including:

- out-of-home day care centres;
- family day cares;
- Aboriginal Head Start;
- infant development programs;
- heritage language immersion;
- home-school liaison programs;
- school-based teacher assistance;



- youth services.

A further follow up of 35 graduates from partnership programs involving Lil'wat Nation, Tl'azt'en Nation, and the communities of Treaty 8 Tribal Association showed that most graduates are continuing to work as managers and front-line staff of ECCD programs in their own communities (Ball, 2004).

## 7. Community transformations: Ripple effects across the community

*“One stone was thrown in the pool, and now the effects are rippling to wider and wider circles of influence.”* (Graduate of First Nations Partnership Program, Cowichan Tribe, B.C.)

In the First Nations Partnership Programs, students have described how changes are slow and incremental, but revolve in all ways around what is best for children and families in the environments in which students are preparing to work. New ways of teaching and learning undertaken in the post-secondary classroom lead to positive changes in the students' own parenting skills. These ripple out through their families and friendships. Elders bring their knowledge of traditional ways to students and instructors and new intergenerational relationships ripple out through the community.

The training practica significantly increase awareness and networking in the wider community. Non-Aboriginal practicum supervisors frequently remark on the quiet manner that many students display with the children in their centres. One supervisor in Prince George, B.C. remarked, *“We learned so much from having the three students doing their practicum in our centre. They have a quiet, personal way which the children found very non-threatening, warm, and engaging. We found that although they were very non-directive, they soon gained a certain authority with the children that had a very calming effect on the whole centre, including many of the staff!”*

Bridge-building between neighbouring Aboriginal and non-Aboriginal communities providing children's services in the same region can result in some of the first collaborations for sharing knowledge and resources. For example, a graduate of one of the First Nations Partnership Programs now regularly provides consultation about First Nations children attending a largely non-Aboriginal child care centre, and she visits the centre to lead activities that enhance children's appreciation of First Nations cultures and languages. In exchange, a child care specialist from the non-Aboriginal centre provides consultation to the newly established child care centres on the reserve. Some First Nations Partnership Program graduates are now serving on regional boards representing ECE. Bridging cultures, gaining new insights, and deepening understandings are the rewards of engaging in bicultural teaching and learning partnerships - as instructors, centre directors, practicum supervisors, and direct service providers.

The effects of community confidence and capacity on child development and family well-being need to be studied through impact evaluation and basic research. We do not know exactly how culturally appropriate child care affects key indicators like

language development, cognitive development, and social competence. But we do know that very young children rely on positive social interactions, the language environment, and cues found in adult behaviours and their communities as a whole to stimulate their own language development, their propensity to explore and to engage socially, their self-esteem and cultural identity. As a graduate from a First Nations Partnership Program involving Nzen'man' Child and Family Services in Lytton, B.C. explained: *“Because of the training and having programs run by our own members, one of the things that’s been happening is that the families around here, the communities, the Elders, the whole culture ... we are slowly starting to put ourselves back together.”*

## 13 FAMILY, COMMUNITY AND HOME LANGUAGE DEVELOPMENT

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### Primary caregivers as first teachers

The role of families is critical to the overall development of children, including their communication capabilities. The strongest predictor of children's early language development is the quantity and quality of language communication to which children are exposed and with which they engage in the home. Good at-home parenting is a significant factor in children's achievement, health, and self-esteem. There are many ways to work with families through community-wide activities and through programs offered to family members both through home visiting programs and through family involvement programs outside the home.

Aboriginal communities and agencies need to be supported to explore many different ways to reach out to, involve, encourage and support families to develop early language skills from infancy throughout childhood, and to engage them in language and literacy promoting programs or early interventions for children having difficulties. The most important partners for parents to develop their confidence and skills in promoting early language in their children are the Infant Development Consultants and Early Childhood Educators in their communities.

Dr. Dana Brynson, B.C. Provincial Advisor for Infant Development Programs, noted that in Aboriginal communities and agencies serving them, there is a need to: *“raise awareness of the powerful role of families in child development, particularly social, emotional, language and cognition in the first years of life, and the associated expectation that community programs will be sufficient to alter developmental trajectories. There needs to be a strong emphasis on support to the family.”* She urges community-based practitioners to recognize and reinforce the pivotal role of parents in child development. She also emphasizes the need to train all practitioners in family-centred approaches to practice.

Children and families sometimes need support in order to rely upon and strengthen their own "internal navigational system" for achieving optimal development. The roots of this internal guide lie, in part, in each individual's culture of origin. The more that family development work can embody and mirror the family's culture, the more the work will strengthen the capacity for optimal child development.

A Cree Elder and grandmother who participated in a recent study (Ball & Lewis, 2005) noted: *“some babies don't learn to talk well, and some of them could use some help.”* For many Aboriginal parents, particularly those with limited resources and/or in small isolated communities, their child's language development is decided as much by the realities of daily circumstances as by conscious choice among alternatives. The language support that the child receives depends on who is available to take care of the child and what kind of knowledge, skills and support that person has. And it depends on

the kind of cultural environment the child lives in day-to-day, as well as the roles that the parents' and caregivers' own upbringing, health, economic circumstances, and stresses have played in shaping their thinking and parenting skills.

### **Residential School effects**

Dr. Lorna Williams, Interior Salish scholar in Education at the University of Victoria, notes that many Aboriginal parents and grandparents of the current generation of children have been devastated by colonial attitudes and policies. For First Nations, the most recent assault was through the Indian Residential Schools movement. These colonial policies and practices communicated to them that they have an inadequate language and a primitive/backwards culture and way of life. Most children in Residential Schools were required to stop speaking their language, relinquish their spiritual beliefs, and stop their cultural practices. As a result, most of today's current First Nations parents and grandparents lost not only their capacity to speak the language of their ancestors, but also their confidence in being able to use *any* language effectively. Even more fundamentally, many have lost confidence in their capacity to engage in the kinds of care giving social interactions that promote attachment and bonding, which are the primary vehicle for the transmission and stimulation of language in infancy and early childhood. As Dr. Lorna Williams puts it, the *carrier factor* has been lost. This loss is multigenerational.

►► Policy makers and service providers need to appreciate language development as an aspect of inter-generational family development that is relevant to a range of policy areas, including Residential School healing, community development, adult education, employment, literacy, and social justice.

Sharla Peltier and Colleen Wawrykow, both First Nations SLPs, similarly noted that Residential School experiences have resulted in some parents not knowing how to engage with their infants or how to play with their children. They point out that attachment and playful social interactions are primary contexts for developing and enjoying vocalization and language. Young parents who were not raised by their own parents and who experienced poor modelling and often abuse from teachers and attendants in Residential School may require specialized support to develop attachment and bonding and to learn how to engage in affectionate interchanges with their infants. They also noted that, for some, Residential Schooling has resulted in not seeing value in providing books or other language based materials in the home and having feelings of inadequacy that have made them fearful or intimidated by schools, teachers, social programs and professionals.

In a recent study, LaFrance & Collins (2003) found that many First Nations parents point to Residential Schools as a primary cause of the loss of their heritage language and culture, and their confidence in expressing themselves in ANY language. They describe their loss in confidence in being able to learn and being able to parent. They also describe loss of knowledge about how to live well in families, how to do specific child-rearing tasks, and how to provide rites of passage for their children, such as

birth rites, naming ceremonies and puberty rites. These are deep wounds to the First Nations peoples that have deteriorated the foundation of parent-infant bonding and support for Aboriginal children's socialization and communication skills.

**Dr. Lorna Williams stresses the reactivation of affectionate, care-giving interactions between primary caregivers and infants as the foundation for strengthening the capacity of Aboriginal families and communities to promote optimal language development in young Aboriginal children.**

## I. Primary caregiver support strategies

►► Strategies to support primary caregivers in providing the foundation of attachment, bonding, and positive social interaction must be a central component of a comprehensive strategy to promote Aboriginal young children's language development.

Dr. Judith Evans, an international early childhood specialist who contributed to this Concept Discussion Paper, notes that: *“around the world, while there are some outstanding parent support programs, within the broader scheme of early childhood programming, parenting support as an ECCD strategy is not nearly as well developed as programs directed toward children. A common pitfall is trying to get parents to fit into a prescribed mold. More work needs to be done to train practitioners to build on the strengths of what people are already doing, what they already know, and what they are ready to try.”*

How do we involve parents and other caregivers in programs to promote the kinds of cognitive stimulation and sensitive speech-language interaction that lay the foundation for the optimal development of infants and toddlers? How can caregivers be supported in learning and using simple techniques that will increase effectiveness as communication partners with children of varying abilities? These challenges need to be addressed in family development work with every cultural and socioeconomic group, but they are intensified because of the subjugation of Aboriginal peoples to colonial culture and governance. Mainstream 'parenting' programs need to be evaluated carefully by Aboriginal community-based practitioners before they are imported for family development work in communities. Care must be taken to avoid unwitting imposition of parent education and support programs which teach care givers how to accommodate their care-giving practices to conform to the European-heritage culture, and to act as if assimilated. Elizabeth Crais (1991) and Judith Evans (2000) have both provided some useful guiding principles and things to think about in developing culturally appropriate approaches to supporting parents of young children's development.

►► Investments are needed to create and provide home language stimulation guides, workshops and simple resource for parents so they can follow up with recommendations by speech-language pathologists and reduce their dependency, including the number of specialist appointments.

Marjorie Matheson-Maund, a contributor from the Dogrib Community Services in Yellowknife, offered this scenario to illustrate the need for more community-based supports for language development: *“Speech-language pathologists used to visit two of our four communities twice a year to assess children suspected of having a speech-language delay. Reports were then sent to the early childhood programs and parents, with ideas of how to support children in their development. These reports were very difficult to interpret and the recommendations were difficult to follow through with. If parents living in Rae/Edzo wanted to access speech language services for treatment, they had to travel to Yellowknife, which is a round trip of 216 kilometers on a partial gravel road, taking three hours driving time. This would mean that parents whose child needed to attend speech language appointments one or two days a week would be unable to work in a full time job, since approximately one or two days a week would be spent accessing speech-language appointments. Parents in the communities of Whati, Wekweti, and Gameti do not even have the option of attending regular speech-language appointments as these communities are fly-in communities with no road access.”*

An existing strength in the Dogrib communities, noted by Marjorie Matheson and Marcia Dean, is the strong desire on the parts of parents and child care staff to “do their best for their children” and their desire to learn more about what they can do. Recommendations for tools to empower parents to provide effective at-home support for their children, especially those with difficulties, include:

- the development of simple resources that primary caregivers can use at home to stimulate language development. Suggestions include simple audio-tapes, video-tapes, CDs, books and toys, or ideas for parents to make a culturally relevant ‘kit’ for language stimulation through parent-child play;
- plain language descriptions about how children learn language;
- plain language ‘tips’ for stimulating and extending language;
- descriptions of ‘red flags’ to signal a possible speech-language difficulty;
- instructions on how to support children with special language needs.

Contributors from the Nunavut, northern Quebec and Labrador also emphasized the urgent need for these basic parent support resources, stressing that these should be available in the local home language(s), which is often an Aboriginal language.

### **Multiple caregivers**

Many Aboriginal children are not cared for primarily by their biological parent, but rather by extended family members, other community members, or foster parents. These arrangements may change frequently, with implications for who to involve in parent training and participation programs, and how to involve them consistently.

Concepts for practitioner training, programs, and research need to encompass diverse and changing care arrangements for children.

## **Supporting Aboriginal fathers learning fatherhood**

Tl'azt'en Nation Grand Chief Edward John has stated at numerous conferences on Aboriginal child well-being, "*Fathers are probably the greatest untapped resources in the lives of Aboriginal children today.*"

Within a parent support strategy, particular attention should be given to the actual and potential role of fathers in attachment, bonding, social interaction, and language facilitation. Aboriginal fathers are arguably the most under-valued and under-supported population in Canada. A current study of Aboriginal fathers of young children is currently underway (Ball, in progress, [www.ecdip](http://www.ecdip)) with funding from the Social Sciences and Humanities Council of Canada. The study is showing unexpected large numbers of First Nations and Métis fathers who are single heads households caring for young children. Interviews obtained for the study are revealing overwhelming desire on the parts of many Aboriginal fathers to 'learn fatherhood' and to play constructive roles as part-time or full-time custodial parents.

## **Outreach to families**

Programs to promote attachment, bonding, positive social interaction, and language enhancement at home require a high degree of flexibility and ingenuity. Home visiting can sometimes be a useful approach to building relationships with parents and other family members (very often grandparents) who are caring for infants and young children. Once a relationship is formed, care-givers can be encouraged to participate in family and community activities that promote language.

Centre-based programs such as parent-tot play programs can be an alternative or addition to home-visiting. Drop-in programs can sometimes function as a 'magnet' to draw primary caregivers out of the home and into a laddered series of program opportunities for themselves as well as their young children. The way that centre-based child care programs have worked in some Aboriginal communities as a 'hook' to draw caregivers in and gradually involve them into programs created around child care as the 'hub' has been described in a recent report (Ball, 2004) entitled: *Early Childhood Care and Development Programs as Hook and Hub: Promising Practices in First Nations Communities.*"

## **Play-based programs**

Many contributors to this Concept Discussion Paper emphasized play-based programs as foundational in promoting the kinds of empathic social interactions that promote language. Sharla Peltier, a First Nations SLP practicing in Nipissing First Nation, emphasizes a focus on play as a foundation to developing communication skills (e.g., turn-taking, role-taking, socialization). She cautions that many parents who are

survivors or secondary survivors of Residential School may not be ready or comfortable to engage in play with their children, and sensitivity about pacing the introduction of different types of programs is key. She suggests “*beginning with child-child play, especially involving multi-aged groupings, as a way to lay the foundation for social communication, empathy, and later cognitive skills that support reading and writing. Programs can also involve extended family members, such as aunties and uncles, if parents are unavailable or not ready.*” Multi-aged activities and programs have been advocated by several Aboriginal agencies, such as the B.C. Aboriginal Child Care Society. Multi-aged programs for young children in programs around the world have been described by Roopnarine & Metindogan (in press), among others.

**TLC3.** A recently completed project to promote early language and cognitive development through community-based programs, called TLC3, offers some insights, strategies, and feedback about resources for family-focused initiatives (see [www.tlc3.ca/html](http://www.tlc3.ca/html)). The project was undertaken by The Hincks-Dellcrest Institute and was sponsored by the Lawson Foundation. Each of the eight project sites was supported in planning and piloting their own community-driven approach to early language and cognitive development. A description of one Aboriginal project site at Meadow Lake Tribal Council First Nations Child Care Program is included in Appendix E. This community has a long-standing toy and book lending library, and parent education program. For the TLC3 project, they used a well-known resource for parent education called “Nobody’s Perfect,” and introduced a “Let’s Be Social Program” in their child care program to help preschoolers learn pro-social skills.

**Parent-Tot Mother Goose Program.** ([www.nald.ca/mothergooseprogram](http://www.nald.ca/mothergooseprogram)) This is a widely used approach to promote playful parent-child social interactions and early language development.

**Parents As Teachers.** ([www.patnc.org](http://www.patnc.org)) This American organization has extensive information useful to parents and to practitioners reaching out to involve parents.

## II. Community-wide activities

Community-wide special events and ongoing programs can enhance the language environment for children. Dr. Don Taylor, a professor at McGill University involved in Aboriginal teacher training, noted: “*A challenge for Aboriginal children’s language development is that in many small communities, people understand each other without using a fully elaborated form of language. They use a restricted code that often relies on many non-verbal gestures that everyone understands. So children may not be exposed to the elaborated code of their home language. Programs to promote children’s language development must work at the level of the whole community in order to provide opportunities for children to hear and engage with the full range of their language.*”



## 1. Story-Telling

Sharla Peltier notes that story-telling is: “*a natural area that we as Aboriginal people can draw upon as a form for oral history, language retention, extending memory capacity, and learning and practicing formal English language. It is also a great way to bring adults and Elders in to connect with children and to make program content and activities culturally relevant.*” Community-wide activities involving story-telling (e.g., KELI) and dramatic enactments of stories can also be an enjoyable way to promote the full use of language while offering children, youth and adults the social safety of a provided role or mask. The use of dramatic play in ways that are grounded in the cultures of children and families participating in early childhood education programs has been discussed in the literature (Roopnarine, Suppal, Shin, & Donovan, 1999).

## 2. Music and Movement

Communication skills can be nurtured and developed through activities involving music and movement. Sharla Peltier suggests that this is: “*a fantastic way to reach and draw out those children who are challenged with attention deficits, hearing impairments due to otitis media, autism spectrum, and severe speech or language delays... The drum, shakers, and games involving rhythm and sequences of movement like social and ceremonial dancing would be excellent program components, all with a view to nurturing communication skills.*” The involvement of community members in singing, such as community song evenings and singing groups, is another example.

## 3. Development of Culturally Appropriate Resources

Many contributors to this Concept Discussion paper emphasized the urgent need for curriculum materials of all kinds that are culturally appropriate for Aboriginal young children. Nowhere is this need felt as strongly as in the north, where there is a paucity of books, posters, videos, audio-tapes, or play materials available in the heritage languages of the north. New resources in heritage languages are a critical enabling condition for effective family-focused and child-focused programs to promote Aboriginal early language development.

**Compendium of Resources to Support the Educational Component of Aboriginal Head Start Programs.** ([www.ahsabc.com/compendium](http://www.ahsabc.com/compendium)) This online compendium, commissioned by Health Canada’s Aboriginal Head Start program in 2001, describes 850 resources that are culturally relevant for Aboriginal ECD programs that use English. The compendium focuses on Aboriginal cultures in Western Canada, and resources in English. The Compendium could be updated as well as expanded to identify resources suitable for Aboriginal ECD programs in communities across Canada, including resources in French and in Aboriginal languages in addition to English.

***“Moe the Mouse and his Theme Box”*** is a pilot project conceived by the Ann Gardener and Margaret Chesterman for the B.C. Aboriginal Child Care Society. Described in Appendix F. This resource was developed specifically to enhance language-mediated interactions between Aboriginal caregivers and children. It is inexpensive and fairly simple to use in either family development or children’s programs. It has been extremely well received by Aboriginal community-based programs, and the Society is interested in expanding knowledge about ‘Moe.’ This approach could also be a model for heritage language based resources.

## 14 WHAT ROLES CAN SPEECH-LANGUAGE PATHOLOGISTS PLAY IN ABORIGINAL CHILDREN'S LANGUAGE DEVELOPMENT?

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Specialist services provided by Speech-Language Pathologists (SLPs) are one critical source of support for Aboriginal children's language development.

There is a serious shortage of SLPs in general, and only three currently known Aboriginal SLPs who are members of the Canadian Association of Speech-Language Pathologists and Audiologists, the professional body representing 4200 SLPs in Canada:

- Sharla Peltier (serving Nipissing First Nation, Ontario);
- Lori Davis Hill (serving Six Nations, Ontario);
- Colleen Warwykow (serving School District 69, B.C).

Sharla Peltier has pointed out several barriers to supporting Aboriginal early language development through SLP services:

- many communities do not have access to SLP services;
- specialist visits may be so intermittent that there is little possibility for specialists to get to know the communication styles or the people of the community or provide continuity of care;
- most communities are not well informed about what SLPs can do;
- many communities do not know how to collaborate with specialists to ensure that services offered are culturally appropriate and effective within the circumstances.

### **Broad scope of SLP practice in addressing individual needs**

There are many roles that SLPs have specialized training for to address speech and language related challenges. An example is provided by Patricia Carey, an SLP serving the Mamawetin Churchill River Health Authority region in northern Saskatchewan. Patricia notes that she is often referred children from 0-60 months who live on the reserves in the LaRonge area. Currently, referrals are made to her by physicians in the LaRonge Medical Clinic, by the Cleft Lip and Palate team and by pediatric respirology at Royal University Hospital, by pediatricians from Kinsmen Children's Centre, by Indian Health Nurses, by Aboriginal Head Start program staff, and by Child Care Centres. She notes that for children who live on reserves, despite referrals and sometimes confirmed diagnoses, there are no services available to them because this is a non-insured health benefit. Some of the referrals she receives include:

- Difficulty feeding or swallowing food or liquid resulting in choking and/or aspiration
- Monitoring of recommendations for use of a thickening agent in liquid feeding to assist the development of normal swallowing
- Cleft lip or palate which requires consultation of an SLP to assist in related feeding and communication problems,
- Receptive language delay or disorder (understanding of spoken language) which interferes with the ability to process or recall information that has

- been heard (regardless of the language used in the home or school)
- Expressive language delay (formulating or creating a spoken message) which interferes with the child's ability to say what he wants to say, or effectively use the words that he knows (regardless of the language used in the home or school)
  - Stutter
  - Autism Spectrum Disorder and related communication difficulties
  - Effects of alcohol or other substance consumed prenatally by the mother
  - Oral-motor problems which severely interfere with the ability to coordinate the muscles of the mouth so that speech is intelligible.
  - Behavior problems which have their root in frustration due to communication delay
  - Down Syndrome and related speech-language delays
  - Cerebral Palsy and related speech-language difficulties

This example of the types of referrals received by one SLP serving a rural First Nations population indicates the scope of practice of SLPs. The variety of referrals puts into some perspective the potential roles for SLPs beyond what could reasonably be expected for Aboriginal Infant and Early Childhood Care and Development Practitioners with Early Language Specialization training.

### **Broaden scope of SLP practice in communities**

In addition to the individual-focused referrals received by Patricia Carey, illustrated above, there are many other roles that SLPs can play, beyond assessment and treatment of speech-language disorders in individual children. A few SLPs may have had opportunities to have developed relationships with Aboriginal children, families, and community-based program staff. For example, Deanne Zeidler, an SLP, has been contracted by Lil'wat Nation in B.C. to provide almost full-time services to this community of approximately 1000 members. Working in close collaboration with community-based Aboriginal staff and with specialists contracted to work part-time in the multi-service center on reserve, Deanne plays a wide range of roles, including: direct screening and assessment of children in the community and in programs, numerous individual and groups programs for children with language delays and disorders, group programs for parents and other caregivers, community awareness and education, supervision and teaching of Aboriginal students in early childhood care and development training, and mentoring of early childhood care and development staff in language facilitation and early detection. Deanne is working with community staff to develop an innovative program for parents to promote early language development. She recently completed a contract with the B.C. Aboriginal Child Care Society leading to production of "A Guide for Culturally-Focused Early Intervention Therapy Programs For Aboriginal Children & Families in British Columbia" (see 'Key References').

►► Examples should be sought through a national survey and through the national conference of SLPs (CASLPA) in Canada who have worked effectively with communities to build capacity and create programs that are culturally appropriate and involve families. Documentation of promising practices, and an understanding of the conditions that enable them, can illuminate new pathways for development in the field of Aboriginal Early Language Facilitation and Support.

### **Current challenges of SLP practice with Aboriginal children and families**

A serious challenge for Aboriginal communities is the lack of SLP services. Another challenge is that SLPs and Aboriginal service recipients need to be able to work together to build relationships based on mutual understanding and to harness the skills of SLPs in ways that are useful given the cultures, goals, locations, resources, and circumstances of Aboriginal families and communities.

Many SLPs work across cultures. However, most have not had opportunities to:

- hone cross-cultural communication skills;
- become culturally literate with reference to the diverse groups they are serving;
- learn about and accommodate language socialization and sociolinguistic styles of communication in the community of children they serve;
- adapt their professional practices in response to the expressed needs and goals of children and families they serve.

In a recent study (Ball & Lewis, 2004), SLPs were painfully aware of their self-assessed inadequacies. Most expressed an urgent need to find alternative ways of reaching out to non-European heritage parents and children in culturally appropriate ways that their training, funding sources, and service mandates have not prepared them to do. Many SLPs have expressed their frustration and even culture shock when they begin work with an Aboriginal family. For example, although they may be asked into an Aboriginal community, many report a cool or indifferent reception by community members, especially if there is any suggestion of testing or therapy for individual children. Overall, SLP respondents in the study reported that their training, tools, and agency mandates do not seem to fit the self-perceived needs, goals, pace, or style of Aboriginal parents, grandparents, or other community caregivers.

The designation ‘speech-language pathologist’ conveys an individual dysfunction focus that several SLPs who participated in the study identified as problematic. How to transform the role of ‘Speech- Language Pathologist’ into the role of ‘Speech-Language Partner’ may well be the crux of the question of how to harness and make accessible the knowledge and skills of SLPs for supporting Aboriginal young children’s language development. With this in mind, it will be helpful to think of SLPs as Speech-Language Partners in the development of a strategy for Aboriginal Early Language Facilitation and Support.

## **Improving SLP practice with Aboriginal children and families**

What approaches might be helpful in supporting Aboriginal children's language development? The 70 SLPs across Canada who participated in the recent study (Ball & Lewis, 2004) all had experience providing services for Aboriginal children. These experienced professionals generated a number of recommendations for how they could work more effectively alongside parents and communities. Themes and recommendations derived from this study are summarized here for further discussion.

### **An 'altogether different approach'**

Among the respondents, 79% perceived an urgent need for an altogether different approach to serving Aboriginal children, compared to serving children of dominant cultural groups (e.g., European heritage). There was general consensus among the respondents that an 'expert' service orientation is ineffective. Most respondents emphasized that efforts to influence and shape children's language development need to be guided by the values and wishes of the families and communities in which the children live. Family and community-driven practice that is consultative and collaborative is more culturally appropriate and effective than professionally driven approaches.

### **Working collaboratively**

**Specialists need to work with families and Aboriginal ECCD practitioners to understand how the knowledge they bring can be a part of already existing successful language support efforts.**

*"An altogether different approach is needed that would include taking the time to learn about the specific community, their values and hopes for their children, making the link between this information and the already known professional information, and figuring out how to effectively bridge the two in order to support the caregivers in the community to best facilitate language development that respects a desire to maintain first language as well as develop facility in the language of school or mainstream culture."*

*"Non-helpful practices include telling the adults what to do...telling the adults you'll show them what to do, giving written handouts, or inviting the community to a lecture or presentation. It is not helpful to assume that you know what to do and by virtue of your knowledge you have the right to tell Aboriginal people how to communicate with, teach, or raise their children."*

*"Check your assumptions at the door. Pragmatics in particular are a big issue. You need to learn about appropriate interaction patterns."*

*"The programs for pre-schoolers assume a value of 'normative development' along majority culture lines and teach toward advancing children according to those values. Aboriginal children's experiences, understanding and expression*

*often seemed, in my experience, mismatched with the preschool content and goals.”*

## **A population-based approach**

SLPs concurred that language development and special needs should be addressed, whenever possible, in the context of all children and not as isolated needs.

*“Practitioners can make an important contribution at the community level, building awareness and understanding of language development, how it progresses and why it matters. Practitioners need to engage in preventive programs that are not necessarily tied to specific children on the caseload. Caseload sizes need to be kept small so that practitioners can be more present and available to the community.”*

Many early intervention strategies used by SLPs in Canada are based on individual deficit models that have been developed largely in middle-class urban settings based on the values, beliefs and goals of families primarily of European descent. More than half of SLPs reported that they spend the majority of their time in Aboriginal contexts providing services, in response to referrals, to individual children with communicative disorders and weak language skills. However, most respondents strongly recommended that services to Aboriginal children use a more population-based, capacity building approach than is currently practised (see Table 5).

Schuelle (2001) argues that SLPs need to participate in a collaborative process of developing early child development curriculum that enhances the language and language related skills of all children. SLPs could share knowledge of language development expertise with infant and early childhood development practitioners, while Aboriginal practitioners could share their cultural expertise and knowledge of the community.

## **Community capacity-building**

As discussed throughout this Concept Discussion Paper, a valued goal of many Aboriginal communities is to strengthen knowledge and skills within families and among members who are leading health and human service initiatives for their community. SLPs who participated in the study reflected this goal. They uniformly rated community-level education and education, training and mentoring of caregivers as the most appropriate form of service delivery. They suggested that SLPs can usefully engage with community members to:

- strengthen community leaders’ understanding about SLP services;
- strengthen community practitioners’ capacity to identify developmental concerns, to advocate, and to partner in service delivery.

Direct therapy with individual children or groups of children was rated by SLP

respondents as useful but often the lowest priority. Canadian Speech-Language educator Dr. Genese Warr-Leeper (2001) has developed a model showing a continuum of programs and services such as that recommended by SLP survey respondents have been developed.

## **Building relationships**

SLPs point to the importance of establishing positive and trusting relationships with Aboriginal caregivers of Aboriginal children, and with people who are trusted within the Aboriginal community to which the child belongs. As they point out, this requires a consistent presence in the community, patience, time, flexibility, understanding and a desire to learn.

*“It seems best to start by learning what is already being done, how and why and with what result. Make partnerships with the community. Get to know individual people by listening to them.”*

*“What worked for me was behaving as the “invited guest” – being quietly present, playing with children, chatting with Elders, parents, educators, etc. and asking what I could do – what kind of service they would like and then making a plan together. I rarely pulled a child for “one on one.” I received many verbal compliments for that. Practices that are not helpful include trying to work quickly, telling them what you would like to do before they’ve stated their needs and requests; not taking time to build trust; removing children from a group.”*

There was a consensus among SLPs who participated in the study that time – and remuneration for time - must be provided to build authentic relationships that demonstrate caring and respect for the values and wishes expressed, as a foundation for education, support or intervention.

*“Practitioners, and agencies that structure practitioner’s services, need to have time to work WITH First Nations services (for example, child development workers hired by the band and who are members of the band). Practitioners need time to be a visitor or helper at First Nations preschools and daycares, to better understand and appreciate their way of being. Time to build relationships with band councils and Elders.”*

## **Culturally-appropriate practices**

SLP respondents recognized the culturally-specific nature of child raising practices and the self determination of many Aboriginal peoples.

*“It is important to start by learning what is already being done, how and why and with what results.”*

*“It is not helpful to invite the community to a lecture/presentation, assuming that you know what to do and by virtue of your knowledge have the right to tell Indigenous people how to communicate with/teach/raise their children.”*



SLP respondents were frank about the limitations of their professional training and continuing education experiences with regards to cultural values. From their perspective, their training in this area had been inadequate, and they have had to learn cultural sensitivity on the job. Less than half of the 70 SLPs reported feeling well prepared, even after 2 or more years of experience, to serve Aboriginal children and families effectively.

They pointed out techniques developed in research and practice with European-heritage families do not seem to fit many Aboriginal families. For example, several SLPs commented that Aboriginal care-givers do not seem eager to engage actively in stimulating vocabulary development or frequent conversation with their children. However, rather than seeing this as a deficit, the SLP and the particular community need jointly to identify the values and styles of language interaction that culture holds as ideal and language facilitation strengths in the community upon which to build. For example, respondents mentioned working with communities that appeared to have a preference for quiet, observant children who are quietly respectful of Elders, and who can learn from watching and listening. Methods that build on these strengths include helping to organize frequent story-telling activities, and creating multi-generational learning situations where younger children can hear and use language in the context of action.

SLPs strongly emphasized the importance of working with Elders, advocates for early childhood development in the community, parents, and other trusted service providers, and being responsive to their expressed values and wishes. SLPs described how these people can offer feedback about tools, methods, and messages that are likely to be accepted and useful in various families or community groups. They can provide knowledge of cultural protocol, cultural values, and culturally conditioned goals for children's development, the social and linguistic organization of their language and the role of language. Events to support parents' learning need to be structured in ways that fit the parents' most comfortable working style. For example, some SLPs noted that meetings are best conducted within small rather than large groups, including a social aspect to help make the event less threatening for parents.

This view is consistent with various practice guidelines that have recently been developed to guide the professional practice of speech-language pathologists in multi-cultural matters. The practice guidelines of the Canadian Association of Speech-Language Pathologists and Audiologists guide SLPs to work in collaboration and with support of one or more people in the community who are proficient or nearly proficient in the heritage language and/or dialect and who are from the same cultural background as the child in order to provide effective and culturally appropriate services (CASLPA 2002).

With guidance from community members, SLPs and their community partners can design methods of language stimulation and support that are culturally appropriate and culturally appreciative. Leaders in research and training on SLP practice have also identified Euro-centric cultural bias as a potential problem in the application of many

models of early language facilitation, early intervention, and parent education, and have offered suggestions for culturally responsive practices (Johnston & Wong 2002; Van Kleek, 1994; Warr-Leeper, 2001).

Sharla Peltier and Colleen Wawrykow offer some specific suggestions related to the key theme of capacity building.

- The whole family, including the extended family, should be involved in service planning if possible.
- Older siblings may make excellent mediators of communication programming, as they are often responsible for the younger children.
- Frequent consultation sessions and short assessment sessions work best.
- SLPs can be employed to act as indirect mediators whose role is the education of other agency workers and support for parents' language facilitation efforts.
- Standardized testing or use of lengthy questionnaires early on is not helpful.
- If attendance is an issue, it is important to problem-solve and possibly change the service delivery model - connect with other services, community workers and/or family members. Terminating services is not useful.
- Referrals to other agencies outside of the community should be postponed until rapport is established. Attendance at outside agencies is more likely if the referring individual mediates to establish a firm connection.

### **Community-appropriate assessment and intervention**

SLPs questioned the usefulness of currently available published tools for use with Aboriginal children. Over half of the respondents perceived that it is critical to develop new education/intervention and assessment tools specifically for Aboriginal children. Forty-one per cent also perceived a need to develop new tools for monitoring overall development suitable for Aboriginal children (e.g., experientially relevant materials and tasks).

Given the absence of any validated tools for assessing speech-language development of Aboriginal children, SLPs need to get help from Aboriginal communities to sort through her/his toolkit to find ways of investigating what is going on with children's language development, whether it is healthy and robust in terms of the culture, and how to support more effective language-strengthening activities. A few SLPs have described how they have sometimes asked for feedback from Aboriginal representatives on the use of education/intervention or assessment tools before using them with the children. Using this process has generated helpful feedback, as one SLP describes:

*For assessment, it would be helpful for the practitioner and community members to sit together and discuss: What skills does the child need to communicate effectively at home, school and in the community? How close is the child coming to accomplishing those? What bridges can be built to support the child in meeting the demands of educational language in the school? How should the curriculum be changed at preschool and school to respond to the information obtained?"*

Some SLPs recommended that an Aboriginal language facilitation curriculum in early childhood programs could use a criterion-referenced model that would equip children to do better in an absolute sense rather than a relative sense. Strategies to measure change would indicate improved performance on measures that are ecologically valid for home, school and community and not be based on norms and percentiles.

Related to this, Dr. Lorna Williams, First Nations professor of Education, introduced ‘dynamic assessment’ approaches to work with First Nations children and other cultural minority students in the Vancouver School District. She has particularly advocated an approach involving mediated learning experience, following the pioneering work of Feuerstein, Klein, and Tannenbaum (1991) for children who have experienced serious cultural deprivations.

Sharla Peltier and Colleen Wawrykow, both First Nations SLPs, recommend that more relevant education/intervention strategies and tools for teaching include: visuals such as pictures of Aboriginal people and familiar rural community themes; story and legend re-telling activities; crafts, for example using local clay, grasses, or leather followed by group discussion for re-telling the steps involved; community outings with photos to use for re-telling later.

### **Support for heritage language learning**

SLPs expressed a desire to support children learning their heritage language if they were given direction from speakers of a child’s home language. Many SLPs have affirmed their belief that parents should be encouraged to maintain their dominant language used at home. This is consistent with professional practice guidelines and directions for SLPs working in a multi-lingual and multi-cultural context (CASLPA 2002; ASHA, 2004; Genesee et al., 2004). Learning the heritage language can make a positive contribution to a child’s self-esteem and sense of connection to his/her community.

### **Implications of dialects**

Many non-Aboriginal SLPs have commented on what appear to them to be features of Aboriginal English dialects. First Nations SLPs also emphasize that new screening measures must take into account speech and language dialect differences. A study currently underway is exploring the nature of First Nations English dialects and the implications of dialect learning for assessing and supporting children’s language development (Ball & Bernhardt, in progress, [www.ecdip.org/dialects/index.htm](http://www.ecdip.org/dialects/index.htm)).

More research is needed to explore characteristics of Aboriginal English and French dialects and languages, and the implications of these dialects for assessment and intervention. For example, some work on ‘English as a Second Dialect’ has been directed at helping children learn to ‘code switch’ from their Aboriginal English dialect to the variety of English used in school. Research is also needed to track the pace and sequence of Aboriginal children’s language development when they are growing up in a

heritage language, English or French dialect, and as monolingual, bilingual or multilingual.

**Huge gaps in basic knowledge is a serious hindrance to development of valid assessment tools and effective interventions that do not also have the potential to interfere with Aboriginal children learning to speak and use heritage and colonial language according to norms in their own speech communities.**

## **Policy Implications**

Research, policy and practice are interrelated and can inform one another to provide impetus for change (Wharf, 1988). Some implications for policy development have been identified from this study.

**1. SLP services need to be guided by the values and priorities of Aboriginal families and communities**

**2. Communities and SLPs need to work together in partnerships**

Through existing Aboriginal early child development advisory structures/personnel in the provinces and territories, Aboriginal community leaders could become more informed of the scope of practice of SLPs. Aboriginal infant and early childhood development advocates could work more closely alongside SLPs providing services in their region to ensure a service approach that supports local culture, values and needs.

**3. Resources for speech-language services to Aboriginal young children need to be increased**

Targeted funding for speech-language services to Aboriginal children needs to be made available for both on- and off-reserve populations.

**4. Professional training of Aboriginal SLPs needs to be made accessible**

- Barriers to access SLP training need to be removed (e.g., distance education, bursaries, loan forgiveness).
- Incentives are needed to attract Aboriginal students to 6 years of post-secondary training.
- Training programs need to be culturally relevant for practice in Aboriginal communities.
- Alternatives to SLP training to prepare Aboriginal practitioners to support early language development should be explored.

**5. The scope of SLP training curriculum needs to expand**

Pre-service and in-service course work should be introduced to prepare SLPs for collaborative practice in communities, cross-cultural communication, and practice with Aboriginal children and families.

## 15 LEADERSHIP DEVELOPMENT

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### Recommendations

#### 1. **Create Aboriginal provincial and territorial advisors for Aboriginal young children's language development**

Aboriginal children's experiences with language and the role of language are unique in many ways compared to non-Aboriginal children and require an altogether different approach. Given the importance of early language development for cognitive and social learning and school readiness, Aboriginal provincial and territorial advisors for Aboriginal preschool speech-language programs need to be established parallel to and working in conjunction with existing provincial and territorial Aboriginal infant development, early childhood development, and supported child care advisory personnel.

#### 2. **Regional and National Networking**

Provide opportunities, through regional and national conferences and teleconferences, for networking among community-based practitioners, educators, researchers, and federal funders and policy-makers to encourage and support Aboriginal leadership in Aboriginal early language development, and to create and mobilize the new knowledge base for this emerging field.

## 16 PROGRAM EVALUATION AND IMPACT ASSESSMENT

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This section suggests three kinds of investigations that will support the creation of new knowledge and mobilization of knowledge in applied practices to promote Aboriginal early language development:

- program evaluation
- impact assessment
- basic research

*How will community initiatives to promote Aboriginal early language development be evaluated?*

*If a national strategy for Aboriginal Early Language Facilitation and Support is succeeding, how would we know this? How would the effectiveness of the strategy be demonstrated? How can we determine what are the effective components of new program strategies?*

These two kinds of questions call for a framework and funding for two types of investigations.

### 1. Program evaluation:

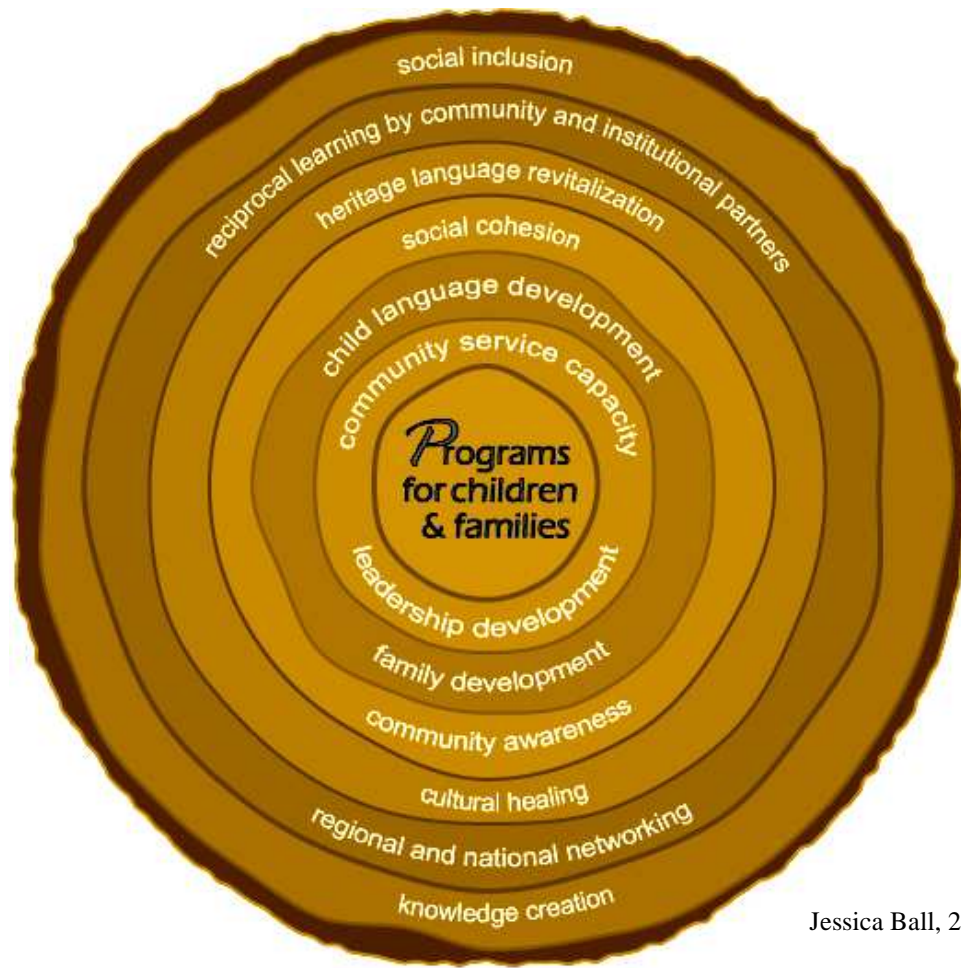
A framework for accountability and measurement of targets for program delivery needs to be developed. Program evaluation needs to be a funded component of program delivery.

### 2. Impact assessment

*Figure 5* offers a vision of the potential reverberating, transformative effects that could be achieved through strategic investment in a community-based Aboriginal Early Language Facilitation and Support programs.

Research on selected training programs and community programs should be funded to generate knowledge about what is working and what are the effective components of programs. An ecological model for impact assessment research (e.g., Cochran, 1988) would help to capture intended as well as unintended effects of program initiatives across the many cross-cutting systems in which Aboriginal children and families are embedded, as shown in Figure 5. Impact assessment research could be commissioned for a few strategically pre-selected sites that will illuminate how different kinds of initiatives work in different kinds of settings. Impact assessment would best be carried using methodologically sound research designs that incorporate collection of pre-program data and include useful comparisons across populations, programs and settings.

**Figure 5**  
**Potential reverberating effects of child and family programs**



►► Impact assessment research could be undertaken through calls for proposals from experts in this kind of research. Among groups that could play a role are:

- The Centre of Excellence for Children with Special Needs based at Lakehead University has indicated strong interest in receiving such calls for proposals.
- The Canadian Language and Literacy Research Network based at University of Western Ontario.

### **3. Basic research agenda**

Throughout this Concept Discussion Paper, attention was drawn to a number of basic questions and gaps that detract from the potential for effective, culturally supportive practice in this field. Basic research is needed to develop new tools, and support evidence based practice that has demonstrable positive effects on Aboriginal early language development.

An initial list of projects for discussion is suggested below.

- Baseline data collection on a few primary indicators of language development (e.g., the Aboriginal Children’s Survey offers one avenue);
- Baseline data collection of a more extensive representation of language development in a few contrasting communities (e.g., through community-university partnerships);
- Development of culturally appropriate screening and diagnostic assessment practices and valid, reliable screening and diagnostic assessment tools in relevant languages;
- Investigation of apparent semilingualism to understand this phenomenon and determine sound recommendations for supporting early language in these contexts;
- Investigation of English and French dialect learning in early childhood and implications for early language learning, assessment, and supports; and
- Investigation of culturally-based child-caring practices that are foundational to speech communication.



## 17 LOOKING FORWARD

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This final section suggests some initial steps towards advancing a national strategy for Aboriginal Early Language Facilitation and Supports.

### I. National consultation

Successful design, implementation, and evaluation of national strategy depends upon meaningful collaboration across provinces and territories, across disciplines, across professions, and across regulatory bodies. For this Concept Discussion Paper, it was not possible to canvas and meaningfully involve a broad spectrum of institutions, organizations and individuals that should be invited to give input in this initiative.

A first step is to consult with and involve national Aboriginal organizations. Another step is to consult broadly with Aboriginal and non-Aboriginal community leaders, front-line practitioners, educators, and researchers in the areas of infant development, early childhood education, early childhood speech and language development, linguistics, speech-language pathology, heritage language revitalization, and community development. A partial list of objectives of national consultation would include:

- Consolidate perceptions of need
- Gather available baseline indications of need in communities, provinces and territories
- Establish scope of initiative
- Establish roles for various stakeholders
- Establish roles for provinces, territories and national offices
- Explore strategies fitting diverse settings and priorities for community development
- Plan exhaustive reviews of research-based literature on heritage language learning, bilingual language learning, language facilitation, infant development, and early childhood programs at home and in centres, etc.
- Explore ways to capitalize on existing programs and human resources
- Explore training options
- Define curriculum development needs for workshops and for-credit courses
- Identify communities and training providers for three or four exploratory strategically-varied pilot projects.

## II. Community Partnerships with Post-Secondary Institutions

To date, no national meeting has been held to share what has been learned, particularly in the past decade of concerted efforts in many parts of the country, to support the development of Aboriginal capacity at the post-secondary level in infant development and early childhood education and related fields. Such a meeting is timely.

▶▶ Aboriginal communities that have been involved with post-secondary institutions successfully to strengthen community capacity for early childhood initiatives should be gathered together to share their experiences and discuss how training to support young children's early language might fit within long-term community development agendas.

▶▶ Key individuals around the country who teach, develop curriculum, or manage post-secondary programs that have a proven track record of contributing positively to Aboriginal capacity building in Early Childhood Education, or a related fields, such as Children's Services, should be gathered to discuss what they would envision and what roles they might play in various aspects of training needed for a national Aboriginal early language initiative.

Objectives of a meeting of post-secondary and community partners would be to share what has been learned about:

- successful and less successful strategies for developing curriculum;
- negotiating and sustaining partnerships between post-secondary institutions and Aboriginal communities;
- recruiting and retaining Aboriginal trainees and supporting them financially;
- ways to extend the reach of post-secondary courses to rural, remote and northern communities;
- strategies for overcoming geographic challenges of practicum arrangements;
- relative merits of on-campus, online, and 'distributed' learning models;
- preparing program graduates for transitions from training to work;
- costs of different types of program delivery relative to program outcomes;
- program evaluation findings.

Key learning points derived from the meeting would provide preliminary clarification about the nature of community/post-secondary partnerships and guidelines for developing promising approaches to curriculum and training innovations to support a strategy for Aboriginal Early Language Facilitation and Support.

The meeting would also help to identify post-secondary colleges and universities that may be uniquely able and interested in being involved in curriculum development and/or in piloting one or possibly more than one approach to post-secondary level training for community members for Aboriginal Early Language Facilitation and Support.

## 18 CONCLUSION

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Aboriginal children's experiences with language and the role of language are unique in many ways compared to non-Aboriginal children and require a distinctive, Aboriginal-driven approach. Given the importance of early language development for cognitive, social and cultural learning and school readiness, investments are needed to:

- develop and deliver training curricula to prepare Aboriginal infant and early childhood practitioners as well as Speech-Language Pathologists to deliver language facilitation and support programs
- deliver innovative family, community and home language development programs that are culturally and linguistically appropriate, advance goals for Aboriginal community development, and meet Aboriginal children's needs;
- develop and support provincial and territorial leadership specifically for speech-language development initiatives for Aboriginal young children; and
- enable community-university research partnerships to create and mobilize new knowledge about Aboriginal early language learning, assessment, and support, and to evaluate programs and assess impacts on children's speech-language proficiencies

Investments in these four areas would enable a collaborative approach to professional capacity building and practice with Aboriginal families and communities. A targeted Aboriginal early language initiative has the potential to:

- address the right of Aboriginal children to be supported in learning their home language;
- protect the diversity of Aboriginal cultures in Canada;
- reduce errors in diagnosis and treatment due the misinterpretations of language differences as deficits;
- strengthen the Aboriginal capacities to stimulate early language development and support children with speech-language challenges;
- address inequities in resources for Aboriginal children needing supports for optimal speech-language development , especially in rural, remote and northern communities;
- reduce dependencies on expensive specialized services;
- reduce secondary learning difficulties due to language difficulties;
- enhance Aboriginal children's opportunities for success.

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## **21 APPENDICES**

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*Appendix A:* Contributors to Concept Discussion

*Appendix B:* Questions used in preparation of the Concept Discussion Paper

*Appendix C:* Communication Disorders Assistants Training

*Appendix D:* Preliminary scan of post-secondary institutions in Canada currently providing Aboriginal Early Childhood Education/ Early Childhood Care and Development

*Appendix E:* Highlights of the TLC3 – Hincks-Dellcrest Institute Project on Early Language and Cognitive Development

*Appendix F:* Resources: Aboriginal Child Care Society's 'Moe the Mouse and His Theme Box'

*Appendix G:* Canadian Expertise for Knowledge Creation and Knowledge Mobilization

## **Aboriginal Early Language Facilitation and Supports**

### **Contributors**

The following individuals were individually contacted. Using the set of questions shown in Appendix B, each contributor offered their perspective on the extent and nature of need for a national strategy to Facilitate and Support Aboriginal Early Language development. Based on the experiences in Aboriginal communities, relevant research, or post-secondary education involving Aboriginal capacity building, they gave their ideas about specific objectives, avenues, challenges and opportunities to develop an effective, comprehensive strategy.

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**Views from Our Field**

**Questions sent to a partial list of known practitioners, educators and investigators in Aboriginal Infant and Early Childhood Care and Development**

Note: Circulation of the question set was not intended to be a comprehensive survey of the many individuals, groups, organizations and educational institutions that are involved in this field. Rather, it was intended to obtain an initial glimpse of what colleagues in our field think about the need and direction for a possible initiative. Many contributors identified other colleagues who would have valuable input based on relevant experience, as well as individuals at post-secondary institutions that could potentially contribute to training program development or delivery.

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**Strengthening capacity to support Aboriginal infants' and young children's language development**

- *What is the need?*
- *What perspectives and methodologies are helpful in thinking about how to meet the need?*
- *What would be the goals of a national training initiative?*
- *What would training involve?*
- *What competencies should be developed?*
- *Where would it happen?*

These broad questions can begin a dialogue about **capacity building in early language development and support for Aboriginal children, families and communities.**

**A Concept Discussion Paper** on this topic is being developed this month. It is intended as a focus to start off further discussion. It will not be a proposal. Rather, it will begin to bring together evidence of the need for more programmatic effort and training to support Aboriginal children's language development, and it will present a number of possibilities for what strategies could be undertaken.

**Your experience and ideas are sought** at this very initial step of exploring possibilities. It would be appreciated if you would answer some or all of the questions posed here with as much detail as you wish. Add whatever you think may be important anywhere it seems to fit or at the end.

**Acknowledgement.** If you feel comfortable being acknowledged by name for your input to this initial exploration, there is a place to indicate that at the end.

**1. Need**

Describe what you think is the current situation with regards to support for language development of Aboriginal infants and young children. What are strengths to build upon? What is lacking, or what are the specific challenges in regards to ‘language’ in the community/ communities / programs you are involved with?

**2. Indications of need in the area of ‘language’ in the early years**

Please provide any **evidence** you know of that points to the need for more resourcing to support Aboriginal young children’s language development (e.g., rate of referrals or early identification within a program or community, STORIES of children/families who needed a different kind of support for language development than what was available or accessible, reports of Aboriginal program staff relevant to this issue....etc.)

**3. Capacity building goal**

If there was an initiative to strengthen community level capacity to support language development in the early years, what would be the goals of the initiative?  
That is, what kind of capacity should the training aim to create?

- more community members trained to be child care staff
- more training for child care practitioners on how to support early language development
- community members trained as specialists in early language support
- more Aboriginal people becoming certified Speech-Language Pathologists
- Other: \_\_\_\_\_
- Other: \_\_\_\_\_

**4. Do you think a new training initiative in the language area should involve:**

- workshops for anyone, not at a post-secondary level
- workshops for program staff, not at a post-secondary level
- college courses that are accredited (i.e., shown on a college transcript)
- university courses that are accredited (i.e., shown on a university transcript)

- \_\_\_ post-secondary level but as professional development only (i.e., not for course credit, no transcript)
- \_\_\_ graduate level (i.e., after a degree)
- \_\_\_ Other \_\_\_\_\_

**5. Competencies. What should people who take the training learn how to do?**

That is, what competencies would be developed?

**6. Delivery. How should the training be delivered?**

- \_\_\_ Community-based (e.g., through partnerships)
- \_\_\_ Conference-based (e.g., through workshops/courses)
- \_\_\_ Internet (distance education)
- \_\_\_ College or university based
- \_\_\_ Combination: Describe: \_\_\_\_\_
- \_\_\_ Other: Describe: \_\_\_\_\_

**7. Training focus: Rate the priority you would give to developing different kinds of capacity through the training initiative**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>High Priority</b>				<b>Not a Priority</b>

- \_\_\_ More capacity to facilitate the development of language of all children being cared for at home, in Aboriginal infant development programs, child care and development programs.
- \_\_\_ More capacity to work effectively with parents and other primary caregivers so that they are more confident and effective in interactions with their children that lead to language development.
- \_\_\_ Capacity to work as a community guide, cultural mediator, and family liaison with Speech-Language Therapists and other specialists who assess and provide services to children in a community or program.
- \_\_\_ Capacity to identify children who may be having difficulties with language and should be referred.

\_\_\_ Capacity to administer one or two basic assessment tools that identify children with possible challenges that need to be referred.

\_\_\_ Capacity to help implement or follow up with remediation plans provided by a specialist to parents or other primary caregivers.

\_\_\_ Capacity to liaise with the school to promote smooth transitions of children to school and continuity of language support programs.

\_\_\_ Other: \_\_\_\_\_

\_\_\_ Other: \_\_\_\_\_

### **8. Trainees/ Students**

If there was a training program in the language area, who do you think SHOULD take it?

### **9. Barriers**

If there was a training program offered, what are possible barriers to making it accessible so that people who are best suited for it could take it?

### **10. Challenges**

What do you see as some of the most probable challenges to mounting this training initiative in your region?

### **11. Designation**

Do you think that there should be a designated credential awarded for successful completion of a training program in Aboriginal early language facilitation?

Yes \_\_\_ No \_\_\_

If yes, then what credential? (e.g., a certificate from an Aboriginal Early Childhood organization, a certificate from a government agency, a certificate from a government ministry, such as a 'post-basic ECE' certificate, a certificate or diploma from a college or university .... etc)

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**12. What to call it**

If the training was IN ADDITION to IDP or ECE training, what do you think would be an appropriate name for this area of specialization?

---

**13. Keeners!**

If you know of particular people or existing training programs that may be interested in contributing to this initiative, should it go forward, by being involved in development or as a pilot site or in some other ways, please name these people / institutions below:

**14. Acknowledgement**

Please indicate your agreement to being acknowledged by name (and /or your organization) for giving your input to Concept Discussion paper.

YES \_\_\_ NO \_\_\_

**15. More ideas**

Please offer any other questions, ideas, or resources by using as much space here as you wish, and **THANK YOU SO MUCH FOR YOUR IDEAS!**

*Jessica Ball*

**COMMUNICATIVE  
DISORDERS  
ASSISTANT  
ASSOCIATION OF  
CANADA**



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Questions?  
1 (416) 544-3503  
[admin@cdaac.ca](mailto:admin@cdaac.ca)

**CDA and SLA College Programs**

This page contains links and descriptions of colleges offering *Communicative Disorders Assistant* or *Speech Language Assistant* programs. Please note that to date the **Communicative Disorders Assistant Association of Canada** recognizes for membership only students or graduates of approved *Communicative Disorders Assistant* programs. Membership application from graduates of other programs will be evaluated on an individual basis.

For further information regarding CDAAC membership please call (416) 544-3503.

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**[Communication Disorders Assistants Certificate](#)**

Brock University - St. Catharines, Ontario

**Description:**

Communication Disorders Assistants (also called Communicative Disorders Assistants, Speech-Language Pathology Assistants, or Audiology Assistants) are supportive personnel who work under the supervision of Speech-Language Pathologists or Audiologists. Their duties typically include preparing therapy materials for adults and/or children who have communication and/or swallowing disorders, conducting individual and/or group therapy sessions, reporting on therapy outcomes, and carrying out routine maintenance on clinical equipment. Communication Disorders Assistants (CDAs) are employed in the same settings as Speech-Language Pathologists and Audiologists, including hospitals, school boards, specialized rehabilitation centres, and private practice.

The program is designed to inform students about therapeutic principles and approaches that are applicable to a variety of communication disorders, and to prepare them for employment as CDAs.



This program has been designed to reflect descriptions of supportive personnel from the College of Audiologists and Speech-Language Pathologists of Ontario (CASLPO) and the American Speech-Language-Hearing Association (ASHA).

Students may apply to the program after completing the Speech and Language Sciences stream degree, Hearing Sciences stream degree or equivalent with a minimum overall average of 60 percent. Enrolment is limited. Applicants must submit a resume, official transcript(s), a letter of intent, and two letters of reference. Prospective students should contact the Department for additional information.

Field placements are an integral component of this certificate program; students must successfully complete both placements (held after the completion of all credit courses) to graduate.

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### [Communicative Disorders Assistant Program](#)

Georgian College of Applied Arts and Technology -  
Orillia, Ontario

#### **Description:**

The Communicative Disorders Assistant Program will prepare the graduate to work in an adjunctive capacity with a qualified Speech-Language Pathologist or Audiologist in a variety of service settings. Emphasis is placed on preparing the graduate to conduct remediation programming after the therapist has completed the assessment and determined the treatment approaches. The program is based on a firm understanding of physiological and functional speech/language/hearing disorders. The development of programming skills and intervention techniques appropriate for remediation of such disorders is fundamental to the program.

The comprehensive competency-based field practice will provide the student with the opportunity to develop and practise these programming and intervention skills. Career

Opportunities Graduates from the program should find employment as assistants or technicians, in facilities/agencies serving clients with communicative disorders, such as schools, daycare centres, residential institutions, hospitals, nursing homes and clinics. The graduate will work under the auspices and direction of a qualified Speech-Language Pathologist and/or Audiologist.

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[Speech Language Assistant](#)

University College of Fraser Valley - Mission,  
British Columbia

UCFV offers an Early Childhood Education program that meets licensing requirements of the Provincial Licensing Board. The program is based on the provincial curriculum developed by the Ministry of Education, Skills and Training and adopted by Early Childhood Education training programs throughout the province as the minimum standard for educating adults to work with young children. A Speech and Language diploma is offered. This is a part-time, evening, post-certificate-level set of eight courses (and one daytime practicum) offered at Mission campus. **Graduates are not eligible for membership in CDAAC.**

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[Therapist Assistant Program](#)

Medicine Hat College - Medicine Hat, Alberta

Medicine Hat College's Therapist Assistant Program prepares paraprofessional health service personnel to work in a variety of environments under the supervision of Physical Therapists, Occupational Therapists, or Speech-Language Pathologists. **Graduates are not eligible for membership in CDAAC.**

---

[Communicative Disorders Assistant](#)

Durham College, Oshawa

This program prepares students to work in an adjunctive capacity to a qualified Speech-Language Pathologist or Audiologist in a variety of

service settings. Emphasis is placed on preparing the graduate to conduct remediation programming after diagnosis and treatment approached have been designed by a therapist. The program is based on a firm understanding of physiological and functional speech/language/hearing disorders. The development of programming skills and intervention techniques appropriate for remediation of such disorders is fundamental to the program. The comprehensive competency-based field practice will provide the student with the opportunity to develop and practise these programming and intervention skills.

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Changes last made on: *February 2, 2005*

Reference: <http://www.cdaac.ca/programs.html>

## **APPENDIX D**

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### **Preliminary scan of post-secondary institutions in Canada currently providing Aboriginal Early Childhood Education/ Early Childhood Care and Development**

Contributors to this Concept Discussion Paper were asked to identify post-secondary institutions that are currently playing a role in strengthening Aboriginal community capacity for early childhood program delivery and that may have the flexibility, creativity, will and mandate to play a role in the initiative currently under discussion. A list of these is provided below, with the caveat that this is not a comprehensive list of all possible sites for piloting or establishing training programs for Aboriginal Early Language Facilitation and Supports. In the brief time to prepare this paper, it was not possible to do an exhaustive scan or to identify a potential pilot site in every province and territory. There are undoubtedly many more post-secondary institutions that could contribute to this initiative.

#### **Northwest Territories**

**Aurora College.** Marcia Dean notes: *“Aurora College (Yellowknife) has provided flexibility in that each community can proceed at its own pace, and have the courses in early childhood education that were needed at the time the communities needed them. Maintains strict ‘exit’ criteria, but does not have unrealistic entrance requirements.” Aurora College has been responsive to community needs for capacity building, for example repeating offerings of courses that had the greatest demand. They have historically provided community-based education.”*

**Grande Prairie Regional College:** Offers Early Childhood Education, as part of Human Services, both on-campus and by distance, using print/media and web-based instruction. Marcia Dean notes: *“When these courses were paired with an instructor within a community, students were motivated and engaged, resulting in success. GPRC offers flexible entrance requirements and is willing to work with local communities.”*

#### **Yukon**

**Yukon College:** Distance-based courses in Early Childhood Education. Yukon College collaborates with a program called *Partners for Children* for community-initiated professional development workshops in community identified areas of need.

#### **Nunavut**

Arctic College – especially serving Baffin region. Carol Rowan notes: *“Nunavut Arctic College conducted a major training session on Early Childhood Education in 2004. Training took place in as many as seven communities. The course was delivered by ‘southern’ instructors with local interpreters. This respects the notion that community-based training is one of the cornerstones of successful ECE training in Inuit*

*communities.”*

Aurora College, based in NWT, serves some post-secondary needs in Nunavut  
CEJEP St. Felicien, based in Quebec, services some post-secondary needs in Nunavut.

**Labrador, NFLD.**

College of the North Atlantic. Carol Rowan notes that: “*College of the North Atlantic has delivered some extremely successful training sessions in Labrador, using completion rates as an indicator of success.*”

Memorial University, Faculty of Education and Department of Linguistics are also working in partnership with Labrador Innu communities to develop tools to aid in enhancement of Innu-aimun, as well as tri-lingual resources (Innu-aimun, English, French).

**Quebec**

CEJEP St. Felicien. Extensive experience with community-based and flexible ECE training in northern Quebec and Nunavut, including ways of working with heritage language. Marie-Helene Bergeron and Denise Ouellet have expressed interest in contributing to the development of a concept for advanced ECE training in language development.

**Nova Scotia**

Acadia College

**Prince Edward Island**

**New Brunswick**

Union of New Brunswick Indians Training Institute: Diploma in Early Childhood Education since 1996, and Fetal Alcohol Syndrome Certificate Program in partnership with Red River Community College in Manitoba since 2003.

**Ontario**

Canadore College at North Bay: Sharla Peltier notes that: “*Many Cree students from James Bay go to Canadore College and also access courses through Contact North.*” Anishnabek Aboriginal Program Advisor, Laura Kerr, and Dean of Health and Human Services, Linda Buschmann, have expressed interest in contributing to development of a concept for advanced ECE training in language development.

Contact North: Offers Early Childhood Education courses through Continuing Education at Canadore College.

**Manitoba**

University College of the North, a new university at Thompson serving many northern First Nations.

Red River College: Innovated one of the first Aboriginal-specific curricula for Early Childhood Educators.

**Saskatchewan**

Saskatchewan Indian Institute of Technologies, has a long-standing partnership with the University of Victoria's 'First Nations Partnership Programs' for community-based delivery of diploma level training in Infant and Early Childhood Education using a bicultural, 'generative curriculum' model.

**Alberta**

Grant MacEwan Community College:

**British Columbia**

University of Victoria: First Nations Partnerships Program has extensive experience working in partnerships with Aboriginal groups for community-based delivery of diploma-level training in Infant and Early Childhood Education using a bicultural, 'generative curriculum' model.

The B.C. Aboriginal Child Care Society has a report on post-secondary institutions in BC meeting ECD training needs in Aboriginal communities (report on Forum April 27/28, 2004).

**TLC3 Project – Hinks-Dellcrest Institute**

In an innovative and community-driven project referred to as TLC3, much was learned about various resources and program approaches to stimulating early language and cognitive development. The project website reports on key activities and learning points from each of the 8 project sites. The overview and the project report from the one Aboriginal project site – Meadow Lake Tribal Council, Saskatchewan – are included on the following pages. Readers are referred to the full website:

<http://www.tlc3.ca/html/home.htm>



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### Project Overview:

- [Project Development](#)
- [Goals](#)
- [National Management & Support](#)
- [Evaluation Process](#)

### Project Sites:

- [Vancouver, British Columbia](#)
- [Calgary, Alberta](#)
- [Regina, Saskatchewan](#)
- [Meadow Lake, Saskatchewan](#)
- [Toronto, Ontario](#)
- [Saint-Rémi, Quebec](#)
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### Outcomes & Learnings:

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- [Outcomes for Organizations](#)
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### Communications:

- [Site Level](#)
- [HDI Level](#)
  - [Project Publications](#)
  - [Conference Posters and Papers](#)
  - [Journal Publications](#)

### Related Links:

- [Organizations](#)
- [Published Programs used by the TLC<sup>3</sup>](#)

Contact Information: [info@tlc3.ca](mailto:info@tlc3.ca)

## Welcome

We at Hincks-Dellcrest greatly enjoyed and benefited from participating in TLC<sup>3</sup>. This website is designed to share, as far as possible, the process and learnings of this project with you.

The TLC<sup>3</sup> Project was a national prevention initiative designed to enhance language and cognitive development in the context of early relationships in children from birth to five years of age. TLC<sup>3</sup> was implemented in seven sites across Canada from 1997 to 2002. TLC<sup>3</sup> funding was not intended to establish entirely new programs but rather to support program enhancement of existing community-based child care/early learning programs. Each site evaluated the outcomes of their programming.

The specific goals of TLC<sup>3</sup> were to enhance the cognitive and language development of children from birth to five years; to increase the awareness and skills of the families and service providers who participated; to stimulate and facilitate similar activities in the local, regional and provincial communities.



Source: <http://www.tlc3.ca/html/home.htm>





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**Related Links:**

- [Organizations](#)
- [Published Programs used by the TLC³](#)



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**Project Sites - Meadow Lake**

MEADOW LAKE – Rural, First Nations, Low income, High risk	
BASE: Meadow Lake Tribal Council First Nations Child Care Program	
AGE: 0 - 5 years	
ACTIVITIES:	
Developmental Screening	
Child Care Programs:	
<ul style="list-style-type: none"> <li>• <i>You Make the Difference</i></li> <li>• <i>Come Read With Me</i></li> <li>• <i>Let's be Social</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>It Takes Two To Talk</i></li> <li>• <i>Bright Start Curriculum</i></li> </ul>
Parent Education Program:	
<ul style="list-style-type: none"> <li>• <i>Nobody's Perfect</i></li> <li>• <i>Second Step (violence prevention)</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>It Takes Two To Talk</i></li> </ul>
Parent Education Meetings	
Toy and book lending library	

The Meadow Lake Tribal Council (MLTC), the umbrella political and administrative structure of nine Dene and Cree First Nations, was the TLC³ site in rural northwestern Saskatchewan. The original plan for TLC³ was to fund programs at one already existing child care centre. However, just as TLC³ began, the MLTC launched a major plan to develop child care centres in all of their First Nations. The Meadow Lake Tribal Council felt it was important to include all the child care centres in TLC³. As a result, six child care centres that were in the process of being established over the period in which TLC³ was operating were included. One First Nation declined to participate, and another had a parent-run playschool.

The TLC³ program, called One Foot Forward, was developed in cooperation with the MLTC Child Care Program and played an essential role in helping establish the new child care centres and enhance the already existing centre. TLC³ funding was used to furnish the centres and purchase equipment, toys and books. TLC³ staff provided training to child care staff, developed curriculum, held workshops for parents, and made important links with relevant

professionals, such as dentists.

The Aboriginal families served in these remote communities were mainly low income. A total of 165 children participated in TLC<sup>3</sup> over the five years. The primary objective of TLC<sup>3</sup> was to enhance the child care programs, by providing resource materials, training and advice to child care workers and parents. Four areas of early childhood development were targeted: language, cognition, social skills and literacy skills. Literacy skills were addressed as part of the MLTC economic development plan, and social skills were added in recognition of First Nations social justice issues. TLC<sup>3</sup> core programs were:

- *The Bright Start Cognitive Curriculum* for promoting cognitive development, including an accompanying training program for day care workers and a handbook for parents;
- *It Takes Two to Talk Program* designed to promote social and linguistic development in young children based on the relationship between caregiver and child;
- *You Make the Difference* (First Nations edition) designed to promote early language development within important relationships;
- *Come Read With Me Program* promoting early child literacy; and
- *Let's Be Social Program* to help preschoolers learn pro-social skills.

 - [Site Final Report - Executive Summary](#)



Source: <http://www.tlc3.ca/html/ProjectSites-MeadowLake.htm>

### **Promising Practice Resource for Aboriginal Early Language**

In a consultation with the Aboriginal Child Care Society about needs and possibilities for Aboriginal Early Language Facilitation, the potential for this simple, culturally appropriate resource was underscored, along with the desire on the part of the Society to develop this resource further and extend its use beyond B.C. The Society offered the following description.

#### **About Moe the Mouse**

The **BC Aboriginal Child Care Society (ACCS)** is excited to offer this speech and language theme box for parents and early childhood educators. The innovative Moe the Mouse curriculum uses Aboriginal toys and stories to enhance language development in children ages 3-5. The activities and materials in the theme box help parents and educators provide opportunities for children to practice language skills in a child care, preschool and home setting. ACCS also offers a workshop entitled “Making the Most of Moe” that demonstrates effective ways to use the theme box in early childhood programs.

The Moe the Mouse theme box was developed for the BC Aboriginal Child Care Society by **Anne Gardner** and **Margaret Chesterman**. Anne has a graduate degree in Speech Pathology and Audiology. She has 27 years experience providing clinical services in speech and language for preschool and adult individuals. In the last 5 years she has worked extensively with Aboriginal Early Childhood Educators in providing workshops and onsite work with preschool-aged children. Margaret has been a Speech-Language Pathologist for 25 years. She has provided many workshops to parents and Early Childhood Educators and strongly values their role in helping children learn. She assisted in development of portions of the Partnerships in Speech and Language course for the BC Ministry of Health.

The BC Aboriginal Child Care Society (ACCS) is a non-profit charitable organization dedicated to supporting communities in their care of children. Our mandate is to support all Aboriginal communities in BC in the creation and development of quality, community-based Aboriginal early childhood services that promote child growth and development in an environment respectful of culture, history and language. The Society also fulfills an essential role in research, education, networking, and policy development.

Since 1995 we have helped establish over 58 licensed child care programs, 9 family day care homes, 800 child care spaces for Aboriginal children, and 100 permanent jobs in BC Aboriginal communities. Our services include a resource centre and lending library, the development and delivery of resources and training, and leadership and advocacy related to early childhood programs serving Aboriginal children and families. We are also the Host Agency for the Office of the Provincial Advisor for Aboriginal Infant Development

Programs and for two Aboriginal Head Start programs in Vancouver. Visit our website at [www.acc-society.bc.ca](http://www.acc-society.bc.ca) or call 604-990-9939 for more information.



**About the Moe the Mouse Theme Box:** This innovative speech and language curriculum box uses Aboriginal toys and stories to enhance language development in children ages 3-5. The activities and materials in the theme box help parents and educators provide opportunities for children to practice language skills.

**About the workshop:** The workshop, facilitated by a Speech and Language Pathologist with over 25 years experience, provides training to parents and educators on how to use the Moe the Mouse curriculum box at an early childhood centre, family child care program, and at home. After participating in the workshop,

- ECEs will be comfortable using “Moe the Mouse” with the children in their child care setting and will know how the activities in the theme box directly relate to children’s speech and language, social skills, and early literacy development.
- Parents will understand their role with “Moe the Mouse” and how to use Moe and the theme box to support their child’s speech and language development.
- Parents and ECEs will learn the stages of speech sound development and how to help children learn new speech sounds as well as strategies to encourage interaction and conversation with children.

### Canadian Expertise for Knowledge Creation and Knowledge Mobilization

There are currently a number of networked ‘centres’, societies, and programs of research involving Canadian experts in early childhood development and children’s language and literacy. Following is a short list of some of the key centres that could be called upon to contribute in various ways to a national initiative for Aboriginal Early Language Facilitation and Supports.

►► A call to the following centres and programs (and more as these become apparent) could be made for participation in a meeting to help identify Canadian expertise that can contribute to community development of plans for early language promotion, community needs assessment, curriculum development, evaluation of community-based programs, research, knowledge mobilization, and so forth.

**The Centre of Excellence for Children and Adolescents with Special Needs** (Julie O’Sullivan, National Director).

Based at Lakehead University, this Centre has already indicated strong interest in this initiative. **With its network of partners focused on children in rural, remote and northern communities, combined with its interest in applying cultural knowledge in community-based initiatives, this Centre is uniquely positioned to play an important role in helping to conceptualize, pilot and assess the impacts of community-based programs for ABORIGINAL EARLY LANGUAGE FACILITATION AND SUPPORTS.**

As one of the five Centres of Excellence for Children’s Well-Being funded by the Public Health Agency of Canada, the Centre of Excellence for Children and Adolescents with Special Needs is a consortium under the administrative leadership of Lakehead University, in partnership with the Government of Nunavut; the University of Northern British Columbia in Prince George, B.C.; Memorial University in St. John’s, Nfld.; and Mount Saint Vincent University in Halifax, N.S. These organizations make up the core group that provides direction to the work of the centre.

A significant proportion of Canadian children and adolescents live with special needs. Many programs aimed at decreasing the risk for mental health problems, school failure, learning disabilities and other developmental difficulties have been developed in Canada, but few have focused on special needs children living in rural and remote communities.

The Centre of Excellence for Children and Adolescents with Special Needs focuses specifically on rural and remote communities and in particular on children and youth with

special needs living in Canada's north. Projects investigate models for the prevention and early identification of special needs in rural and remote communities. The centre explores the most appropriate ways to diagnose and treat these children given challenges such as professional availability and cost, and geography and distance, identifying service innovations that hold the greatest promise for equivalency to supports and services in the urban south. Related issues explored by the centre include the potential of new and emerging information and communication technologies and the role of traditional, community-based treatment and approaches in defining a new service environment for special needs in rural and remote Canadian communities. The work of this centre has as its goal ensuring that, regardless of where children and adolescents with special needs live in Canada, programs for promoting optimal development are accessible, available, and linguistically and culturally appropriate to them.

**The Centre of Excellence for Early Childhood Development** (Richard Tremblay, Director).

Based at the University of Montreal, this is one of the five Centres of Excellence for Children's Well-Being funded by the Public Health Agency of Canada. The Centre of Excellence for Early Child Development is a consortium under the administrative leadership of the University of Montreal, in partnership with the Canadian Childcare Federation in Ottawa, Ont.; the Canadian Institute of Child Health in Ottawa, Ont.; the IWK Grace Health Centre in Halifax, N.S.; the University of British Columbia in Vancouver, B.C.; the Conseil de la Nation Atikamekw in Wemotaci, Que.; Queen's University in Kingston, Ont.; l'Hôpital St-Justine in Montreal, Que.; the Institut de la santé publique du Québec in Quebec, Que.; the Canadian Paediatric Society in Ottawa, Ont.; and the Centre de psycho-éducation du Québec in Montreal, Que. These organizations make up the core group that will provide direction to the work of the centre.

The Centre of Excellence for Early Child Development aims to help support parents and families to raise children with happy and healthy lifestyles by providing useful, readable information on development from age 0 to 5 years. The Centre uses traditional communication products such as articles, newsletters and workshops, as well as state-of-the-art multi-media including videos and CD-ROMs, to consolidate expert knowledge on early child development and disseminate it broadly to parents and service providers.

**This Centre could be called upon to contribute to the creation of plain language guides for primary caregivers about language development, language stimulation, and warning signs, and perhaps also culturally appropriate resources in a variety of languages focused on stages of children's language development and ways to promote bilingual language development in the early years.**

**The Canadian Language and Literacy Research Network** (Don Jamieson, Scientific Director)

Based at University of Western Ontario, the strategic plan for this centre is to promote research programs and practices that lead to the development of strong language and literacy skills for Canadian children, as well as knowledge mobilization.

Among other theme areas, CLLRNET is working on identifying children at risk from delayed or disordered **language development** and exploring interventions. Some of its research projects are exploring a family literacy curriculum, documenting the family history that makes learning to read and write more relevant, and helping families work and learn together in a context they understand. This project has been introduced to Aboriginal leaders in Prince Edward Island and Nova Scotia. The emphasis of this theme is on maximizing the potential for children and their communities to become fluent and literate. The Network has a priority to promote adoption of research-based knowledge and practice in child-care centres and classrooms, and invests heavily in its mission to train highly qualified personnel to develop and deliver efficient, innovative, interdisciplinary training. **CLLRNET's interest in language and literacy development, family-based programs, and training suggest that it could be well positioned to play a role in helping to develop, pilot and evaluate training programs for Aboriginal Early Language Facilitation and Supports practitioners at (not-for-credit) workshops and at an accredited post-secondary level.**

**Early Childhood Development Intercultural Partnerships Program** (Jessica Ball, Director)

Based at the University of Victoria. This is an ongoing program of community-university research contributing to knowledge about conditions affecting the health and development of Indigenous children in Canada and around the world. Collaborative projects strengthen capacity for developing and demonstrating research ethics, methods, tools, and programs that resonate with Indigenous cultures and communities. The program has a number of research projects focused on Aboriginal young children's development, including three on Aboriginal children's early language development, as well as on the roles that Aboriginal fathers can play in caring for their young children.

**First Nations Child and Family Caring Society of Canada** (Cindy Blackstock Executive Director, Jennifer Sinclair, Policy and Research Coordinator)

**Aboriginal Children's Circle of Early Learning** (Candice St. Aubin, Coordinator)

This is a clearinghouse for resources, knowledge, calls for proposals and events focused on Aboriginal children's care and development.

## **Department of Canadian Heritage**

Aboriginal Programs of Heritage Canada support Aboriginal infrastructure at the national, regional and community levels for Inuit, Métis, Non-Status Indian and First Nations living primarily off-reserve. They enable Aboriginal people to address the social, cultural and economic issues affecting their lives in Canadian society. Canadian Heritage works to strengthen Aboriginal cultural identity and languages and by facilitating the inclusion of Aboriginal people in a manner that recognizes their cultures and fosters their contribution to Canada. Programs and initiatives, some of which have been operating for almost 30 years, try to provide a representative voice and promote culture. They also connect communities, and support community services in urban and rural settings in order to improve the quality of life of Aboriginal people.

### **Aboriginal Languages Initiative of Canadian Heritage**

The Aboriginal Languages Initiative maintains and revitalizes Aboriginal languages for future generations by increasing the number of Aboriginal language speakers, by encouraging the transmission of these languages from generation to generation, and by expanding language usage in family and community settings.

The Assembly of First Nations and its Regional Delivery Agents (First Nations languages), the Métis National Council and its provincial affiliates (Michif languages) and the Inuit Tapiriit Kanatami and its regional affiliates (Inuktitut languages) may apply for funding directly to the Department of Canadian Heritage.

According to the Department, eligible recipients include existing national and/or regional Aboriginal representative and service delivery organizations such as Aboriginal communities/First Nations, Aboriginal governments or institutions, Aboriginal cultural education centres, and Aboriginal Friendship Centres. Eligible recipients apply directly to the delivery organization of the relative language element. i.e.: First Nations languages; Michif languages; Inuktitut languages.

### **Post Secondary Scholarship Program of Canadian Heritage**

This program is intended to enable Aboriginal communities to build a better future for themselves, and to support and encourage the attainment of higher levels of education by Aboriginal Canadians. The National Aboriginal Achievement Foundation has established a scholarship fund to provide scholarships, based on merit and need to First Nations, Non-status Indians, Métis and Inuit.

The Post-Secondary Scholarship Program is managed and delivered by the National Aboriginal Achievement Foundation, through an endowment.



Aboriginal students enrolled, or accepted for enrolment, as full-time or part-time post-secondary studies of two or more academic years in duration which are recognized by Canadian and foreign post-secondary institutions, in fields of studies that support and contribute to Aboriginal self-government and economic self-reliance can apply directly to the National Aboriginal Achievement Foundation.

**The B.C. Aboriginal Child Care Society** (Karen Isaacs, Executive Director)

This is a non-profit society that helps Aboriginal communities in B.C. to develop high quality, integrated, community child care services that are based in the children's culture, language and history. The Society also supports the development of an Aboriginal child care network by undertaking research, development, advocacy and supporting communities to develop their own resources. One federal evaluation described the ACCS as a model for other First Nations organizations in Canada. The society has made significant contributions in B.C. to resource development, workshops, and support for community programs to promote Aboriginal early language development. **In particular, this society has sponsored and piloted the use of an innovative resource for children's literacy, called Moe the Mouse (see Appendix).** Community response to this simple and enjoyable, yet carefully conceived approach has been extremely positive. Research could be done to assess the impact of 'Moe.' The Society is interested in expanding the reach of Moe to more Aboriginal children, families, and community-based programs.

**Early Childhood Development Pathways**

This is a consultant group directed by Dr. Judith Evans, International ECCD Consultant and co-founder of the ECD Consultative Group, with extensive experience in culturally grounded and community-driven program development and parent support programs.

**FOUNDATIONS**

Several Foundations in Canada may be interested in partnering in various aspects of an initiative for Aboriginal Early Language Facilitation and Supports. A few include:

Hincks-Dellcrest Institute: [www.hincksdellcrest.org](http://www.hincksdellcrest.org)

The Lawson Foundation: [www.lawson.on.ca](http://www.lawson.on.ca)

Max Bell Foundation: [www.maxbell.org](http://www.maxbell.org)

Philanthropic Foundation Canada: [www.pfc.ca](http://www.pfc.ca)

The Vancouver Foundation: [www.vancouverfoundation.bc.ca](http://www.vancouverfoundation.bc.ca)

*Comments and suggestions about the concept discussed in this paper are welcomed. Please address feedback to Jessica Ball at [jball@uvic.ca](mailto:jball@uvic.ca)*