



Early Education and Special Needs in First Nations and Inuit Communities

Roundtable, Ottawa

February 27 and 28, 2007

PHASE II of Distance Learning on Special Needs for Early Childhood Educator Workers in Aboriginal Communities

Submitted by:
Dianne Rogers
Lise Rowell

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CONTRIBUTORS

Presiding Elders Ina Zakal and Gordon Williams

60 Participants

Assembly of First Nations

Inuit Tapiriit Kanatami

Centre of Excellence for Children and Adolescents with Special Needs

Human Resources and Social Development Canada

Margaret Boone

Chair Julia O'Sullivan

Plenary Presenters: Art Dedam

Mélanie Barrieau

Tracy Brown and Jenny Lyall

Sandra Griffin for Jennifer Clinesmith

Kim Kienapple and Adele McSorley

Brian Walmark

Facilitators: Dr. Rose-Alma (Dolly) McDonald for AFN

Carol Rowan for ITK

Dianne Rogers

Note Takers: Jobie Weetaluktuk

Lise Rowell

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Executive Summary

On February 27 and 28, 2007 the Centre of Excellence for Children and Adolescents with Special Needs (CECASN) hosted a 2 day Roundtable discussion in Ottawa funded by Human Resources and Social Development Canada (HRSDC). There were 60 participants, including National Aboriginal Organizations such as the Assembly of First Nations (AFN) and Inuit Tapiriit Kanatami (ITK), and representatives of CECASN, as well as HRSDC invitees.

This report provides the background for the two phase project *Distance Learning on Special Needs for Early Childhood Educator Workers in Aboriginal Communities*. The report then presents an overview of the Phase I findings which inform the Phase II Roundtable discussions. The body of the report provides detailed responses to eight questions focussing *On Early Education and Special Needs in First Nations and Inuit Communities*, from two dialogue groups attending the Roundtable. Finally, the report highlights key messages and recommendations which emerged from the group discussions and the closing plenary presentations. These messages and recommendations point to what participants feel is essential for moving forward in the areas of development and delivery of curriculum and assessment tools, for early childhood education workers who work with special needs children in First Nations and Inuit communities.

Roundtable participants determined that success at the strategic and operational level is contingent upon creating a change in culture that is sufficient to shift the special

needs paradigm from one of deficits to one of rights and strengths. The first step is changing the cultural understanding and articulation of special needs to reflect traditional First Nations and Inuit values and beliefs about the healthy development of the whole child over a lifetime. Shifting to a rights and strengths-based paradigm would permit the emergence of dynamic, holistic and child centered definitions and concepts specific to First Nations and Inuit contexts. These definitions are necessary for the development of a policy framework capable of giving rise to the development and delivery of quality, effective and sustainable special needs curriculum and assessment tools, for use Aboriginal communities.

Introduction

Background

Canada's Parliament ratified the the United Nations *Convention on the Rights of the Child* in December 1991. In 1997, as part of its commitment to meeting and protecting the needs and rights outlined in the Convention, the federal government announced collaboration with the provinces and territories, to develop the *National Children's Agenda* (NCA). The NCA was committed to developing a "comprehensive strategy to improve the well-being of Canada's children...including clear outcome measures by which to gauge success"(Government of Canada, 1998).

To meet this commitment The NCA developed The Centres of Excellence for Children's Well-Being. The Centre of Excellence for Children and Adolescents with Special Needs (CECASN) is one of these Centres. Each Centre was given an initial five year mandate and had as its main function:

- Collection and Analysis of Health Information and Data

- Conduct Focused Research Related to the Five Chosen Issues
- Provision of Policy Advice to Governments and Child-Serving Agencies
- Generation and Communication of Information to a Wide Range of Audiences
- Establishment of Local, National and International Networks of Individuals and Groups Involved in Children's Well-Being (PHAC, 2000)

Within this overarching function CECASN has as its specific focus “the distinct challenges faced by children and adolescents with Special Needs living in rural and northern Canada” (CECASN, 2004)

In the document *A Canada Fit for Children* (2004), the Canadian government acknowledged the challenges faced by Aboriginal children and especially those with Special Needs, living in Rural and Northern Canada. The document spelled out the government's commitment to partner with all levels of government, Aboriginal leaders and communities and to coordinate across all sectors, in order to “build supportive environments to improve the healthy development of Aboriginal children... [and to ensure they]... have equity of access to programs and services that allow them to reach their full potential and participate as they wish in society” (2004, p.48).

Although CECASN's work to date which has “confirmed that *prevention and early intervention* are imperative as they provide the best prospects for improving children's health and education, ... many children and youth with special needs, particularly in rural and northern Canada, are still without services and those few services that do exist are often culturally or linguistically inappropriate” (CESCAN, 2006a).

Context

In December 2004, the Centre of Excellence for Children and Adolescents with Special Needs (CECASN) co-hosted, with Aboriginal Head Start, a roundtable on research related to Aboriginal Early Childhood Development. Included in the outcomes was a recommendation for a review of current assessment, evaluation, and diagnostic tools pertaining to Aboriginal Early Childhood Development as well as the need for such tools to be culturally specific. The future directions of this roundtable suggest that an appropriate context for the implementation of the broad recommendations would be special needs (Palmantier, 2005).

In September of 2005, the Centre of Excellence for Children and Adolescents with Special Needs held a national policy forum, *Meeting the Needs of Children and Adolescents with Special needs in Rural and Northern Canada*. This meeting brought together policy-makers, community leaders and researchers to review the findings of five years of research conducted by CECASN. The research findings, which focused on early intervention and prevention, indicated the need for access to appropriate services; the importance of community involvement; the need for appropriate, high quality education, training and professional development to meet the needs of children with special needs living in the rural and remote regions of Canada. Participants identified the need for long-term effective education and training for community members and front-line workers

as one area of community capacity – building and the importance of identifying what is currently being offered (CECASN, 2006b).

Also in September 2005, the Early Learning and Child Care engagement sessions with First Nations and Inuit regional, community and frontline workers showed a priority need for children with special needs in their communities, particularly in the area of culturally appropriate assessment tools and accredited training for the Early Childhood Education (ECE) workers who support them. The Aboriginal Head Start programs of Health Canada and the Public Health Agency and the First Nations and Inuit Child Care program of Human Resources and Social Development Canada have also identified these priority areas (CECASN, 2006b).

As there is no one entity with an exclusive mandate for Aboriginal children with Special needs, these needs have been addressed on an ad hoc basis within various programs, services and organizations. To determine the best path to follow, in order to realize culturally appropriate assessment tools, and accredited training for ECE workers in communities, it is first necessary to determine the tools and training that currently exist, both for Aboriginal, broader Canadian, and international communities (CECASN, 2006b).

Participants at both the 2004 Roundtable and the 2005 Policy Forum identified the continuing education needs of frontline workers as a key factor in realizing that, “each child and adolescent with special needs is an exceptional individual, with a unique pattern of needs”, (CECASN) 2004, p. 4). For many frontline workers who may “lack access to education because of geographic and time

constraints.” (Roberts, O’Sullivan & Howard, 2004, p.2), distance learning is a necessary and important model of program delivery (CECASN, 2006b).

The Project

These identified needs, priorities, and recommendations gave rise to a two phase project entitled *Distance Learning on Special Needs for Early Childhood Educator Workers in Aboriginal Communities*. The project focuses on 0 to six year old Aboriginal children living throughout Canada, who have special needs. It has as its purpose the production of knowledge about these children and the effective transfer of that knowledge “to those who can make a difference in the lives of these children (CECASN, 2004, p.3).

Inclusion focuses on acceptance, recognition of the gifts brought, understanding that the reasons for excluding students in the past is more linked to our inability to teach these students what they need and to allow these children to teach us what they require. (CECASN/Distance Learning - Phase I: pg. 65)

PHASE I: Overview

Phase I of the project focused on reviews of current information related to legislation and jurisdictional regulations, assessment tools, training related to special needs on a national and international basis, while noting any Aboriginal-specific tools or training. Phase I included reviews completed by the Centre of Excellence for Children and Adolescents with Special Needs and consisted of four components: Children and Youth with Special Needs: A Review of Federal, Provincial and Territorial Legislation,

Policy and Programs; Assessment Tools for Children with Special Needs; Early Childhood Training Institutions; and Training Courses and Programs Provided by Canadian Public Post-Secondary Institutions Through Distance Education for Early Childhood Educators, Educational Assistants, and Special Educators: Focus on Special Needs within Aboriginal Communities. The review provided an informed basis to design and implement Phase II.

PHASE II

Purpose

The Phase II Roundtable was designed to determine strategies to move forward with recommendations for curriculum development and for the adapting of assessment tools for use in Aboriginal communities. (CECASN, 2006b) For the purpose of this Roundtable discussion the Centre of Excellence for Children and Adolescents with Special Needs proposed using the definition of Special Needs which it has adopted i.e.

All children and adolescents who require additional public or private resources beyond those normally required to support healthy development. This definition includes children and adolescents who require additional resources because of exceptional gifts and talents, physical, sensory, cognitive and learning challenges, mental health issues as well as problems due to societal, cultural, linguistic or family factors. (CECASN, 2002: 4).

The Centre adopted this definition because it is a broad ... innovative resource-based definition of special needs... [which]...has considerable support internationally because it has several distinct advantages. First, in this definition what is stressed is the adaptations that must be made to improve outcomes for children and adolescents with special needs rather than deficits “within” children and youth. Second, the definition cuts across differences in provincial, territorial, federal and international

definitions of special needs and creates a common standard based on resources. Third, the definition is attractive for policy purposes because it is concerned with the additional efforts that must be made to improve outcomes for those with special needs within the general context of providing efficient services for all children and adolescents (CECASN, 2002)

Methodology

The Roundtable was planned jointly by CECASN, Inuit Tapiriit Kanatami (ITK), the Assembly of First Nations (AFN), and Human Resources and Social Development Canada (HRSDC) and was funded by HRSDC.

The objectives of the Roundtable held in Ottawa on February 27th and 28th 2007 were:

- To discuss and arrive at an understanding of the term “special needs” as it relates to policy development relevant to First Nations and Inuit children.
- To identify gaps in existing research related to special needs children in First Nations and Inuit communities.
- To discuss future actions in the development of screening/assessment tools for First Nations and Inuit children with special needs.
- To identify training and educational needs of early childhood educators working with special needs in First Nations and Inuit communities.

Sixty participants attended, sixty (60) participants confirmed registration and were sent background material along with a detailed Agenda (please see Appendix I).

THE ROUND TABLE

Opening Plenary

The Plenary began with opening prayers by Inuit Elder Ina Zakal and First Nation Elder Gordon Williams. Art Dedam, Program Manager, Aboriginal affairs Directorate, HRSDC, presented opening remarks.

Today and tomorrow is your session not for government to tell you what to do or how. We encourage participation and share opinions and knowledge for doing things for youth with special needs. You are pushing and broadening the agenda from a human resources perspective and wanting the ways and means in which ECE get accredited training. Our response and interest is to push the element of working with others like the Centre of Excellence to engage in research leading to policy development. We are anxious to move in that direction. I hope the next few days are beneficial to kids in community. Your mantra: It's For the Kids. This will keep us focused.

Julia O'Sullivan, Centre of Excellence, Round Table Meeting Chair presented the following remarks.

This meeting was jointly planned by the Centre of Excellence, AFN, ITK and HRSDC. We are taking part for the first time with academics, policy, language community people and specialists who are coming together to take action. There are challenges around policy, services and assessment and we are hoping for solid ideas to move forward so kids can fulfill wishes, hopes, and dreams for their own lives and the dreams their families have for them. We will work with the definition of special needs used by the Centre of Excellence which includes any child who needs additional public or private resources for healthy development. We are hoping to have something solid to move forward on. We want a newer and brighter day for these children and there is no reason why we can't do it.

Plenary Presentations

AFN and ITK working group spokespersons made presentations regarding where they are in terms of meeting the Special Needs of Children in their communities. Key spokes persons then presented Phase I research findings to set the stage for and initiate focus group discussion. Following is a list of the presentations and a synthesis of power point slides provided. (Please see Power Point Slides in Appendix VI – X)

1. First Nations Children and Special Needs by Melanie Barrieau, Assembly of First Nations (AFN): First Nations Special Needs Working Group (Please see Appendix VI)

First Nations (FN) children are the fastest growing segment of the Aboriginal population in Canada. In their power point presentation the First Nations Special Needs Working Group reported on research outcomes of the top five medical conditions Among FN children, barriers to accessing health care and difficulties accessing NIHB Services and disability rates. The rate of disabilities among FN children is almost double that for Canadian children in general. Overall 15.4% of children reported an emotional or behavioural problem. It is an important distinction that some special needs stem from disabilities while others do not. Complex medical needs are a subset of special needs.

Children with special needs often require a wide range of services and supports in order to participate with their peers (i.e. screening and assessment, remedial speech, occupational therapy, educational interventions etc.). The FN working group is nurturing linkages at all levels including looking at screening and assessment tools, training for child care and ECD workers; continuing partnerships with ITK, COECASN and HRSDC; and increased cooperation. The objectives of the research plan included looking at available special needs programs, identifying the gaps between the needs of children and what is being offered, and recommending next steps through analysis of gathered information. The outcomes highlighted an absence of FN appropriate programs, clear guidelines and policies as well as significant inconsistencies in funding.

Research about effective assessment and screening tools cannot determine the true extent of special needs in a FN context. Culturally relevant assessments are required; ECE training and capacity development is needed; and funding is required for training to ensure consistency of services on reserve to be comparable to those off reserve; and, jurisdictional issues need to be resolved. There is a need to create more training and employment opportunities, increase awareness of services in clear, plain language and with culturally sensitive information/programming and increase communication between

policy makers and FN people. On reserve there is a requirement for federal/ provincial/ territorial services and networking to maximize effectiveness of FN special needs care. A national clearinghouse is for FN special needs, multi sectoral working groups, specialized service centres and community-based infrastructure to ensure services are provided for FN children and their families.

2. Inuit Children with Special Needs by Tracy Brown and Jenny Lyall: Inuit Tapiriit Kanatami (ITK), (Inuit ECD Working Group (Please see Appendix VII)

Inuit are a distinct group of Indigenous people. ITK's main ECD document is the Inuit ECD Strategy. Their research has demonstrated that there is limited support concerning Inuit children with special needs; there is lack of training for Inuit ECD workers and parents need more support and education about their special needs child. There is a decided lack of culturally appropriate screening and assessment tools and because of the geographical realities there are many difficulties related to providing assessment, treatment and follow-up. In most Inuit regions there are no child care spaces for special needs children. The plan is the implementation of a research survey to analyze and develop a strategy to improve the gaps and needs of services for Inuit children with special needs. The focus will be on training and collecting information that will assist in developing assessment/screening tools. Research topics will also include demographics information about special needs of Inuit children and services available to them. An appropriate specialist will be sought to use the research findings to design and develop a screening/assessment tool appropriate to Inuit.

3. Children and Youth with Special Needs: A Review of Federal, Provincial and Territorial Legislation, Policy and Programs by Jennifer Clinesmith presented by Sandra Griffin (Please see Appendix VIII)

The purpose of the review is to examine legislation, policies, and programs that direct, guide and/or deliver services and supports to children and youth with special needs in

Canada based on documents and manuals that publicly available on federal, provincial and territorial websites. An emerging interest in care giving was generated after a fairly lengthy history of federal level social policy and program reviews beginning in 1996 (see Appendix VII, ppt). A wide variety of programs and services in the areas of child and family supports, education and disability issues were found to be available. British Columbia, Alberta and Ontario have ministries specific to children and one province has legislation specific to children with special needs: Alberta. One of the high profile disorder Fetal Alcohol Spectrum Disorder (FASD) has two federal associated strategies, some provinces have strategic plans and there have been some regional partnerships and research efforts. The other, Autism Spectrum Disorder (ASD), has no national strategy but there are seven provinces with ASD-specific programs.

4. Assessment Tools and Early Childhood Training Institutions by Kim Kienapple and Adele Sorley: Centre of Excellence for Children and Adolescents with Special Needs (Please see Appendix IX).

Cultural experiences do have an effect on a child's learning style, but it is important not to stereotype all children within a culture. All we can estimate is how well an individual will function in the culture for which the test is appropriate, as the individual is a cultural being. Assessments do not measure strength of will and persistence of motivation.

Assessments are typically a Eurocentric or Anglo American phenomenon.

Assessments only measure characteristics that are possessed by many, not all people.

Standardized testing shows how the child stands in relation to others not how the child is unique or thinks or feels. A person's score does not measure the value of that person to family, friends or community. People administering tests need training regarding working with other cultures, as well as training regarding communicating the results in a fashion that is useful to the family. (Please see Assessment Tool Web Site:

http://www.msvu.ca/child_youth/coeei/Assessments/asses_main.asp). Early Childhood training institutions are listed as Post Secondary Accredited Institutions offering Early Childhood Education Training meant to provide a snapshot of available courses and programs. The criteria for early education in special needs in First Nations and Inuit communities is (1) Accredited Post Secondary Institution, (2) ECE Training (preschool), (3) course work, specializations, certificates, diplomas and degrees with a special needs and/or Aboriginal focus. There are identified appropriate institutions from former work, internet sources and university calendars and/or catalogues. Contact by phone, email, website or calendars are on a continuum of unsatisfactory for retrieving course information. (Please see ppt in Appendix IX for a list of course titles and search terms.)

5. Community Models of Distance Education for First Nations and Inuit Adult Learners by Brian Walmark: Keewaytinook Okimakanak Research Institute (KORI)
(Please see Appendix X)

The lifestyle, culture and experiences of Aboriginal adult learners are unique. Distance education programmes are designed for adult learners in the urban south and do not reflect the needs of First Nations, Métis and Inuit communities. Compounding the design limitations, First Nations need trained network and computer technicians to support local, regional and national networks. The Knowledge and Career Development Network (KCDN) is expanding into vocational and professional development training via IP video and other tools. Community Tele-health Coordinators (CTC's) act as site facilitators for training on-line (i.e. Akitsiraq Law School in Iqaluit, Nunavut).

Attempts to find partners at colleges and universities to create a training programme for CTCs were unsuccessful due to outrageous costs to design a curriculum. Post Secondary Institutions wanted to pigeon-hole CTC training into existing training although many CCs lack a grade twelve diploma. Face to face training is still required for team building which is scheduled once a year while the rest of the training is conducted by IP Video conferencing and On-line or E-Learning Platforms. The public sector is the highest employer (i.e. Band Office, e-centre, Tele-health community etc). Community priorities for education and training do always mesh with those of government or academic institutions. Community leadership at Fort Severn First Nation wanted to use their broadband allocation to create a 'paperless band office' with all the work being done on-line. Community leadership is critical for success and courses must meet the community needs that are identified as priorities by community members themselves. Communities must have the opportunity to shape courses. Aboriginal adult learners are building bridges between First Nations and the academic communities to increase the capacity at the FN community level and conduct participatory research appropriate to the community needs. Research resources must be shared fairly and First Nations should be respected as equal research partners. Communities must be involved in all aspects of research projects. *Support the use of the Kuhkenan Broadband Network (KBN).*

Discussion Groups

Following the Plenary presentations the participants divided into the following focus groups.

Group 1 - First Nations Special Needs - facilitated by Dr. Rose-Alma McDonald

Group 2 - Inuit Special Needs - facilitated by Carol Rowan

The groups spent day one afternoon and day two morning taking part in facilitated discussions, guided by eight (8) questions which were developed by an ad hoc working group. The responses following each of the eight questions have been documented as individual synthesis of the discussions, Assembly of First Nations (AFN) focus group and Inuit Tapiriit Kanatami (ITK) focus groups respectively. Similarly, the verbatim notes captured on flip charts for both AFN and ITK focus groups are documented and attached in Appendix XI and Appendix XII respectively. Please note that AFN divided participants into two discussion groups known as AFN Group (A) and AFN Group (B).

Questions and Response Synthesis

1. In your work, do you have a working definition of “special needs”?

Some groups have found the definition used by the Centre of Excellence for Children and Adolescents to be a good universal working definition of “special needs”. The definition is: *The term special needs is used to encompass **all children and adolescents who require additional public or private resources beyond those normally required to support healthy development.** This definition includes children and adolescents who require additional resources because of exceptional gifts and talents, physical, sensory, cognitive and learning challenges, mental health issues as well as problems due to social, cultural, linguistic or family factors.*

AFN response to the definition

The AFN focus group agreed that in order to critique CECASN’s definition for Special Needs, they needed to know the definition’s target. The participants also recognized that there is no national policy regarding early intervention on which they could anchor their definition.

Concerns were raised with regard to the content of the definition. There appears to be an emphasis on deficit versus assets and strengths. The use of terminology that has negative connotations leads to labelling and categorization because the terminology is often linked to policy, funding, and support. They also noted the lack of acknowledgment of aboriginal context. The exclusivity of the definition does not take into account a holistic understanding of special needs of the child, the family and community of the child, or child's special needs over his/her lifetime.

The AFN group decided that the CECASN definition was acceptable in the short term while they work towards developing definitions that are more rights and strength based, holistic, dynamic, and specific to the aboriginal context.

a.) Within the scope of your work, would this definition be acceptable as a working definition?

The participants of the AFN focus group agreed that the definition of Special Needs must balance the ability to successfully advocate for funds, programs and resources, with the need for a dynamic, child-centered, and context specific definition. To this end they recommended that the definition be anchored on human rights i.e. "all children need and have a right to the social and environmental determinants of health and some children have extra needs".

b.) Would it be adaptable to policy development?

The definition could then be framed from a strength-based, intervention and holistic perspective that acknowledges the rights, needs and strengths of the child as well as those of the family and community. An adaptation would allow for a dynamic process regarding the determination of special need or extra needs. The participants highlighted the importance of early intervention while acknowledging the child's ongoing lifetime needs. Finally policy development would acknowledge the need to fund and support the educational and resource requirements of the collaborative circle of family and community members and service providers with whom the child interacts on a daily basis.

c.) What else should be considered in the working definition?

Inherent in the definition should be the provision of access to support, education and training that that would enhance efforts to determine, understand and respond to the special needs of the child. Access to these components would need to be articulated in a way that respects and is derivative of the AFN values, beliefs, and traditions. This definition would also recognize support and advance the development and sharing of culturally appropriate community based tools, education, resources and knowledge.

ITK response to the definition

All of our children are colonized children.

All children have special needs and all of our children need to be looked at in this way. Every family knows a lot of difficulties and early years enhancements have a positive impact on school readiness. The Inuit Early Childhood Development Working Group accepts the CECASN definition of special needs as very inclusive and the group agreed that it is a good tool for policy development in the north. One participant suggested removing the word adolescents for discretionary early childhood funding. Notwithstanding, Inuit participants support life long learning and seamless educational support for ***all children and adolescents who require additional public or private resources beyond those normally required to support healthy development.***

- a.) The definition is acceptable as a working definition within the scope of special needs advocacy and work with children in the north.
- b.) The north needs infrastructure to support policy development. Nunavut has dropped the concept of “inclusion” and gone back to the categorical model (i.e. funds for labels e.g. autistic children). This change in definition is extremely politically contentious at the moment even though there is very little funding for special needs children per se, in Nunavut. Child centered policies will give the special needs initiative the momentum it requires to move forward.
- c.) Participants and ECD educators must actively lobby the government for funds and be strong advocates for policy development in addition to looking after the children. There is a *Pilirihatigiiniq* policy in Nunavut which distributes funds known as “money without labels”. Funds distributed for FASD, Diabetes or Autism for instance can be used in a discretionary way for specified “labels” if the money is not tied to program outcomes. Lobbying is required for funding without labels.

2. (a) How can we shift the paradigm from one of deficit to one of strength?

AFN response to a strength based paradigm shift

Participants agreed that the deficit paradigm around early childhood intervention and special needs should be shifted to a paradigm of strength. Participants felt that certain issues would have to be addressed to bring about the shift, such as the shame and guilt felt at the family and community level which has been fully operative as a legacy of colonization, residential schools and lack of self determination. This legacy must be addressed. Lack of knowledge and understanding about possibilities at the

family/community level has created an absence of a unified and targeted strength based message. Also funding that is contingent upon deficits/labelling has perpetuated the paradigm to date.

Strategy

The participants stated that a paradigm shift must begin at the grass roots level with a recovery of cultural values, traditional practices regarding thoughts, feelings and language and response to children with special needs. They recommended developing a coherent strategy which would involve encouraging the whole community, including chiefs, to examine how traditional values and beliefs inform ways of thinking, feeling, talking about and ultimately responding to special needs children. This strategy would encourage consensus building to move forward with renewed vigour.

Research and Public Education

It would be key to use data from empirical research (including disaggregated numbers from millennium project) to enhance the understanding of families, communities and chiefs regarding the strong need for and importance of early intervention. Conducting asset profiles of their children would help families develop a comfort zone around talking about and advocating for special needs children. A strategy of public education and enhanced understanding would lead to a shift in the use of language to emphasize strengths, assets, and the healthy development of the whole child. It would also encourage chiefs and the whole community to make early intervention a priority.

Collaboration

Collaboration to design a national campaign comprised of a targeted message to which policy makers will be able to respond is key. A tri-partite committee needs to be struck to agree on principles on which to rest the national campaign. In addition the strategy would involve going outside the communities to engage and involve child advocates, coalitions, media, and the volunteer sector.

ITK response to a strength-based paradigm shift

The Child in the centre

The community already treats the child as an individual based on his/her strengths. Keep the special needs child with his/her peers. Removing him/her from their peer group creates a sense of isolation which further impedes optimum outcomes in that these children can learn from other children, and other children can learn from them. Perhaps the term 'special needs' needs to be reconsidered as it seems to suggest a deficit base in relation to societal norms. Understanding that inclusion is the operative word, children should be assessed as an individual and success measured from a strength-based perspective clearly documenting the child's gifts.

Even so, to shift the paradigm from one of deficits to one of strengths we need to fully understand the situation of children with special needs in both rural and urban settings. For instance in Ottawa at the Head Start Program there are more children in care in the

program than children from their families of origin. A clear vision and leadership in communities is needed to create the momentum and would to help us put the child first in every situation. Celebrating the child's accomplishments helps the child, parent, family and school to operate in a holistic way to completely support a special needs child.

Parenting Skills

Guilt and fear attached to parenting prevents people from pursuing the goals of support and service provision. The significant loss of parenting skills and strengths (*inuguinniq*) has to be addressed in the process through empowerment, advocacy strategies and enhancing and supporting capacity building for all children, especially those with special needs. It is important to understand that cultural healing within families and communities is part of the reality of life in the north. Traditional roles of parents and grandparents and traditional parenting need to be looked at in the process of building strengths in the children. Parents need to be recognized as the first teacher, supporter and ultimate decision maker in their child's life. Elders are essential for healing and educating staff about traditional ways to care for children.

Collaboration

Service delivery asset mapping or individual community blueprints would help everyone know where to access community services or how to link with distance services through the web, audio/videotaped based information or tele-health. Joint commitment from communities, regions, territories and the federal level to develop a research framework would go a long way to addressing the issues in an evidence-based way. Access to *label-free-funding* (LFF), focusing on the strengths of children and involving parents is important for a clear and holistic profile. LFF is an essential partnership strategy for the ECE program and families to optimize the outcomes for special needs children. Continuity of documentation throughout the school years could provide valuable data for the transition from preschool to Kindergarten and integrated approaches like *Wraparound* (*aaqqatiginiq*) for special needs children and their families.

Sharing information through case conferencing reduces isolation for the teachers as well as the child and parents, and involving families is the path to effective intervention. To do this there needs to be a collaborative focus with a continuum of multiple supports in place over the life time of a child beginning with early childhood. Partnerships and accountability on behalf of the child along educational continuum will help to keep a special needs child from slipping through the gaps.

Solution Seeking/qanuqtuurungnarniq

There is often no one to provide support for special needs children. The community has to provide their own solutions, be proactive rather than reactive. If special needs children were accepted as loveable and treated like every other child, then communities would be able to work in their best interests to integrate services as in the *Wraparound* program (i.e. parents, family, community members and professionals meet frequently to

support the strengths of the child and meet his/her 'special' needs by setting goals and following up).

To shift the paradigm to strength-based is essential in the provision of Inuit training models. Learning how to recognize and identify special needs using culturally appropriate assessments and Inuit screening tools from a strengths-based perspective for all children is imperative. Training should be consistent across the northern regions and be community led with *community asset mapping* so everyone knows what's there, what's not there and how to access services and training in the community or over distance. The special needs initiatives represent an opportunity for strength-based solution-seeking.

2. (b) How do we support the transition to school?

AFN response

AFN did not address this question per se.

ITK response

In Nunavut Head Start/daycares and schools are not collaborating. Teachers complain because daycare or Head Start children are much more school-ready than non-daycare students by the time they arrive at Kindergarten. The concern arises from having a group of more advanced children together with children who need to catch up and teachers trying to close the gap. This challenge flags an opportunity for peer learning as well as a professional development opportunity for teachers from both the preschool and the elementary school to work together. Children should not have to fit the curriculum; the curriculum should be designed around the strengths and gifts of each child. Participants believe that teachers need to begin with the strengths the child brings into the classroom and build from there.

Another condition interfering with collaboration is staff recruitment and retention. Childcare workers receive higher pay and benefits if they are employed by the school board. In Nunavut a teacher does not need a Bachelor of Education to teach Kindergarten. In order to retain ECE staff in programs paid by third parties, it would be desirable for ECEs to be viewed as professionally as their peers and compensated in an equitable way. Enough properly trained staff is essential to effective programming. One participant stated that her community enrolled eighteen trainees only to get three teachers.

Current ways in which transition to school is supported

In Labrador there are good community relations and meetings are held between the preschools and teachers/principals in the elementary schools. In other communities in the north some childcare centres and preschools are situated near local schools and this close proximity allows for efficiency of relationship building. Often daycare and

Head Start children go on field trips to the elementary school to use their gym and library.

Preschool teachers build collaborative relationships with the schools by visiting weekly and providing cultural awareness as well as explaining the principles and curriculum of Head Start or daycare programs to the Kindergarten teachers. They help organize and attend school events such as Open Houses and help parents fill out Kindergarten registration forms. These activities help bridge the gap on behalf of parents and children.

The Katvik Regional Government (KRG) staff participates in Katvik School Board (KSB) teacher training, teacher placements are in the schools and resources/space is shared (i.e. school gym and library) which create dynamic exchanges for children, parents and teachers. Transitions are smoothed between preschool and elementary school by documented observation 'portfolios' which travel with the child. Appropriate transition planning is individualized (i.e. child centered Wraparound) to help smooth the way if a child and family need this kind of support. A continuum of accountability is very important.

3. (a) *What do we need to do to have training on special needs recognized?*

AFN response

Participants identified several issues that need to be addressed in order to have special needs training recognized. The absence of across the board First Nations standards and regulations is seen as a key barrier to professional recognition. Issues such as availability, access, and delivery of appropriate courses and programs need to be looked at along with incentives and access to appropriate professional development courses. The lack of incentive to be trained for or continue to work in ECE, is marked by lack of recognition, poor working conditions, low wages and poor worker upward mobility. The combination of respect and remuneration based on professional accredited training would provide incentive for aboriginal youth to stay in school and consider ECE as a career option. Participants also recommended providing support and incentives to both early child care centres as well as individual workers, to enhance their training with ongoing professional development courses provided within the community.

ITK response

Huge jurisdictional disparity is apparent in the north for ECEs which limits effective program development and financial parity. The fractured jurisdictions frustrate the vision of child-centered educational support, as the players are all working in the same communities where financial disparity exists, e.g. Nunavik has a salary scale and training is recognized, whereas Nunatsiavut ECE workers are compensated as government employees. This disparity affects retention and recruitment. Third party

funding for ECE workers results in low and stagnant wages, which leads to little value for the profession and no room for upward mobility. This in turn leads to difficulty in hiring and retaining staff and management, and in a disproportionate use of time and money for training.

ECE teachers should not be making ten or twelve dollars an hour to teach and care for our greatest future assets – our preschool children

A *Special Needs Certificate* that includes assessment training and hands-on fieldwork is essential for competency. Scaffolding needs to be in place to support the enhanced capacity building of professional skills and special needs training/certification should be linked to the career path of ECEs in order to be valued and compensated in an appropriate, professional way. ECE workers are isolated and underpaid and need networking, linkages and advocacy on their behalf. Access to professional websites, although not all communities have access to the internet, email trees and newsletters are the kind of tools that will help support professional development in the north. Membership in a professional association would also go a long way to enhancing early childhood education professionalism in the north.

3. (b) *What steps do we need to take to accomplish that?*

AFN response

Participants recommended working to maintain the importance of community based processes while moving towards implementing across the board First Nation standards and regulations. This action would make the requirements clear to all (i.e. centres, administrators, regulators, and college program developers), and address certification and credentialing issues which would in turn positively impact on wages, retention, reciprocity, and worker mobility issues. It would also address access to funding issues (i.e. for children with special needs). Participants recommended developing a strategy spearheaded by “champions” who would work to enhance community perception of ECE workers with the result that they would be respected and recognized as professional specialists.

In summary participants recommended compiling a list of the kinds of training that would enhance worker’s ability to work with special needs children (i.e. ECE and special needs certificate/diploma programs that are accredited and credentials acknowledged: developed in community developed training programs in early intervention services; working with AHRDAS to develop regional/national strategies for training ECE workers in special needs; addressing the cultural appropriateness of assessments.

ITK response

A big push is needed for sustained funding for centres to support special needs training for educators, which is important for certification. Advocacy for certification in special needs competency, maintained by ECE professional standards for continued accreditation, is essential. Target training to meet the specific needs of the children in communities, and the development of on-site community-based training such as in Inuvialuit will ensure community-specific capacity enhancements. Other communities have addressed community-based training only to experience distance education as a very protracted process (i.e. hours of extremely difficult teleconferencing with only four graduates emerging after many years). This is a less desirable training outcome considering the retention and recruitment challenges already mentioned.

4. Do you know of any other distance education methods that are working in First Nations and/or Inuit communities?

AFN response

Participants described and discussed successful distance education methods taking place in First Nations communities in the provinces of Nova Scotia, New Brunswick, Manitoba and in the Yukon Territory. They then identified the elements of these methods that contributed to their success, which would need to be addressed and implemented by other First Nations communities when developing their own distance education methods.

The first area dealt with the need to bring training into the communities by means of campuses, targeted workshops, and providing video conferencing in communities. Participants also identified the need to provide leadership training to community members, including those with special needs, in order to enhance understanding of and support for community campuses and training. Appropriate infrastructure and the provision of tutoring support, and mentoring were also identified as elements needed to ensure success.

The need to look for examples of harmonization between federal, provincial, and territorial governments was identified by participants as essential for collaborative efforts regarding technology, programs, and funding. The distance education methods discussed succeeded because they promoted the vision of *“it’s for the kids”* and focused on the message that *“early intervention is money better spent”*. Participants concluded that integral to the success of addressing and implementing these measures is the need to ensure knowledge acquired by distance education is distributed to the whole community, i.e. knowledge should not be owned by professionals alone, rather it should be widely owned and accessible to community members.

ITK response

Participants stated that the success of distance education methods depends on the quality of facilitation and the on-line environment. Modular components with community-based relevance and community supported networks are best. Travelling over long distances for professional development is expensive and is hard on the family life of a learner. Specialized video conferencing with experts is a successful communication tool in the north, and when possible, itinerant specialists visiting communities set up on-site consultative processes. "One-off" workshops are considered to be not particularly effective. Ownership of learning relates to how learning is formatted and the use of the adult principles of learning, which acknowledge and respect the experiences of the learner. Mentoring is a successful model that encourages ECE graduates to work with new and emerging ECE students.

Participants reported about programs they were aware of: a new one year program on Autism is available out of Ottawa for ECE graduates with degrees (travel involved); CEGEP has a special needs module which includes intervention, planning and assessment components (travel involved); ASL training is available in Nunavut; PHAC workshops are available for specific to Aboriginal children with special needs; and Virtues training is possible but expensive.

5. Based on the presentations, what areas of research are still required and how should those areas be prioritized?

AFN response

The participants identified six areas in which they lacked the research information necessary to move forward to develop plans of action. They recommended providing research data on:

- (1) The types of special needs specific to First Nations Communities and the number of children with special needs;
- (2) Funding sources for special needs;
- (3) Other key initiatives addressing ECD/special needs from a holistic, collaborative and integrated approach;
- (4) Assessment, curriculum resources, and methodologies;
- (5) Human resource issues in First Nations communities; and
- (6) Parents and families of children with Special Needs.

Participants prioritized research needs and identified specific components that need analysis. Recommendations would then flow about the most appropriate funding mechanisms and what has to be done to meet the funding needs.

- I. The first research priority is two pronged, (a) community-based research that provides data on the numbers of children with special needs, the types of special

needs and the capacity to develop community plans of action; and (b) funding sources for early learning and special needs, and tracking how it is accessed both on and off reserve.

- II. The second research priority entails finding and analysing information regarding key initiatives which are presently addressing ECD/special needs from a holistic, collaborative, and integrated approach. To acquire this information, participants recommended conducting literature reviews, looking at the *Aboriginal Circle of Early Learning Care* and carrying out an environmental scan of the findings of research being done in the regions in terms of successful/useful models and best practices. This information would provide an opportunity for national discussions regarding development of a national plan, and ultimately lead to an understanding of how to develop regional capacity in order to support initiatives.
- III. The next priority is research on assessment, curriculum resources and methodologies. Participants recommended that the research look at existing pilot projects in First Nations communities with an aim to gathering and analyzing information. Research should focus on case management styles, an integrated and collaborative foundation to assessment and program planning, and holistic approaches to assessment. Other areas of analysis would include how learning is shared and how communities are encouraged and supported to use collaborative holistic approaches to assessment.
- IV. The fourth priority identified is research information regarding human resources issues in First Nations communities. The participants recommended focusing on staff qualifications, wages, and incentives for professional development. Retention and recruitment is a concern as well as the diminished value placed on the work of Early Childhood Educators (ECEs).
- V. Research about the parents and families of children with special needs was the final area identified by participants. They recommended that this research focus on how best to approach the research, determine the needs of the community and to support involve the families of children with Special Needs. There are a lot of ethical issues inherent in this kind of research. Participants stated that mindful consideration of the approach is essential.

All participants agreed that in order to go forward with the recommended research and effectively act on the findings, the Assembly of First Nations (AFN) must give ECD and special needs a higher profile. They stated that this would entail providing Chiefs with education that would lead to an enhanced understanding of ECD and special needs. Although appropriate and timely responses to ECD and special needs are costly, it would be ill advised to ignore them considering the long term cost to the community.

ITK response

To fully understand the conditions of children with special needs in Inuit communities, as a foundation for research, it was suggested by participants that assessments should be administered to all children to provide a baseline of information.

Participants stated that research is still needed in the north which is related to parenting, Elders, culturally appropriate criteria, linguistics and cultural losses. Questions that still need to be answered to frame the gathering of knowledge and data are as follows:

- What are parents and ECE staff interested in assessing?
- What is the best for each child?
- Within what context (educational systems, families)?
- How do we strategize around lack of services in the north (i.e. no mental health workers in communities)?
- Where do residential school survivors (parents and grandparents) who are re-traumatized throughout their lives get help?
- How do we 'wraparound' the child with little or no services?
- How do screening tools help to highlight the preferred learning style and richness of gifts each child brings to his/her school environment (cognitive, physical, spiritual, social, emotional)?

6. (a) Are you aware of any existing diagnostic/ assessment tools that are appropriate for First Nations or Inuit children?

AFN response

Participants believed that screening and assessment are a process and that diagnosis should not be a part of the process. They identified a screening program, **Step by Step** being used in Kahnawake that is not standardized. The program uses the **Ages and Stages Questionnaire (ASQ)** screening tool which leads to parent involvement, and the **AEPS**, a linked assessment, evaluation, planning and intervention system for children from birth to six years old. The AEPS is valuable in that it does not diagnose and it can be adapted to specific cultural perspectives, using community norms as a baseline, the needs of individual children, their families, and their communities. AEPS can be made applicable nationally. It helps to identify goals and create appropriate curriculum. Finally it empowers parents and teachers which leads to inclusive intervention.

Participants recommended undertaking AFN research to develop a picture of where communities are regarding assessments and how they are addressing issues in their communities. They recommended the development of partnerships (Kahnawake, AFN, COEP) in order to share lessons learned which would lead to identifying gaps in testing, resources needed and what we "really want to know from the testing".

ITK response

There are very few Inuit diagnostic or assessment tools. A best practice that participants brought forward in Inuit communities is looking at assessment in an ongoing way. Documentation of the child's daily progress provides a snapshot of each child, a broad picture of a particular child that helps track the continuum of their development. This provides a record of continuous learning about each child.

Participants said that it is important to assess children of all ages to establish a baseline of data. The **Ages and Stages Questionnaire (ASQ)** is an appropriate milestone assessment tool for the Inuit population and can be administered to children up to age six years old with *yes* and *no* responses required. Inuit practitioners are developing this tool for seven to twenty-one year olds. Youth at risk can use this tool as a self-screen. It can be useful as a youth suicide marker as well for professionals concerned about how youth in their communities are faring. Ages and Stages is a tool that helps fathers become involved with their children as it engages the father first as a meaningful and practical instrument. Nineteen communities have been trained in the north to use Ages and Stages and it has been translated into Inuktitut.

Two **Linguistic screening/assessment tools** are in development by the government of Nunavut. These tools are designated to be applied in early childhood education programs, Kindergarten and grade one at six month intervals. The intention is to assess the linguistic ability of children and to develop programs and benchmarks for Inuktitut first language speakers.

The **Work Sampling System (WSS)** is used at Head Start sites such as Goose Bay and Tuktujaqtuk. This assessment tool builds on the strengths of the child. **Enviroview**, developed as an Aboriginal Head Start Impact Evaluation tool assesses the child care centre itself to determine what makes it as distinctly an Inuit or First Nations centre. There are several criteria which pertain to music, language, art, and the general environment. **TRIBES** training, a community embracing approach, is available for ECEs to learn about creating supportive classroom environments.

Others working assessment tools used in the north are: **Eckers, Brigantz** in Inuvialuit, an **Evaluation Form** in Nunavik and the **Nippising**. An Ottawa-based Inuit Aboriginal Head Start program staff uses **Sivumut**, an Inuit adapted assessment tool.

6. (b) *If there are not appropriate tools what needs to be done to achieve this goal?*

ITK response

Assessment processes have to acknowledge there is a huge diversity in population in the north with many culturally-based dialects. Assessments tools from the south can be adapted, but participants generally agreed that rather than doing this, it would be more

meaningful and effective to design and develop new culturally-based assessment tools for the north. Culturally sensitive diagnostic tools are not being developed yet but are essential. The real goal is supporting the child and providing services to the family within their cultural context.

7. Based on the discussions today, what recommendations do you have on

(a) Knowledge/data still to be gathered

AFN response

AFN group discussion participants determined that they need further knowledge regarding funding models and diagnostic testing. They proposed developing an action plan that would begin by reviewing existing American Funding models and using existing research to critique the current Canadian funding models. They would also link funding to the agreement to which Canada is a signatory *A Canada Fit For Children*.

The next step would be to engage funding bodies to look at diagnostic tests and determine what has been asked, what has been done, what data has been collected, and what lessons have been learned. Starting with Kahnawake's "Step by Step" program they would then look for similar programs which could be a source of data and best practices to develop a Special Needs Specific Policy Framework.

Provincial and Territorial governments would be used to disseminate the information gathered and the AFN website would be updated to include this and other recently acquired knowledge regarding special needs. As well as modifying tests to make them culturally appropriate they would focus on training and supporting the people who are using the assessment tools to ensure that they are used appropriately. The plan would entail having the AFN collaborate to champion special needs in meetings with government officials and politicians.

ITK response

Educators and researchers need to be educated and able to understand the northern culture, life conditions and the history of the community in order to create culturally sensitive assessment and diagnostic tools for all children. Screening tools need to be researched for ongoing developmental assessment considerations that are culturally-based, language-based, holistic and inclusive of the socio/emotional aspects of a child's life. Readiness of community commitment must be assessed as well so that research and the design/development of Inuit specific tools are credible and delivered by multi level partnerships and collaborations. An accessible package of special needs strategies for ECE staff is needed and educators need to be trained in partnership with parents to collect information, develop and implement intervention plans for children with special needs.

(b) Steps to be taken to realize:

(i) *Culturally appropriate screening/assessment tools*

ITK response

Screening gives the family and the school a snapshot of where the child is on the continuum of learning and development. Screening leads the way to appropriate interventions, training, appropriate program service delivery and family support. Parents must be part of the collaboration from the beginning; in other words parents can be involved in the assessment process (i.e. parents can manage ISSF).

Focus on the strengths of the child even if they express developmental delays. Children do well if they are identified early and do well with the right kinds of interventions and support. For instance, if the Ages and Stages assessment tool is applied a parent can work with their child to enrich the home environment and in collaboration with the preschool teachers look at ways to support the child's development in deficit areas as well as to.

Observation-based assessment tools that are practical, useable and supported with clear, easy to use guidelines is key (i.e. child uses facial expressions to indicate yes or no). A Social Emotional Development screening tool needs to be developed based on inherent strengths. The community can validate Inuit specific screening tools using culture and language as indicators to document changes over time as a dynamic living document that accompanies the child throughout his/her educational years in a non judgemental way focusing on what the child can do rather than on deficiencies. Photos of the child individualize and animate the learning portfolio and celebrate the child's achievements over time. Parents need resources and educational workshops to support them in helping their child. Parents should be encouraged to learn how to be an effective advocate on behalf of their child. Home supports need to be enhanced for some children and observations at home need to be included in school documentation.

The development of screening tools needs to be supported by clear guidelines and consistency of practice; without educated and consistent support, staff are ill-equipped to apply the outcomes of assessments in a meaningful way and to enrich the child's environment for individualized learning purposes. Teachers need guidelines and internet support or mentoring to use the tools effectively and for application to the curriculum. The preschool program should be steeped in the philosophy of dynamic assessment which provides rich feedback and assessments for learning recording the progress of children.

Please see Appendix XIII for Inuit Specific Principles of Education and Dynamic Assessment

i) *Distance education methods for ECE workers*

ITK response

Community-based, multi modal distance education modules that are supported by the community using a variety of approaches (i.e. books, video conferencing, video/DVDs) are essential for professional development. Three day training sessions with subsequent on the job practice, as well as follow up tutoring and mentoring, could work in the north. The attributes of distance learning that work for the north have the following components: flexibility, educated support; competency based, module-based specific to community needs, and are linked to practice. Content must be culturally relevant with opportunities to create *communities of practice* for sharing, interactive dialogue, and getting resources out across jurisdictions for distributive learning purposes.

iii) *Accredited training in special needs for ECE workers*

ITK response

Competencies of staff need to be accredited in the area of consistency of application of special needs assessment tools. Consistency of practice enables them to understand and document the indicators needing attention (i.e. language assessments). An Inuit training model must be designed and developed.

Some special needs are funded for targeted special needs such as autism and FASD that staff can access, however, not all communities need that particular training. Ideally training should be offered that is pertinent to the community needs and be offered as 'label free' to embrace the broad spectrum of special needs, assessment, screening and intervention planning. A train the trainer model is also essential to compensate for the continuum of staff retention challenges. Train the trainer would include mentoring Elders and specialized local professionals in the community.

Knowing the history of the community (i.e. social, language and culture, some communities have been moved) is a very important contextual component for ECEs in recognizing the unique features of each community. Mandatory training for service providers in Inuit values, practices and the community environment would enhance cultural competency and improve outcomes for children.

Training must include Inuit values, beliefs which includes being non judgemental in the approach to teaching. Training should include detection, interventions and planning with specialized modules of hybrid programs to meet the immediate specific community needs. ECE courses should include a *recognized* basic component on assessment, screening tools and asset mapping, to enable trainees to work with and support children with special needs and their families. Training should be flexible, practical, concrete, competency based and meaningful with appropriate and timely feedback for field

placement and practice. Distance and on-site training modules should be combined in the north using a variety of tools such as books, videos/DVDs, video conferencing and internet accessed communities of practice modules.

(iv) *general base knowledge i.e. demographics*

ITK response

Multilingualism (English, French, Inuktitut) of some children may have an effect on the assessment/diagnostic process and the costs of services and education, and may present issues regarding enhancements to service, treatment and support for Inuit children with special needs and their families.

8. *What other pieces do you see missing to move ahead with special needs?*

AFN RECOMMENDATIONS

- More community based case studies (AFN)
- Expand First Nations regional longitudinal Health Study (RHS)
- Build on other initiatives e.g. disability, Aboriginal Human Resources Development Strategy (AHRDS), PSE.
- Report card on implementation of recommendations from previous research
- Funding models need to be researched and models from literature need to be critiqued
- Best practices (Social Development Canada)
- Government responsibilities (link to research on eliminating silos)
- Review internationally (e.g. New Zealand, Australia)
- Research about professionalizing of First Nations ECE (i.e. training/programs/courses)
- Jurisdictional issues (e.g. where do children's hospitals fit)
- A paradigm shift (e.g. thinking that puts children first)
- Culturally appropriate tools
- Develop questions for RHS 2009
- Long term mentoring program for isolated communities
- Asset mapping training for communities and support from Tribal Councils
- Pilot projects/demo sites with provincial/territorial involvement

PRIORITIES

- More value based assessments (an orientation package e.g. Kahnawake)
- All aspects must be culturally appropriate, based on our unique values and beliefs

ITK response

I. Parents

Participants state that parents need help advocating for their child throughout the school years regarding assessed learning styles and optimum pathways for positive outcomes. Many parents do not want their children to be “institutionalized” too early in their development (i.e. children are going to school at too young an age). The readiness measures for children are not always appreciated by parents. It is often difficult to get buy-in from parents for assessments which are perceived as letting them know “there is one more thing wrong with my child”. ECE Staff are overworked and the combination of parental resistance versus marketing the benefits will require public education efforts.

II. Children

Assessing *all* children reduces guilt and fear attached to labelling *for a few*. Being able to see each child for their strengths as well as their intervention needs is important for parents so they do not feel that their child’s deficits are being highlighted. It was suggested by participants that there are relatively few high risk cognitive issues to address in children compared with children who are experiencing social/emotional behavioural challenges and need strength building interventions. They feel children need to be better equipped to deal with other issues as well as their learning disabilities.

III. Social/Emotional Assessments

Elders believe in teaching from the heart and that thinking begins in the heart with pre birth experiences, having a healthy pregnancy and naming the child. It appears that education is focused on the cognitive skills of children. Elders want to see screening tools developed with social/emotional indicators. They are interested in profound character building components being added to the cognitive curriculum. Identifying these indicators are grounding and heart building (i.e. what kind of human being is being shaped? what are the indicators of their emotional and spiritual intelligence?). Focusing on relationships and feelings helps a child understand who he/she is within his/her own cultural setting. Developing cross cultural competencies is essential in order to explore what social/emotional competencies that can be expected at which age, i.e. the way you serve others, the way you support one another, helping one another heal, and the way you seek solutions.

ITK Recommendations

Participants stated that this report should go to the Inuit community for approval before being published.

Short Term

1. Inuluurijaituq: develop a philosophical statement of a strength-based inclusive approach that puts the child in the centre using the wraparound process to support the continuum of learning and the building of the life of the child.

2. Leadership by Inuit Tapiriit Kanatami (ITK) should be taken on as a non biased national entity to gain recognition of special needs training and accreditation to set professional standards for ECE.
3. Create an umbrella group (ITK, IECDWG, Pauktutuutit) to support the design and develop to ECE professional standards in the north, to encourage pan jurisdictional collaboration and to advocate for Inuit children with special needs.
4. Task IECDWG to move forward with a feasibility study complete with a needs analysis and description of how community-based models can be applied to existing child care programs to develop flexible community-based Inuit training modules.
5. Design and develop an Inuit specific domain on the Aboriginal Children's Circle of Early Learning (ACCEL) website (info@accel-capea.ca) a people's network to share wisdom, knowledge and resources in support of our children and communities; connect ITK newsletter to this site.
6. Support a community of practice to help ECEs feel less isolated, share success stories and share opportunities for professional development.
7. Continue to collaborate with the Centres of Excellence and Assembly of First Nations for the purpose of gathering knowledge and data through collaborative funding efforts grounded at the Centre of Excellence.

Long Term

1. Certify all ECE's across the northern regions and create a professional association in the north for accreditation and to raise the standards and compensation for ECEs.
2. ECE professional development modules need be culturally appropriate and have community specific relevance.
3. Distance education should be designed and developed with a variety of modules taking into consideration community-specific relevance and northern realities. The modules should be multi modal, accessible, culturally competent, and provide certification. Individual learning opportunities should be designed for parents, staff and community. Communication supports are an essential ingredient for success such as on-line conferencing, virtual conferences, pod-casts, discussion groups, and a community of learning approach.
4. Strategic investment in research related to designing and developing culturally appropriate assessment tools e.g. linguistic and social/emotional screening tools with clear guidelines and training is essential. These could be grounded at the Centre of Excellence.

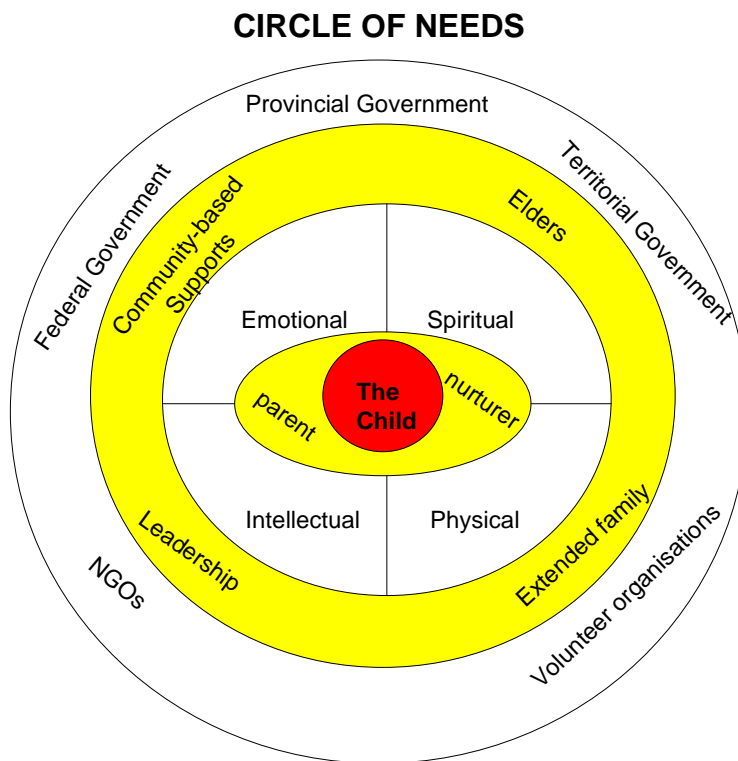
5. Holistic funding (not silo funding or label funding) to address access to speech therapists, linguistic support, professional resources and paediatricians is highly recommended.
6. Specific funding for parental support (e.g. educational workshops, home care) is needed.
7. Design and development of Inuit specific diagnostic tools is imperative and this work could be grounded at the Centre of Excellence.

Closing Plenary

Participants reconvened on the afternoon of day two, for the closing plenary. The plenary was facilitated by Dianne Rogers who opened by suggesting that over the past two days participants had been engaging in what the Inuit call “**Quanaqtururanginiq**” which means Solution Seeking, a kind of development that needs to take place in person for deep thinking, innovation and resourcefulness.

AFN facilitator Dr. Rose-Alma McDonald and ITK facilitator, Carol Rowan, along with participants from both discussion groups provided overviews of their discussions and recommendations for strategies to move forward with recommendations in the areas of curriculum development, distance education and adaptation of assessment tools to be used in support of Special Needs in Aboriginal communities.

1. Definition of Special Needs



AFN Group 1A

Group A designed and developed the Circle of Needs graphic. They whole heartedly accepted the CECASN definition but said it is important to clarify for the definition's target. They said that a child centered approach to identify needs brings the child into the centre. Holistic development is demonstrated by the spiritual, emotional, and cognitive domains and that special needs must be founded on a strength-based framework.

The outer circle represents funding technology. This is the federal level, in particular, HRSDC, INAC, and PHAC. Players around table take responsibility for meeting the holistic developmental needs of each child. Each stakeholder contributes resources to the pot to meet these needs. The gaps in funding fall between what is needed and getting needs met. The Inner circle represents the need for parents to be considered in with other nurturers.

The HRSDC definition is such that all of our children would fit under special needs so definition should be more Rights based, e.g. **** Children with special rights ****

AFN - Group 1B

Group 1B liked Centre of Excellence definition except to contextualize it to the Aboriginal context. Principles emphasize healthy family and community development, the environment and the determinants of health. The participants affirmed that early, timely intervention is needed. Some of the overarching principles and legislation that lends gravity to the special needs movement are: Jordan's Principle, The UN Convention on Rights of the Child, A World Fit for Children, A Canada Fit for Children, and The Convention on the Rights of Persons with Disabilities and Children with Special Rights versus Special Needs.

ITK Group

Carol Rowan, facilitator for the ITK group, provided an overview of the Inuit discussion group for the Summary Plenary.

The ITK group accepted the definition with the added feature of holistic funding related to the addition of a continuum of support framework throughout the life of a child with special needs. The key point is that all children have special needs therefore we should be looking at all children in this way. (Inuit Early Childhood Development Working Group (IECDWG) accepted the Centre of Excellence definition but wanted to remove the word adolescents for early childhood specific funding purposes)

The notion of labelling is critical since funding is usually tied to labels. This construct forces the continued use of labelling. When this formula is not used, communities are enabled to work on a plan that supports *all* children. It is critical to be able to access funding that enables supporting the child in a holistic way. It is also culturally inappropriate to use the labels. If funding is allocated by label (e.g. autism, FASD), Elders find children are then being quantified by levels of disability and deficiency. This is seen as damaging to children, as the antithesis of inclusive, strength-based, and the child focused philosophy of the Inuit.

2. SHIFTING THE PARADIGM TO ONE OF STRENGTH AND RIGHTS

AFN Group

The Special Needs paradigm needs to be one of strengths and rights rather than needs and deficits. This would give rise to a definition which is anchored on rights, emphasizes strengths and is context specific. This in turn will lead to effective policy development.

ITK Group

A philosophy statement (Inuluurijaituq), using a strength based approach would help a child centered focus take root putting child first. Education is important for all people linked with a child centered approach so they have the ability to understand the framework. The ITK group felt that a new term to replace 'special needs' is worth looking into, to ground a strength based approach. The Wraparound model is an excellent practice in the north which brings community people and professionals together to 'wrap around' and support the child at the centre. The strength of wrap around fits with the Inuit cultural perspective of putting the child at centre and the family in charge of process recognizing the importance of family role as primary caregivers. Other supports can be brought to bear from extended family and community members as there are few formal services to rely on in the north. Informal services are more reliable and consistent because they are always there. It is so important to identify and enhance ongoing support as part of the fabric of community instead of relying on transient support. The paradigm shift can be encouraged by focussing on the gifts of the child, the Wraparound model, on asset mapping, and on enhancing capacity building. Within this shift labels must be discarded.

3. RECOGNIZE SPECIAL NEEDS TRAINING

AFN Group

Everything needs to be community based and focused to create a contextual base from which to work. People from community need to develop programs informed by their principles and values which should be boosted by adequate training and accreditation. What are skill sets and training we are looking for in ECD workers? Community needs and reciprocities must be identified and met while addressing rigor. A specific list of training that would enhance ability to support children at the community level needs to be identified. Accessibility to more certificate and diploma programs is critical along with finding out more about accreditation boards (e.g. Alberta FN Accreditation Board is a suggested national Model).

Across the board First Nation standards and regulations need to be in place to enhance certification and accreditation issues. A plan or strategy should be developed that would to increase the number of staff with early intervention training and credentials at the community level. Collaborating with the AHRDAS to develop a plan for regional training is crucial. The idea of national standards can be problematic so they need to be flexible and not reduced to minimum standards. Professional development entities need to make more opportunities available with funding attached. Personal and program incentives have a positive outcome as does funding of Aboriginal Head Start On Reserve, which positively impacts the professional development of workers. If we want to encourage training we need to provide the funding.

Funding research needs to address discrepancy between how Aboriginal Head Start is funded on and off reserve. A plan should be developed to impact and improve wage scales, recruitment, and retention of staff. A professional development strategy is essential to change how the ECE profession is perceived by families, community members, Leadership, and funding organizations. All of these stakeholders need to be educated about the professionalism of ECEs so they can act as “champions” on behalf of ECEs and their own children.

ITK Group

ECE educators identified the need to be recognized as professionals, with professional standards and appropriate and equitable pay across the sector of early childhood education. In order to have a strong voice, It is essential to identify a national leader (i.e. ITK leader) to unite all Inuit to work on special needs. Funding is needed to support educators in targeted areas with out labelling. Flexible training is needed (i.e. practical, concrete, useful, delivered in community, owned by learners and using many modalities and methods), which emphasis practice. The existing ECE module includes a special needs component but there are no special needs specific educational resources in Inuktitut currently offered, however there is a pilot project in Cree beginning end of March 2007. A Certificate in Special Needs in a three day module on theory followed by block of practice and mentoring would be a satisfactory model.

Inuit Tapiriit Kanatami is positioned to take lead for obtaining professional recognition for ECEs. An umbrella group consisting of ITK, IECDWG and Pauktuutit should be formed for political clout to advocate for consistency of high standards, pan jurisdictional impact and advocacy for Inuit children. This strategy would allow everyone to see Early Childhood Educators as a profession as opposed to a job.

4. DISTANCE EDUCATION METHODS WORKING IN FIRST NATION OR INUIT COMMUNITIES

AFN Group

(i) Yukon Example

Yukon communities are trying a paradigm shift in more areas than just special needs (e.g. Justice, ECD, child welfare, and strengthening the family). Communities are in the process of implementing their own holistic legislation to link systems. This initiative requires a new structural matrix and a global philosophical shift that everyone is talking about. We need to ensure adequate infrastructure and the big challenge regarding infrastructure is training. Universities try to reproduce the medical model rather than providing holistic training. Our goal is the development a new centre and we are putting self-governing dollars towards this goal. We are taking action, starting to move, and not asking permission. We are trying to determine what holistic training looks like. We are asking universities and putting campuses in our communities. We are bringing in specialized training (e.g. Justice Institute (JI) training, University of Victoria and

University of Saskatchewan), and tailoring it to the community. Everything is interconnected and we do not want to reproduce other world views. Universities have to make big shifts to move in this direction, to develop and shape courses with tutors to ensure enhancing capacities in the community.

JI training/ Mediation: Twenty-five diverse people were brought in to train together with a three year training compressed into one year, with the outcome of achieving certification in one year. This is the centerpiece we want. Holistic training like this had huge impact and resulted in a shift in behaviour regarding how to treat each other. Those with special needs are also working for certification in mediation. There is personal developmental work and a general knowledge base in the Justice Institute training model. People from all levels of education are moving together now. This practice is the foundation of how to get people together to create good relations to move forward.

Important that community be involved/empowered

The community developed their own curriculum and training for parents that avoided labelling. Participants said Individual Education Plans (IEPs) address parent's reluctance to get involved due to the shame that is triggered by labelling. Remove labelling and the parents get involved. Distance education provides this impetus as it engages a broader ownership. (Please see Appendix XI Group 1B flip chart notes for other community examples).

Infrastructure needs to be ensured with tutoring support. The knowledge base should be disseminated through distance education and distributed to whole community raising the child (e.g. technology and content that is not owned by professionals but widely owned and accessible to community members). Mentors and mentorship is essential for a continuum of support. A working group needs to address jurisdictional issues to document what has been done between regions, and advocate for cooperation between federal, provincial and territorial governments. Promoting the vision of "*it is for the kids*" and operating by a collaborative principle regarding technology, programs, and funding is essential for success. Emphasizing and focusing on the message that "*early intervention is money better spent*" is part of that message.

Distance Education Methods that work in communities now ensure adequate infrastructure, provide on-going tutoring and support in communities, and encourage broad ownership of and accessibility to skills and knowledge, in the community (on IT, on ECE, Parenting, Child development, Advocacy. Knowledge is not restricted to one "expert", and there is co-operation between Jurisdictions regarding the sharing of services, care, treatment and support.

ITK Group

An Inuit *training model needs assessment* must come first. Community-based, module-based, and competency-based models have been successful. Distance training models used in one region graduated only three ECEs over many years so we need to review how new technology could improve this. The content needs to be reviewed for delivery methods and relationship between facilitator and student. Outgoing graduate ECE students could mentor incoming ECE students doing a hybrid type of distance education with multi modal pod cast video training tools. With the advent of bandwidth more communities have access to technology. A needs assessment of current models will lead to developing the model described above.

Task IECDWG to consider recommendations to do a feasibility study, and to develop an Inuit training model. It is critical that a needs assessment be done for a flexible community-based, module-based practice. Competency-based approaches have been very successful in distance education models. The distance education in Inuvialuit needs to be revised by looking at improved technical supports, better design, and support from within the community. Online conferences, information mediums, pod cast discussions, chat rooms, a properly trained work force and community-based training on gap identification and asset mapping are crucial components for moving forwards.

5. WHAT AREAS OF RESEARCH ARE STILL REQUIRED? PRIORITIZE

AFN Group

More community based studies are needed to collect data. It is important to look at RHS regional health service and what has been done in the mainstream to formulate questions about special needs. We need to interview individuals with disabilities to find out what they have found to be successful and take what is applicable. A report card on previous research which justifies new research is essential. It is important to build on what is out there. Funding models need to be researched too in order to determine how to get funding without labelling. Look at international Best practices as sources of expertise to be shared and apply successful practices in Canada. Government has the responsibility to help to overcome jurisdictional issues e.g. FINB is only looked at within FINIB) based on implementing "Jordan's Principle".

ECEs must be professionalized by means of certification and professional standards in order to change the community perception of ECEs as entry level vocations. Bolstering the image of ECE will help with wage inequities and will make ECE more important in people's minds. We need to do research where children's hospitals fit into the special needs picture for Aboriginal children. More values- based assessments like the *Step by Step Program* are recommended. Khanawake uses *Step by Step* and gives a value-based orientation package to new employees to screen out those who don't agree with the process, keeping in mind what we want to base on our traditions and beliefs. ECEs

need to be educated to use culturally appropriate tools. We need to identify communities that are doing innovative things and encourage these communities to mentor others.

Training in asset mapping at FHIB/FASD to use in communities for mapping special needs expertise and supports is strongly advised. Pilot projects could link into special needs training with mentorship components. Partnering with the provinces and territories is way to generate special needs initiatives. A national strategy must also be struck to move forward with community needs. Sharing the knowledge (no private ownership) is best for optimum outcomes for the children. It is important to devise a strategy to give children with special needs a higher profile. Do the research regarding numbers and comparative dollars spent and then use findings to demonstrate how spending earlier saves dollars later. It is crucial that we research culturally appropriate approaches from a systems perspective so we can make arguments for what do at community level.

ITK Group

Appropriate screening is essential. There are three screening tools for children with special needs currently in use in the north. Some have been adapted and translated e.g. ASQ translated. The Nippissing is used but not translated. Developing culturally appropriate screens in Inuktitut is a priority. Diagnostic tools require funding and professional resources for testing and collaboration so specialists can come to the community. Diagnostic tools require funding and professional resources for testing and collaboration so specialists can come to the community. Professional funding and research is needed in all areas including parenting educational support, language acquisition and social/emotional curriculum.

ITK Recommendations for the development of culturally appropriate screening tools

- I. Development of culturally appropriate assessment tools including screening tools with some of them in three languages (English/French and Inuktitut).
- II. Development of diagnostic testing tools will need funding and collaboration as there are very few available.
- III. Funding and resources are required for each area of assessment.
- IV. Professionals must develop appropriate tools and be sensitive to culture and language; for instance, those testing for language have to know the sounds Inuit children can and cannot make.
- V. A socio/emotional tool needs to be designed at in early childhood as Elders believe belief there should an emphasis on building a capable person (e.g. build the heart before head) Elders think children should develop character strength with Inuit-based values and beliefs which will result in resiliency throughout the life span.

- VI. ECE need to be trained to use strength-based assessment and screening tools with clear, concise guidelines designed by Inuit professionals; mentorship is important to understanding the meaning of the results and to be able to develop action plans from the results.

Key Themes

- I. ITK provides national consistency and can move the recommendations forward under the ITK mandate.
- II. A strong recommendation to support the two umbrella organizations to pursue critical competency-based curriculum and standards. Competency training certification raises the profile of ECE and it is the role of national organizations like ITK to elevate the standards.
- III. Early identification is essential using culturally appropriate tools and support for caregivers and communities.
- IV. Centre of Excellence has a role to play to link the developmental work to universities to design needs assessments with culturally appropriate assessment tools as a priority.
- II. Solution seeking is critical on jurisdictional issues to relieve the bottle neck related to training, standards, support, funding and resources.

Please Note: Although the above issues and recommendations were deemed important, both ITK and AFN members stated that they needed more time for reflection with community members, before determining priorities.

Closing of The Roundtable

The Roundtable closed with remarks by Inuit Elder Ina Zakal, and a prayer by First Nations Elder Gordon Williams.

Analysis of Roundtable Discussions

Methodology

The writers integrated the notes from the focus group discussions and the summary plenary. They then coded them for common themes and recommendations, regarding the areas of curriculum development, distance education, and adaptation of assessment tools. They found that for the most part issues and strategies for moving forward, and recommendations were common between participants and across groups,

Analysis

Effective, appropriate and sustainable curriculum and assessment tool development and delivery, for use by Special Needs workers in Aboriginal Communities, is contingent on a shift from the current *Special Needs deficit paradigm*, to a *rights and strengths paradigm*. This paradigm shift must start at the community level, with the recovery of cultural values, family and community traditions, and language that have been lost as a result of colonization and the Residential School experience. Recovering traditional holistic understandings of, and language about, the determinants of healthy development, would give rise to dynamic, holistic, child-centered definitions of Special Needs that are specific to aboriginal community contexts. It would also give rise to a child-centred policy framework founded on the concept of rights, strengths, inclusion and integration, and guided by the following principles:

- 1) **Community ownership** - Research, policy, governance, and practices that are community driven
- 2) **Partnerships and Collaborations** - with all levels of government for the design, governance, and delivery of supports to Special Needs Children and their Communities which are sensitive to and respectful of the specific

community traditions, cultural values, language, abilities, capacity and needs, and aim to recognize and enhance the rights and strengths of the child, as well as the rights, strengths and responsibilities of the parent(s), family and community

- 3) **Harmonization** - the comprehensive, inclusive and integrated provision and delivery of services and programs from across sectors/jurisdictions, to Special Needs children, their families and communities

Having emphasized the importance of a paradigm shift participants determined a strategy and action plan for initiating the shift. Table 1 demonstrates their strategy which begins with grass roots learning and development and bubbles up to politicians and policy makers.

Table1. Strategy and Action plan for moving forward with creating Culture Change in order to shift Special Needs Paradigm to one of strengths

Strategy	Action Plan
Work at Community level	Work with, children, parents, families, elders, communities members, and ECE workers to: <ul style="list-style-type: none"> • Explore and recover cultural values and traditional practices that promote strength based understanding of Special Needs • Integrate this strength based understanding with what we know about the value of early intervention to create comfort zone for families and chiefs
Chiefs/Governance level	Enhance Chief's and Elder's understanding re Special needs to have them: <ul style="list-style-type: none"> • Prioritize and collaborate on Special Needs Profile • Create tri-partite committee to agree on principles
National Level	Create a communication plan with a unified message that: <ul style="list-style-type: none"> • Promotes concepts of strengths and rights and a vision of "Children First"; • Uses tools such as: press releases, ACCEL website, newsletters, working groups, service announcements, Posters, Brochures, and paid advertisements; engages volunteer sector, child advocates, NGOs, Coalitions, and Media • Reaches politicians and policy makers with targeted message to which they can respond

In addition to recommendations and strategy regarding a Special Needs paradigm shift, participants brought many recommendations specific to Special Needs curriculum development, screening/assessment tool and distance education, to the closing plenary. Analysis of these strategies and recommendations revealed key messages and recommendations regarding how to go forward with curriculum development, distance education, and adaptation of assessment tools, as they pertain to Early Childhood Education and Special Needs in Aboriginal communities.

KEY MESSAGES

- 1) Accept definitions which reflect Aboriginal contexts and which are attached to holistic funding concepts within a framework that reflects the lifetime continuum;
- 2) Develop a philosophy statement of a strength based approach to special needs.
- 3) A joint commitment from communities, regions, provinces, territories and the federal level to develop a research framework would go a long way to addressing the special needs issues in an evidence-based way;
- 4) There is a need for national consistency on the special needs profile (ITK has mandate to pursue this on behalf of Inuit Communities);
- 5) Early identification and intervention with culturally appropriate tools and resources is imperative, along with support for caregivers and the communities of special needs children;
- 6) Solution seeking on jurisdictional issues is an essential piece regarding training and support and funding and resources;
- 7) Enhancement of community capacity and ensuring cultural competency of ECE workers coming into communities;
- 8) The Centre of Excellence has crucial role to play in the support of both ITK and ANF in their efforts to move forward with development and delivery of appropriate curriculum and screening/assessment tools for use with special needs children in Aboriginal communities.

KEY RECOMMENDATIONS

Build On What Is Out There

- 1) More values-based assessments like Step by Step Program are recommended
- 2) More community based case studies are needed;
- 3) Pilot Projects could link into special needs training with mentoring component, as well as partner with provinces and territories to generate a way to market special needs initiatives;
- 4) Expand First Nations Regional Longitudinal Health Study (RHS);
- 5) Look at Regional Health Study(RHS) regarding what has been done in mainstream to formulate questions about special needs - Develop questions for RHS 2009;
- 6) Build on other initiatives e.g. Disability, Aboriginal Human Resources Development Strategy (AHRDS), PSE;
- 7) Find out more about Alberta FN Accreditation Board and design a national model;
- 8) Identify, build disseminate knowledge on Best practices (Social Development Canada);
- 9) Balance a national strategy for moving forward with the needs of the community;
- 10) Report card on previous research which justifies new research;
- 11) Report card on implementation of recommendations from previous research;
- 12) Research what being done internationally (e.g. New Zealand, Australia).

Recognition/Education/ Training /Content

- 1) ECE educators must be recognized as professionals, with professional standards and appropriate and equitable pay across the sector of early childhood education;
- 2) Advocacy for certification in Special Needs competency, maintained by ECE professional standards for continued accreditation is essential;
- 3) A certificate in special needs that includes assessment training and hands on field-work is essential to competency. Scaffolding needs to be in place to support the capacity building of professional skills and special needs training/certification should be linked to the career path of ECEs in order to be valued and compensated in an appropriate, professional way;
- 4) Identify national leader (ITK) to take lead on obtaining recognition and to unite all Inuit to work on special needs profile - need an umbrella group, ITK, IECDWG and Pauktuutit for political clout and making standards across jurisdictions;
- 5) Have AFN Chiefs take lead on ECE and Special Needs profile by implementing national First Nations standards and regulations and certification process in order to enhance certification and accreditation issues – look at AFN Alberta accreditation process to move forward on this;
- 6) Compile a list of the kinds of training that would enhance worker's ability to work with special needs children (i.e. ECE and special needs certificate, diploma and programs that are accredited and credentials acknowledged, and developed in community training programs in early intervention services);

- 7) Develop plan/strategy that would to increase recruitment and retention staff with early intervention training and credentials at the community level e.g. recognition and value for work, better pay scale, better working conditions, job mobility;
- 8) Collaborate with AHRDS to develop plan for culturally appropriate regional training that acknowledge community needs and reciprocities while meeting academic rigor;
- 9) Develop and implement more culturally appropriate certificate/diploma, programs, and coursework;
- 10) An Inuit training model needs assessment must come first;
- 11) Flexible training is needed (e.g. practical, concrete, useful, delivered in community, owned by learners and using many modalities and methods) which emphasis practice; look at special needs specific pilot project in Cree beginning end of March 2007;
- 12) Ownership of learning relates to how learning is formatted and the use of the adult principles of learning which acknowledges and respects the experiences of the learner; mentoring is a successful model that encourages ECE graduates to work with new and emerging ECE students;
- 13) Develop long term mentoring program for isolated communities;
- 14) Develop asset mapping training for communities with the support of the Tribal Councils;
- 15) There is a need for more ongoing professional development opportunities, incentives and funding for centres and individuals;
- 16) Support profession development of ECEs who are working in isolation by creating a professional association; provide networking opportunities and linkages by easing access to professional websites, newsletters and email trees;
- 17) Target training to meet specific needs of the children in communities and the development of on-site community-based training such as in Inuvialuit;
- 18) Provide asset mapping training at First Nations and Inuit Health Branch/FASD to use in communities for mapping special needs expertise and supports;
- 19) Training should be consistent across the northern regions and be community led with *community asset mapping* so everyone knows what's there, what's not there and how to access services and training in the community or over distance.

Community

- 1) Develop a strategy to impact how ECE profession is perceived by community, leadership, and funding bodies, including having "Champions" of ECE workers;
- 2) Share knowledge with whole community; no private ownership for best possible outcomes for the children;
- 3) Implement pilot projects/demo sites with provincial/territorial involvement;
- 4) Identify specific list of training that would enhance ability to support children at the community level e.g. Advocacy training for parents and workers;
- 5) Implement community based studies for data on: the types of special needs specific to each community; the number of children with special needs; human

resource issues; the needs and resources of parents and families of children with special needs;

- 6) Funding and research is needed in all areas in ITK communities, including parenting educational support, language acquisition and social/emotional curriculum;
- 7) Research culturally appropriate approaches from a systems perspective so we can make arguments for what do at community level;
- 8) To fully understand, what are the conditions of children with special needs in Inuit communities as a foundation for research, assessments should be administered to all children to provide a baseline of information;
- 9) Involving parents for a clear profile is important as a partnership strategy with families;
- 10) The Wraparound program is an excellent practice in the north which brings community people and professionals together to 'wrap around' and support the child at the centre;
- 11) Labels must be discarded; the Wraparound model and focussing on asset mapping process will initiate this process;
- 12) Continuity of documentation throughout the school years could provide valuable data for the transition to Kindergarten and integrated approaches like Wraparound (*aajiiqatiginiq*) for special needs children and their families.

Screening/Assessment Tools

- 1) Development of culturally, linguistically appropriate screening and assessment tools is a priority;
- 2) Research is needed to develop a picture of where FN and ITK communities are regarding assessments and how they are addressing issues in their communities;
- 3) Develop partnerships e.g. (Kahnawake, AFN, COEP) in order to share lessons learned which would lead to identifying gaps in testing, resources needed and what we "really want to know from the testing";
- 4) Funding and professional resources are required for development of each area of assessment, as well as collaboration so specialists can come to the community
- 5) Professionals must develop tools that are sensitive to culture and language;
- 6) Those administering tests must have cultural competence e.g. those testing for language have to know the sounds Inuit children can and cannot make;
- 7) Provide Inuit training to ECEs to use strength-based assessment and screening tools with clear, concise guidelines designed by Inuit professionals; mentorship is key to understanding the meaning of the results and to be able to develop action plans from the results;
- 8) A socio/emotional tool needs to be designed for early childhood as Elders believe there should be an emphasis on building a capable person (e.g. build the heart before head) Elders think children should develop character strength with Inuit-based values and beliefs which will result in resiliency throughout the life span;

- 9) Assessment processes have to acknowledge there is a huge diversity in population in the north with many culturally-based dialects;
- 10) It would be more meaningful and effective to design and develop culturally-based assessment tools from the beginning.

Distance Education

- 1) A needs assessment of current models is critical in order to develop recommendations;
- 2) Task IECDWG to consider recommendations to do a feasibility study; develop an Inuit training model; implement a needs assessment for models of community-based flexible modules of practice using a competency-based approach;
- 3) Review how new technology could improve distance education training;
- 4) Review content for delivery methods and the relationship between the facilitator and student as the success of distance education methods depends on the quality of facilitation and the on-line environment;
- 5) Outgoing graduate ECE students could mentor in coming ECE students doing a hybrid type of distance education with multi modal pod cast video training tool
- 6) Implement online conferencing, multiple information mediums, pod casts, e-discussion and chat rooms;
- 7) Provide service delivery asset mapping or individual community blueprints so everyone knows where to access community services or how to link with distance services through the web, audio/videotaped based information or tele-health;
- 8) Specialized video conferencing with experts is a successful communication tool in the north and when possible itinerant specialists visiting communities set up on-site consultative processes.

Funding

- 1) How, When and where does funding flow; communities must have this knowledge in order to influence the agendas of funding organizations and shape the direction of funding imperatives;
- 2) Funding directives must lead to accessing *label-free-funds* (LFF) which focuses on the strengths of the children;
- 3) Do the research that is required for numbers and comparative dollars spent
- 4) Develop a strategy for showing how spending earlier saves dollars later
- 5) Address discrepancy between how Aboriginal Headstart is funded on and off reserve

Research

- 1) Find out how we can give children with special needs a higher profile;
- 2) We need to know more on assessment, curriculum resources, and methodologies, case studies, pilot projects, best practices, lessons learned;

- 3) It is the responsibility of the government to link community research outcomes to eliminating silo funding;
- 4) Research needs to be done to find out where children's hospitals fit into the special needs picture for Aboriginal children.

Conclusion

Participants from both AFN and ITK groups were asked to prioritize recommendations for moving forward. Both groups responded that it is too early in the process to be able to do so. Both ITK and First Nations participants articulated a need to take the recommendations back to their respective communities where they will reflect on them in order to determine how move ahead on behalf of children and families with special needs.

ITK working group teleconferences will follow up on the work completed at the Roundtable. The group is also currently doing a survey on special needs.

AFN intends to move forward on a national level; Dr. Rose-Alma J. McDonald is doing an environmental scan, asset mapping and a literature review, regarding what is being done regionally on special needs in order to establish a baseline of information. These initiatives will help AFN to prioritize.

Roundtable participants felt that they had worked hard and come up with recommendations that they could take back to their communities for more reflection and to use as guides to funding proposals.

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Early Education and Special Needs in First Nations and Inuit Communities

Appendix I

Centre of Excellence Roundtable

AGENDA

Tuesday, February 27, 2007 – Laurier Room

Chair - Julia O'Sullivan

- 8:00 Continental Breakfast/Registration
- 8:30 Welcome/Opening Remarks
 - ▶ Art Dedam, Program Manager, Aboriginal Affairs Directorate, HRSDC
- 8:45 *First Nations Children with Special Needs*
 - ▶ Melanie Barrieau, Assembly of First Nations (AFN)
- 9:15 *Inuit Children with Special Needs*
 - ▶ Tracy Brown, Inuit Tapiriit Kanatami (ITK)
- 9:45 Background Presentations of Research Reports to Initiate Discussions:
Legislation & Regulations by Jennifer Clinesmith ▶ presented by Sandra Griffin
Assessment Tools and Early Childhood Training Institutions
 - ▶ Kim Kienapple and Adele McSorley, Centre of Excellence for Children & Adolescents with Special Needs
- 10:30 Refreshment Break
- 10:45 Continuation of Background Presentations of Research Reports:
Community Models of Distance Education for First Nations and Inuit Adult Learners: Best Practices and Lessons Learned in Canada
 - ▶ Brian Walmark, Keewatinook Okimakanak Research Institute (KORI)
- 11:15 Summarization and Setting the Stage
- Noon Lunch
- 1:00 **Small Group Discussions** - with Facilitators
 - Group 1 Focus First Nations Special Needs (Group Moves to Cartier Room)*
Rose-Alma McDonald, Facilitator
 - Group 2 Focus Inuit Special Needs (Group Stays in Laurier Room)*
Carol Rowan, Facilitator
- 2:15 Break
- 2:30 **Small Group Discussions with Facilitators Continue**
- 4:30 **Closing Remarks/Adjournment**

Wednesday, February 28, 2007

- 8:00 Continental Breakfast
- 8:30 **Small Group Discussions with Facilitators Continue**
- 10:00 Refreshment Break
- 10:15 **Large Group Discussions (Laurier Room)**
Dianne Rogers, Facilitator
- Noon Lunch
- 1:00 **Large Group Discussions and Recommendations**
- 2:15 Break
- 2:30 Wrap Up

Participant List**CECASN**

Ouellet, Denise
 Tagalik, Shirley
 Armstrong, Collene
 Griffin, Sandra
 Isaac, Karin
 Palmantier, Montgomery (Monty)
 Kienapple, Kim
 McSorley, Adele
 McClure, France
 Henry, Sarah
 Milliea, Corrina
 Bernard, Sunshine
 Rudolf, Sarah
 Rother, Nancy & Taylor, Gail for Dionne, Carmen
 Walmark, Brian
 Knott, Bonnie
 Boone, Margaret
 O'Sullivan, Julia
 Rowell, Lisa (Recorder for CECASN)
 Rogers, Dianne (Facilitator)

douellet@vef.ca
 stagalik@gov.nu.ca
 collene.armstrong@pointsnorth.ca
 griffi1@unbc.ca
 karen@acc-society.bc.ca
 palmantm@unbc.ca
 kienapple@accesswave.ca
 adele.mcsorley@msvu.ca
 France.mcclure@gnb.ca
 skhenrygallant@ihis.org
 corrians@millbrookhealth.ca
 sbernard@eastlink.ca
 sarah_rudolph@phac-aspc.gc.ca
 carmen.dionne@uqtr.ca

 brianwalmark@knet.ca
 bknott@lakeheadu.ca
 mboone@lakeheadu.ca
 juliao@lakeheadu.ca
 lrowell@sympatico.ca
 diannerogers@sympatico.ca

HRSDC

Corcoran, Priscilla
 Dedam, Art (Welcome only)
 Fleetwood, Leah
 Godon, Phillip
 Francis, Sayyedya
 Khan, Andrea
 Parkin, Liz
 Flynn, Valerie
 Lickers, Darlene
 Stone, Kelly PHAC
 Charlette, Colleen INAC

priscilla.corcoran@hrsd-rhdcc.gc.ca
 art.dedam@hrsd-rhdcc.gc.ca
 leah.fleetwood@hrsd-rhdcc.gc.ca

 sayyedya.francis@hrsd-rhdcc.gc.ca
 andrea.khan@sd-dsc.gc.ca
 liz.parkin@hrsd-rhdcc.gc.ca
 valerie_flynn@hc-sc.gc.ca
 darlene_lickers@hc-sc.gc.ca
 kelly_stone@phac-aspc.gc.ca
 charlettec@inac-ainc.gc.ca

ITK

Brown, Tracy
 Rowan, Carol (**Facilitator**)
 Langille, Heidi
 Paniaq, Melanie
 Peffer, Susan
 Lyall, Jenny
 Epoo, Lisa
 Kilabuk, Hanna
 Cormier, Sally
 Zakal, Ina
 Baker-Anderson, Karen
 Kaiyogana, Tina

brown@itk.ca
 carolrowan@videotron.ca
 hlangille@pauktuutit.ca
 mpaniaq@pauktuutit.ca
 speffer@irc.inuvialuit.com
 jenny_lyall@nunatsiavut.com
 LEpoo@krg.ca
 hanna.kilabuk@kakivak.ca
 SCormier@gov.nu.ca

AFN

Barrieau, Melanie

McDonald, Rose-Alma (**Facilitator**)

Ravensdale, David

Lavallee, Trudy

Rousselot, Nadine

Sark, Pat

Jones, Ialeen

Louis, Eunice

Francis, Vonnie

Marshall Bowers, Valerie

Laforme, Kathryn

mbarrieau@afn.ca

rosealmamcdonald@sympatico.ca

david_ravensdale@hotmail.com

tlavallee@manitobachiefs.com

nrousselot@cssspnql.com

pat.sark@nb.aibn.com

ijones@denation.com

elouise@shawbiz.ca

vonnief.francis@fsin.com

vmarshall@kinu.ns.ca

asquire@sixnations.ca

Distance Learning on Special Needs for Early Childhood Education Workers in Aboriginal Communities

Report Synopsis

Background

In September of 2005, the Centre of Excellence for Children and Adolescents with Special Needs (CECASN) held a national policy forum *Meeting the Needs of Children and Adolescents with Special Needs in Rural and /Northern Canada*. This meeting brought together policy-makers, community leaders and researchers to review the findings of five years of research conducted by CECASN. Participants identified the long term effective education and training for community members and front-line workers as one area of need. Also, that same year, the Early Learning and Child Care Engagement sessions with First Nations and Inuit regional frontline workers showed a priority need for children with special needs in their communities, particularly in the area of culturally appropriate assessment tools and accredited training for the Early Childhood Education (ECE) worker who support them.

In 2006, the Centre of Excellence for Children and Adolescents with Special Needs, with funding from Human Resources and Social Development Canada, initiated a two phase project to first, gather information on the legislation and jurisdictional regulations, the assessment tools, and the training related to early education and special needs children with a focus on those children living in Aboriginal communities. This review will inform the second phase of the project, which will include a roundtable discussion to determine strategies to move forward with recommendations related to addressing the needs for culturally appropriate assessment tools and preparation for Early Childhood Educators.

Section I of the report, prepared by Jennifer Clinesmith, reviews the legislation, policies, and programs that guide, direct and/or deliver services and supports to children and youth with special needs in Canada. This report shows that there is a great deal of variety in the policies and programs guiding services and supports to these children and youth. The breadth programs and their eligibility requirements differ considerably amongst the jurisdictions with as many definitions surrounding special needs children and youth as there are policies and program designed to support them. Some provinces deliver programs through a ministry devoted to children, while in other provinces, it is unclear where the responsibility for children with special needs lies, or if that responsibility lies anywhere. Clinesmith concludes there is a challenge in

attempting to create a cohesive system of service for children and youth with special needs since in addition to the federal government, there are thirteen provinces and territories developing policies and programs.

Section II of the report, prepared by Kim Kienapple and Adele McSorley looks at assessment tools for children with special needs. An inventory of currently used assessment tools is presented based on literature reviews and specific information submitted by various agencies and individuals working with young children with special needs and their families. In addition to academic literature searches, professionals working with young children including early interventionists, early childhood educators, speech-language pathologists, occupational therapists, and psychologists were asked to identify the assessment tools most commonly available for use. After an initial effort to identify the most familiar tools, an additional review was undertaken to find assessments applicable to Aboriginal children's needs. No specifically culturally appropriate tools were identified by either the professionals participating or in literature and publisher reviews. Although literature exists discussing inherent difficulties in transferring assessment techniques from one culture to another for school aged children and adults, there is little information specifically about younger age groups with special needs. The current focus on the importance of early childhood education policies and programs has increased discussion on all aspects of early identification and intervention including the need for reliable assessment instruments. The development of culturally appropriate assessments and practices is viewed as one aspect of insuring accurate identification.

Section III, prepared by Leslie Malcolm, looks at training courses and programs provided by Canadian public post-secondary institutions through distance education for Early Childhood Educators, Educational Assistants, and Special Educators. This study is based on proposes that, when it is recognized that people living in rural and remote communities are entitled to high quality training and education that are funded appropriately, distance education becomes an integral component in service delivery. Delivery must begin with the premise that Aboriginal communities have the basic infrastructure (high-speed internet, videoconferencing networks, or other leading edge technologies), together with nominal computer skills among community members. Since the basic infrastructure is not established in many remote and northern communities, its provision must be given the highest priority.

There are 260 public post-secondary institutions in Canada that are fully recognized to grant degrees, diplomas, and other credentials. Fifty-three offer training courses and programs for early childhood educators, educational assistants, and special education practitioners by distance education. Many of the programs are duplicated among the 53 institutions (reference inventory of educational facilities embodied in this report). Of these, 13 offer Early Childhood Development Programs combining theory in child development with practical experience. Curricula vary amongst the providers; however, all include courses dealing with children with special needs. Seventeen offer Educational Assistant Programs specific to children and adolescents with developmental delays and learning disabilities. Program content also includes students with other exceptionalities.

Nipissing University provides a Native Special Education Assistant Diploma program and a Native Teacher Assistant Diploma Program on-campus during the summer intersession. Similarly, the University of Manitoba and the University of Winnipeg offer on-campus Aboriginal Special Education Assistant programs. The Seven Generations Institute (formerly the Rainy Lake Education Authority) in northwestern Ontario also offers a Native Teacher Assistant Program through community-based learning. Distance courses specific to the Aboriginal culture are offered only by the University College of the North and the First Nations University of Canada with its main campus in Regina.

The three sections of the report examine the current policies and programs, the current assessment tools available, and the current educational programs being offered relevant to special needs children defined by CECASN as *all children and adolescents who require additional public or private resources beyond those normally required to support healthy development.*

Contact Information

**Round Table
Early Education in Special Needs in First Nations & Inuit
Communities
February 27 & 28 2007
Ottawa**

“Assessment and Early Childhood Education Training Institutions”

For more information or copies of documents:

Dr. Kim Kienapple
Mount Saint Vincent
University
Department of Child &
Youth Study
Halifax, Nova Scotia
B3M 2J6
kim.kienapple@msvu.ca

Adele McSorley
Mount Saint Vincent
University
Department of Child &
Youth Study
Halifax, Nova Scotia B3M
2J6
adele.mcsorley@msvu.ca

Internet access:

www.coespecialneeds.ca

www.msvu.ca/child_youth/coeei/cred_main.asp



Children and Adolescents with Special Needs

Lakehead University • 955 Oliver Rd • Thunder Bay, ON • P7B 5E1 • Ph 807-343-8219

On behalf of the Centre of Excellence for Children and Adolescents with Special Needs (CECASN), I am pleased to invite you to attend a Roundtable on *Early Education and Special Needs in First Nations and Inuit Communities*. This Roundtable will be held in **Ottawa, Ontario, at the Courtyard by Marriott, on Tuesday, February 27 and Wednesday February 28, 2007 from 8:30 a.m. to 4:30 p.m.** Lunch and other refreshments will be provided on site for the day of the Roundtable. This Roundtable has been planned jointly by CECASN, Inuit Tapiriit Kanatami (ITK), the Assembly of First Nations (AFN), and Human Resources and Social Development Canada (HRSDC), and is funded by HRSDC.

The Centre of Excellence for Children and Adolescents with Special Needs was established in October 2000, by the Government of Canada, to focus on the distinct challenges faced by children and adolescents with special needs living in rural and northern Canada. It is funded by the Public Health Agency of Canada and is one of four Centres of Excellence for Children's Well-Being, a program established by Health Canada as part of the commitment to the National Children's Agenda, 1998.

The objectives of the Roundtable are:

- To discuss and arrive at an understanding of the term "special needs" as it relates to policy development relevant to First Nations and Inuit children.
- To identify gaps in existing research related to special needs children in First Nations and Inuit communities.
- To discuss future actions in the development of screening/assessment tools for First Nations and Inuit children with special needs.
- To identify training and education needs of early childhood educators working with special needs in First Nations and Inuit communities.

Confirmed participants will be sent background material, along with a detailed agenda, at least one week before the event. To express your interest in attending this Roundtable, please return the enclosed invitation form by February 9, 2007. Please note that this Roundtable is by invitation only. If you are unable to participate but would like to suggest an alternate, please forward their name for consideration to Bonnie Knott at bknott@lakeheadu.ca.

A block of hotel rooms is being held for Roundtable participants at the Courtyard by Marriott, 350 Dalhousie Street, Ottawa, until February 9, 2007. To make your hotel reservation, please call direct at 1-800-341-2210 or 613-241-1000 and refer to booking reference **#CEC. Travel and accommodation expenses for out-of-town participants will be reimbursed.**

I hope you will be able to join us for this Roundtable and look forward to exciting days of dialogue.

Yours truly,

Margaret Boone
Chief Operating Officer

First Nations Children with Special Needs

First Nations Special Needs
Working Group
February 27, 2007

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Overview

- Background
 - AFN
 - First Nations Special Needs Working Group
 - First Nations children, disabilities and special needs
- Defining Special Needs
- First Nations Special Needs Research Plan

2

About the AFN

- The Assembly of First Nations (AFN) is the national organization representing First Nation citizens in Canada regardless of age, gender or place of residence
- The Health and Social Secretariat of the AFN houses many portfolios, including:
 - Early Childhood Development;
 - Special Needs;
 - FASD; and
 - Disabilities.

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First Nations Special Needs Working Group

- Regional Representatives were chosen by the Regional Chiefs for each region
- The working group will not only be looking at special needs from an Early Childhood Development (ECD) outlook but considering other facets/issues as well, such as:
 - Health;
 - Education;
 - Housing;
 - Parental supports.

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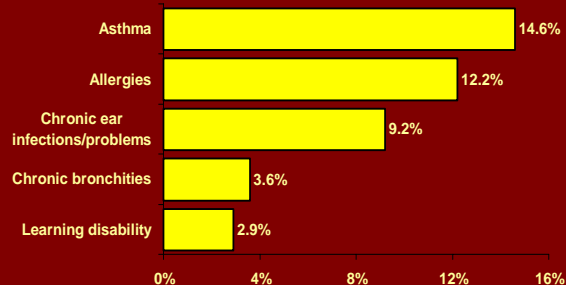
First Nations Children

- First Nation children are the fastest growing segment of the Aboriginal population in Canada
- Life expectancy at birth is seven to eight years less for registered First Nations persons than for Canadians generally.
- Death rates for First Nation infants from injuries are four times the rate of non-First Nation infants.
- Fetal Alcohol Syndrome (FAS) rates are 30 times the general population and the cost of meeting the needs of someone who is severely affected by FAS over a lifetime is \$1 to \$1.5 million.

Royal Commission on Aboriginal Peoples (RCAP), 1996

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Top 5 Medical Conditions Among FN's Children

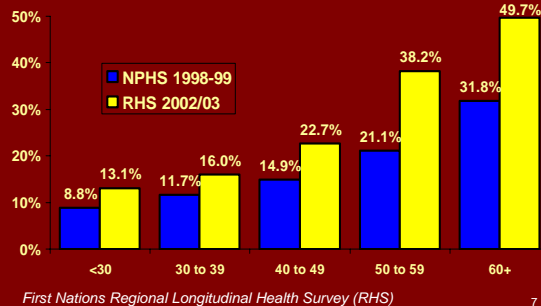


First Nations Regional Longitudinal Health Survey (RHS)

Note: Reported (usually by parent) as diagnosed by health care practitioner

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Disability Rates by Age, First Nations vs. Canada



Barriers/Difficulties Accessing Health Care, Non-Disabled vs. Those with Disability

Difficulty/Barrier	Non-disabled	With disability	Ratio
MD/Nurse not avail in area	16.7%	24.4%	1.5
Health facility not avail	9.2%	16.2%	1.5
Waiting list too long	30.8%	41.2%	1.8
Unable to arrange transport	11.9%	23.3%	1.3
Difficulty accessing trad care	11.3%	20.4%	2.0
Not covered by NIHB	16.9%	30.3%	1.8
Approval under NIHB denied	13.4%	25.6%	1.8
Couldn't afford direct cost	10.5%	22.4%	1.9
Couldn't afford transport	10.9%	23.1%	2.1
Couldn't afford childcare	6.2%	10.3%	2.1
Felt care was inadequate	14.2%	25.8%	1.7
Service culturally inapprop.	11.3%	20.7%	1.8
Service not avail in area	12.4%	22.2%	1.8

First Nations Regional Longitudinal Health Survey (RHS)

Difficulties Accessing NIHB Services, Non-disabled vs. Those with Disability

Difficulty accessing NIHB	Non-disabled	With disability	Ratio
Medications	14.1%	30.1%	2.1
Dental care	15.2%	23.6%	1.6
Vision care	15.9%	21.5%	1.4
Hearing aid	3.0%	5.1%	1.7
Other medical supplies	4.6%	12.6%	2.7
Escort travel	6.8%	11.3%	1.7
Transport services/costs	7.2%	15.3%	2.1
Any difficulty with NIHB	30.1%	47.5%	1.6

First Nations Regional Longitudinal Health Survey (RHS)

First Nations Children

- About one in eight children (12%) had one or more of the disabilities.
- The rate of disabilities among First Nations children is almost double that for Canadian children in general (7.8% vs. 4.4%), considering only those disabilities asked about in both the RHS and the Canadian National Population Health Survey.

First Nations Regional Longitudinal Health Survey (RHS)

First Nations Children

- Overall, 15.4% of children reported an emotional or behavioural problem.
- The rate was higher for boys than girls (18.4% vs. 12.2%).

First Nations Regional Longitudinal Health Survey (RHS)

Defining Special Needs...

- A special need is a need an individual has over and above the basic needs of humans to grow, learn, function, interact with others and lead a healthy life. Some special needs stem from disabilities while others do not. Complex medical needs are a subset of special needs but do not include all special needs.

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Defining Special Needs...

- Children with special needs in most cases require additional public or private resources beyond those usually required to support healthy development because of:
 - Exceptional gifts and talents;
 - Physical, sensory, cognitive and learning challenges;
 - Mental health issues, and
 - Problems related to social, linguistic or family factors. (Lakehead University 2006)

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Supports for Special Needs

- Children with special needs often require a wide range of services and supports in order to participate with their peers. These services may include (but not be limited to) :
 - screening and assessment;
 - behavioral interventions;
 - remedial speech;
 - occupational therapy;
 - nursing or psychological counseling;
 - educational intervention and teachers' assistants;
 - transportation,
 - medical supplies and equipment or pharmaceuticals.

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First Nations Special Needs Research Plan

- **Linkages with ECD:** Key issue during the ELCC engagement strategies with First Nations communities both at regional & national levels, including screening & assessment tools, and training for child care and (ECD) workers.
- **Funding from HRSDC:** February 2006 - funding for the development of a research plan focussed upon First Nations children and special needs, programs, assessment tools and early childhood education training requirements.
- **Partnerships:** The implementation of the resulting research plan is accompanied by discussions with HRSDC, the COECASN and ITK.
- **Increased Cooperation:** Hoping to increase cooperative work with other federal departments as special needs go beyond HRSDC's mandate.

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First Nations Special Needs Research Plan

- The objectives of this research plan, therefore, are to:
 - Gather information surrounding children's programs at the community level within the context of children with *special needs*;
 - Gather information about the gaps between the needs of these children and the programs being offered; and
 - Identify/analyze gaps, needs and recommended next steps to address the needs of First Nation children with special needs.
- Currently received partial funding for the First Nations Special Needs Working Group as well as designing the data collection tools for community-based data.
- Hoping to visit 20 communities in FY 2007-08.

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Special Needs Literature Review

- The findings of the literature review were as follows:
 - In the area of *special needs* there are **very few programs** nationally that meet the requirements of First Nation *children* with special needs.
 - There is an absence of clear guidelines and policies which results in limited programming to meet the requirements of First Nation children with *special needs*, and there are significant inconsistencies in **funding**.

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Special Needs Literature Review

- **Jurisdictional issues** are not clear, nor are the responsibilities of the various levels of government. This results in a disparity in the levels of service provided nationally, provincially and territorially, limiting the ability of First Nations to meet the requirements of children with special needs. Research is required to support this need.
- There is also **limited awareness of services** available, and of the services and programs generally. They do not appear to be culturally appropriate for children in a First Nations context.
- There is limited research to indicate that **effective assessment and screening techniques** have been developed to adequately determine the true extent of special needs in a First Nations context.

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Special Needs Literature Review

- There is limited evidence of a research paradigm that is consistent with First Nation worldviews in an assessment context. Culturally relevant assessments are required to address this need.
- Training and capacity development: few ECE programs nationally and of the few that exist there are only a handful who offer some courses in special needs; with less than five of those estimated to have an Aboriginal focus.

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From our research...

- At the Federal/Provincial/Territorial Levels the literature indicates that:
 - Requirement for adequate funding for special needs: programming and training
 - Inconsistencies and unclear guidelines and policies: ensuring consistency at the national and provincial levels. Services provided on-reserve must be comparable to those provided off-reserve.

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From our research... (cnt'd)

- At the Federal/Provincial/Territorial Levels the literature indicates that:
 - Jurisdictional issues: responsibilities of various levels of government clarified and jurisdictional issues resolved.
 - Prevention and training: Funding for adequate and flexible prevention programs and training for First Nations communities.
 - International lessons learned: Research to draw on the expertise and experience of other countries with large Indigenous populations.

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From our research... (cnt'd)

- At the First Nations National Level the research indicates that there is a need to:
 - Develop a services resource manual for families
 - Design services and programs that are accessible to all that are culturally sensitive.
 - Create policies and programs designed *by and for* First Nations.

22

From our research... (cnt'd)

- At the First Nations National Level the research indicates that there is a need to:
 - Formally evaluate existing policies, programs and services to ensure that current funds are indeed reaching children with special needs and their families in the most effective way.
 - Create a quality control mechanism.

23

From our research... (cnt'd)

- In terms of Partnerships between First Nation and Federal/Provincial/Territorial Counterparts the literature indicated that there is a need to:
 - Create more training and employment opportunities for First Nations professionals in the area of special needs.
 - Increase the awareness of services available through clear, plain language documents and culturally sensitive programming/information.
 - Increase communication between policy makers and First Nations people.

24

From our research... (cnt'd)

- **In terms of Partnerships between First Nation and Federal/Provincial/Territorial Counterparts the literature indicated that there is a need to:**
 - On-reserve: ensure that appropriate provincial/territorial services are offered.
 - Design a framework to address the following issues: early identification of special needs, formal case management/continuum of services, silos and transportation.
 - Address policy gaps such as: disparity in funding formulas, growth/ indexing factors, and cultural context in policy, guardianship and other legal issues.

25

From our research... (cnt'd)

- **In terms of Partnerships between First Nation and Federal/Provincial/Territorial Counterparts the literature indicated that there is a need to:**
 - An accountability mechanism between service providers and First Nation communities.
 - Service gaps must be addressed such as prevention and injury prevention programs as well as equipment and medical supply needs.
 - More services on-reserve.
 - Promote networking between agencies to maximize the effectiveness of First Nations special needs care.

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From our research... (cnt'd)

- **In terms of First Nation (national, regional and community levels), Federal, Provincial, Territorial levels and Volunteer collaborations, the literature indicated that there is a need to:**
 - Create a National Clearinghouse for First Nations special needs.
 - Create multi-sectoral working groups across Canada.
 - Create service centers specifically for those First Nations children with special needs.
 - Capacity, community-based infrastructure must be put in place to make sure that services are provided for on-reserve special needs children and their families.

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Next steps...

- The AFN and the First Nations Working Group on Special Needs are very eager to move ahead on special needs issues.
- Where we go from here is hopefully part of what will come out of these meetings.
- You can contact me, Melanie Barrieau, at mbarrieau@afn.ca or call me at 613-241-6789, ext. 212.


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Inuit Children with Special Needs



Overview of Presentation




- What is ITK?
- Inuit: a distinctive group
- Inuit ECD
- Special Needs Children in Inuit communities


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INUIT TAPIIRIT KANATAM

What is Inuit Tapiriit Kanatami?

- National Inuit organization
- Advocates on behalf of Inuit of Canada
- Develops national Inuit priorities
- Works with federal government on programs, initiatives and suggests policy
- Educates Canadian public about Inuit
- Main focuses are: Health, Socio-Economic Development and the Environment

The logo for Inuit Tapiriit Kanatami is located in the bottom right corner. It features a stylized Inuit symbol (a triangle with a circle inside) to the left of the text "CAIiS baCf" in a bold, sans-serif font. Below this, the words "INUIT TAPIRIIT KANATAMI" are written in a smaller, all-caps, sans-serif font. The entire logo is set against a white background with a thin black border.

About Inuit





- Inuit are a distinct group of Indigenous people
- International population= 155,000
- Canadian=53,400
- In Canada there are 4 main Inuit regions:
 - Nunakput (Inuvialuit Settlement Region in the Northwest Territories)
 - Nunavut (3 regions within Nunavut)
 - Nunavik (Northern Quebec) and
 - Nunatsiavut (Labrador)

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INUIT TAPIRIT KANATAK

Inuit Early Childhood Development (ECD)

- ITK has been actively involved in ECD
- ITK receives direction on ECD through the Inuit ECD Working Group
- ITK's main ECD document is the Inuit ECD Strategy
- ITK works with federal partners and gives policy advice



Special Needs Children in Inuit Communities



- Limited support and research concerning Inuit children with Special Needs
- Lack of training available to Inuit ECD workers to meet the needs of special needs children

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INUIT TAPIRIST KANATAM

Special Needs Children in Inuit Communities

- It is believed that there is a high number of Inuit children with FASD in Inuit communities
- Inadequate funding to provide the necessary services, programs and equipment for special needs children
- Parents need more support and education regarding their special needs child



Special Needs Children in Inuit Communities

- There is a lack of appropriate screening and assessment tools and a need for Inuit-specific tools
- The geographic reality for where Inuit lives causes difficulties related to availability of professionals to provide assessment, treatment and follow-up



Special Needs Children in Inuit Communities

- No Inuktitut resources for Special Needs
- In most Inuit regions, there are no child care spaces designated for special needs children
- Inuit do not have adequate access to funding to support special needs



"I truly hope your proposal will lead to a comprehensive evaluation of the situation of Inuit children including social-economic factors (hunger, over crowded housing, violence etc) and not only focus on children with readily identifiable handicaps or challenges."—Margaret Gauvin, Regional Child Care Coordinator, Kativik Regional Government



Special Needs Research for Inuit Children in ECD Programs

- Our plan is to research, analyze and develop a strategy to improve the gaps and needs of services for Inuit children with Special Needs
- The focus will be on training and to collect information that will assist in developing assessment/screening tools for Inuit children with special needs.



Research Activities: Phase 1

- Define a draft definition of what special needs means to Inuit
- Validate Consilium's literature review
- Provide guidance on survey questions and distribution/collection methods
- Determine if a Special Needs Steering Committee should be formed and, if so, to identify members

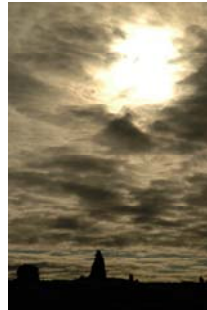


Development of the research survey

- Teleconferences with ITK, ECD specialist, & the Inuit ECD Working Group to develop research survey
- ITK will hire an ECD specialist with focus on special needs to draft the survey content & will hire Inuktitut speaker(s) to carry out the telephone survey.

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Research Topics



- Demographics information: Prevalence of Special Needs Children in Inuit communities & services available to them
- Training for ECD workers
- Screening/Assessment tools

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Research Findings

- Analyze findings
- Write report on research findings
- Share report with the Inuit ECD Working Group, *via email*



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Screening/Assessment Tool




- Search for an appropriate specialist to use research findings to develop a screening/assessment tool appropriate to Inuit

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Next Steps (Phase II and III)

- Inuit Screening or Assessment Tool
- Pilot test tool and make necessary adaptations
- Distribute tool to Inuit communities
- Evaluate tool
- Report on Training Needs

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INUIT TAPIRIT KANATAMI




Children and Youth with Special Needs:
A Review of Federal, Provincial and Territorial Legislation, Policy and Programs

Prepared by Jennifer Clinesmith

Prepared for the
 Centre of Excellence for Children & Adolescents with Special Needs

Presented by Sandra Griffin




Children and Youth with Special Needs:
A Review of Federal, Provincial and Territorial Legislation, Policy and Programs

Purpose - review the legislation, policies and programs that direct, guide and/or deliver services and supports to children and youth with special needs in Canada

Method - review based on legislation, public policy documents and program manuals, etc., that are publicly available on federal, provincial and territorial websites


Time Frame - information gathered in February & March 2006



Children and Youth with Special Needs:
A Review of Federal, Provincial and Territorial Legislation, Policy and Programs

Federal Level Social Policies and Programs


- Social Union Initiative & Framework (1996 & 1999)
- Has generated the following policies and programs: National Children's Agenda (1997), National Child Benefit (1998), Benefits and Services to Persons with Disabilities (1998), Early Childhood Development Agreement (2000) and Early Learning and Child Care Initiative (2003)
- Emerging interest in caregiving



Children and Youth with Special Needs:
A Review of Federal, Provincial and Territorial Legislation, Policy and Programs

Federal Level Health and Public Health Policies and Programs


- Programs directed towards health pregnancy and early childhood development provided by Public Health Agency of Canada - Aboriginal-specific program delivery done by First Nations and Inuit Health Branch of Health Canada
- Programs include: Community Action Program for Children (CAPC), Canadian Prenatal Nutrition Program (CPNP), Fetal Alcohol Spectrum Disorder (FASD) Initiative, and Aboriginal Head Start



Children and Youth with Special Needs:
A Review of Federal, Provincial and Territorial Legislation, Policy and Programs

Federal Level First Nations, Inuit and Métis Policies and Programs


- Indian and Northern Affairs Canada has responsibility for providing services typically provided by provinces to Status On-Reserve Indians
- Blueprint for Aboriginal Health (2004) – "making significant progress in closing the gap in Health outcomes between the general Canadian population and Aboriginal peoples"



Children and Youth with Special Needs:
A Review of Federal, Provincial and Territorial Legislation, Policy and Programs

Provincial and Territorial Governments


- Examined programs and services in the areas of child and family supports, education and disability issues
- Wide variation in programs and services available particularly in areas of child and family support and disability issues



Children and Youth with Special Needs:
A Review of Federal, Provincial and Territorial Legislation, Policy and Programs

Provincial and Territorial Governments


- Three provinces with Ministries specific to children: British Columbia, Alberta and Ontario
- One province with legislation specific to children with special needs: Alberta – *Family Support for Children with Disabilities Act and Regulation*



Children and Youth with Special Needs:
A Review of Federal, Provincial and Territorial Legislation, Policy and Programs

High-Profile Disorder: Fetal Alcohol Spectrum Disorder (FASD)


- Life-long disability caused by the effects of alcohol during pregnancy
- Federal strategies: 1) Pan-Canadian Initiative, 2) First Nations and Inuit FASD program
- British Columbia only province with FASD strategic plan – some form of strategy in Alberta, Saskatchewan, Manitoba, and Ontario (Aboriginal-specific)
- Regional efforts – Canada Northwest FASD Partnership, Canada Northwest FASD Research Network



Children and Youth with Special Needs:
A Review of Federal, Provincial and Territorial Legislation, Policy and Programs

High-Profile Disorder: Autism Spectrum Disorder (ASD)


- A pervasive development disorder (PDD) affecting the way the brain functions
- Current treatment practices tend to focus on early and intensive therapy
- No national-level strategy
- Source of legal action, e.g. *Auton v. British Columbia and Wynberg v. Ontario*
- Provinces with ASD-specific programs: BC, Alberta, Ontario, New Brunswick, Nova Scotia, PEI & Newfoundland and Labrador




Children and Youth with Special Needs:
A Review of Federal, Provincial and Territorial Legislation, Policy and Programs

Conclusion

- Study reflects programs on paper – does not reflect regional or local availability
- Variation - What is considered important
 - Definition of "special needs"
 - Functional organization
- Connectivity through national-level strategy


 CENTRES D'EXCELLENCE POUR LE BIEN-ÊTRE DES ENFANTS
CENTRES OF EXCELLENCE FOR CHILDREN'S WELL-BEING
Les enfants et les adolescents ayant des besoins spéciaux
Children and Adolescents with Special Needs

Assessment in Aboriginal Communities

 CENTRES D'EXCELLENCE POUR LE BIEN-ÊTRE DES ENFANTS
CENTRES OF EXCELLENCE FOR CHILDREN'S WELL-BEING
Les enfants et les adolescents ayant des besoins spéciaux
Children and Adolescents with Special Needs


Cultural Orientation

- Understand and appreciate diversity among and within Aboriginal populations
- Cultural experiences do have an effect on a child's learning style, but do not stereotype all children within a culture
- Examine individual value systems (including your own) as a prerequisite for cultural awareness

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Cultural Orientation

- We cannot conclude on this basis of test results that any racial, cultural or socioeconomic group superior or inferior – all we can estimate is how well an individual will function in the culture for which the test is appropriate
- Assessment requires an understanding of an individual as a 'cultural being' (e.g., cultural adaptations of the MMPI for Hispanic populations).
- Assessments do not measure strength and persistence of motivation

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Assessment Methodology

- Does the assessor use a technique that is uncomfortable, intrusive, frustrating or alienating?
- Differential reaction to the assessment technique
- Assessment is, typically, an Eurocentric or Anglo American phenomenon
 - Translation equivalence
 - Metric equivalence
 - Construct equivalence

 CENTRES D'EXCELLENCE POUR LE BIEN-ÊTRE DES ENFANTS
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Assessment Measures

- Only traits possessed by many or all people, not unique and often very valuable characteristics
- Standardized testing shows how a child stands in relation to others, not how a child thinks and feels
- Dynamic assessment

 CENTRES D'EXCELLENCE POUR LE BIEN-ÊTRE DES ENFANTS
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Feedback of Assessment Findings

- Processed meaningful by the client and significant others in an interpersonal context developed through a culturally appropriate style of service delivery
- A person's score does not measure the value of that person to family, friends or community

Assessment Tools Web Site:

http://www.msvu.ca/child_youth/coeei/Assessments/asses_main.asp

EARLY CHILDHOOD TRAINING INSTITUTIONS

What-Definition: Listing of Post Secondary Accredited Institutions offering Early Childhood Education Training meant to provide a snapshot of available courses and programs.

Why-History: Early Intervention Services

- Symposium 2002
- Personnel Preparation 2005
- HRSDC Aboriginal 2006

Criteria for Early Education in Special Needs in First

Nations & Inuit Communities :

1. Accredited Post Secondary Institution
2. ECE Training -preschool
 - Course Work
 - Specializations
 - Certificates, Diplomas, Degrees
3. Special Needs &/or Aboriginal Focus

Method:

Identified appropriate institutions from:

1. Former work
2. Internet
3. University Calendars/Catalogues

Contact through:

1. Phone
2. Email
3. Websites
4. Calendars

Notes:

1. Phone – least reliable referred to website
2. Email – poor response to specific questions
3. Websites – difficulties finding information; purpose of sites – to advertise or convey specific info?
4. Calendars – but not all available

Search Terms

- Atypical
- Disabilities
- Exceptionalities
- Inclusion/Integration
- Special Needs

Course Titles

- Diversity in Children
- Inclusion of Exceptional Children
- Child Abuse & Neglect
- Supported Child Care
- Assessment of Children
- Children with Special Needs

Search Terms


- Aboriginal
- First Nations
- Specific Nations
- Multicultural/cultural Sensitivity

Course Titles

- Aboriginal Children & Families
- Aboriginal People & the Law
- Contemporary Communities & Culture: Aboriginal Context
- Concept of Wellness in First Nations
- Diverse Cultures

Information

- Name & Location
- Degree/Diploma/Certificate
- Program Description
- Curriculum
- Method of Delivery
- Tuition

Information	Program/Service	Program Description	Contacts	Website and Other Info
Early Childhood Education Programs	LEARNER  Special needs programs in residence			
LEARNER	Early Childhood Education Certificate	Program description: This program is designed for students who are interested in working with children and youth. It provides a foundation in early childhood education and includes a practicum experience.	Program Manager: [Name] Phone: [Number] Email: [Address]	Website: [Link] Other Info: [Text]
LEARNER	Early Childhood Education Diploma	Program description: This program is designed for students who are interested in working with children and youth. It provides a foundation in early childhood education and includes a practicum experience.	Program Manager: [Name] Phone: [Number] Email: [Address]	Website: [Link] Other Info: [Text]
LEARNER	Early Childhood Education Degree	Program description: This program is designed for students who are interested in working with children and youth. It provides a foundation in early childhood education and includes a practicum experience.	Program Manager: [Name] Phone: [Number] Email: [Address]	Website: [Link] Other Info: [Text]
LEARNER	Early Childhood Education Bachelor's Degree	Program description: This program is designed for students who are interested in working with children and youth. It provides a foundation in early childhood education and includes a practicum experience.	Program Manager: [Name] Phone: [Number] Email: [Address]	Website: [Link] Other Info: [Text]
LEARNER	Early Childhood Education Master's Degree	Program description: This program is designed for students who are interested in working with children and youth. It provides a foundation in early childhood education and includes a practicum experience.	Program Manager: [Name] Phone: [Number] Email: [Address]	Website: [Link] Other Info: [Text]
LEARNER	Early Childhood Education PhD	Program description: This program is designed for students who are interested in working with children and youth. It provides a foundation in early childhood education and includes a practicum experience.	Program Manager: [Name] Phone: [Number] Email: [Address]	Website: [Link] Other Info: [Text]



Websites

www.coespecialneeds.ca

www.msvu.ca/child_youth/coeei/cred_main.asp

Models of Best Practice for Distance Education of Aboriginal Adult Learners



Best Practice for Distance Education of Aboriginal Adult Learners

- Lifestyle, Cultural and Experiences for Aboriginal Adult Learners is unique
- Distance Education programmes designed for Adult Learners in the urban south do not reflect the needs of First Nation, Metis and Inuit communities



Best Practice for Distance Education of Aboriginal Adult Learners

- Traditionally, distance education has not re-developed post secondary courses in light of opportunities created by broadband and application
- Courses repackaged conventional courses designed for face-to-face encounters in the classroom



You don't teach distance education the way you teach face to face... and you have to take a look at the learners and what their needs are.

Margaret Fiddler
Founding Principle
Keewatinook Internet High School

Case Studies

- Atlantic First Nations Help Desk
- Keewatinook Okimakanak Telehealth (KOTH)
- Knowledge and Career Development Network (KCDC)
- Akitsiraq Law School (Iqaluit, Nunavut)

Best Practice for Distance Education of Aboriginal Adult Learners

- Reflects community priorities
- Addresses local needs
- High rates of successful completion
- Transferable and accredited



Best Practice for of Aboriginal Adult Learners
Atlantic Canada First Nations Helpdesk
Cisco ITE1 course (non-IP)

- 14 First Nations students
- 12 graduates / certified
- Six First Nations participated on-line
- First Nations need trained network and computer technicians to support local, regional and national networks
- Graduates have employable skills

Best Practice for of Aboriginal Adult Learners
KO Telehealth
Community Telehealth Coordinators



- CTCs are Telehealth Site Facilitators
- Training On-Line
- KO Telehealth and Ontario Telehealth Network (OTN) link Physicians with Patients in 25 FN in Ontario's far north

Best Practice for of Aboriginal Adult Learners
Knowledge and Career Development
Network (KCDC)

- Pilot Project: Computer and Network Training
- IP Video-Based
- Expansion into vocational and professional development training via IP video and other tools



Best Practice for of Aboriginal Adult Learners
Akitsiraq Law School
(Iqaluit, Nunavut)

- 11 graduates
- University of Victoria Law curriculum
- Additional classes in Inuktitut language, history, culture and legal structure
- Traditional approaches to law



Best Practice for of Aboriginal Adult Learners
Akitsiraq Law School
(Iqaluit, Nunavut)



Instructors flown in from Victoria
Expensive programme
Resourced heavily with additional counseling and mentoring
Not enough emphasis on traditional Aboriginal customary law
Too expensive to be sustainable

Special Training Needs of Community
Telehealth Coordinators (CTCs)

- Must operate I docs
- Equipment and Network Troubleshooting
- Understand basic anatomy and basic medical terms
- Scheduling appointments
- Soft skills (working with physicians, local champions of telehealth)



Special Challenges faced in Training Community Telehealth Coordinators (CTCs)

- Attempts to find partners at Ontario Colleges and Universities to create a training programme for CTCs were unsuccessful
- Post Secondary Institutions wanted to pigeon-hole CTC training into existing programming
- Wanted to charge outrageous amounts to design curriculum and provide such a programme
- Many CTC's lack a Grade 12 diploma

Training via IP Video Conferencing



Training with Streaming Video



Training with E-Learning Platform



Best Practice for Distance Education of Aboriginal Adult Learners

- Technical Aspects / Community Champions
- High Rate of Turnover
- On-going training necessary
- Face-to-Face expensive
- Training is going on-line
- Professional development training on e-learning platform / website

Lessons Learned for Distance Education of Aboriginal Adult Learners

- Face-to-Face training is still required for team building
- Such gatherings are held annually
- The rest of the training is conducting IP Video conferencing and On-line Education Platform
- Metis Nation of Ontario has adopted the KOTH CTC training strategy

Best Practice for Distance Education of Aboriginal Adult Learners

- Public Sector highest employer
 - Band office, e-centre / cable company, KiHS teaching assistants, KO Telehealth Community Telehealth Coordinators (CTCs)
- Few year round wage opportunities in the Private Sector (Bell Canada)
- Seasonal Employment: hunting, fishing, gathering and construction (winter roads)

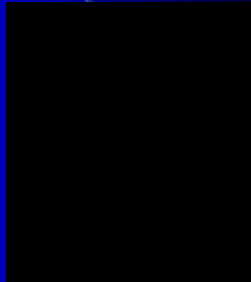
Best Practice for Distance Education of Aboriginal Adult Learners



- Community priorities for education and training do not always mesh with those of government or academic institutions

Best Practice for Distance Education of Aboriginal Adult Learners Fort Severn First Nation

- Traditional skills such as hunting, fishing and gathering have a high priority in Fort Severn
- Youth are taken back to the land to learn traditional skills
- These activities are documented at: www.fortsevernfirstnation.com/



Best Practice for Distance Education of Aboriginal Adult Learners Fort Severn First Nation

- Community Leadership wanted to use their broadband allocation to create a "paperless band office" in Fort Severn
- All forms and reports are created online
- Band council meetings can be held online using community cable tv, and IP phones
- Much of the IT training done on-line using instructors from other FN communities and band members

Lessons Learned

- Community Leadership is critical for success
- Courses must meet community needs that are identified as priorities by community members themselves
- Communities must have the opportunity to shape courses

Best Practice for Distance Education of Aboriginal Adult Learners



Best Practice for Distance Education of Aboriginal Adult Learners



Best Practice for Distance Education of Aboriginal Adult Learners

- Building bridges between First Nations and the Academic communities
- Increase research capacity at the First Nations community level
- Conduct participatory action research appropriate to community needs



Best Practice for Distance Education of Aboriginal Adult Learners



- Seeking out "Like-Minded" Academics to work with First Nations communities on projects identified at the local level
- Research Projects completed on the C-Band Public Benefit, Prescription Narcotic Abuse
- KORI gave presentations in Rome, Washington, DC and across Canada

Best Practice for Distance Education of Aboriginal Adult Learners



- Traditional Knowledge of the Land (Elders and Hunters)
- Broadband Connections and Expertise (Youth, CTCs, E-Centre staff)
- KO Telehealth
- KO Research Institute (KORI)

Best Practice for Distance Education of Aboriginal Adult Learners

- Respect First Nations as equal research partners
- Visit the Communities
- Community involvement in all aspects of the research project
- Support the use of the Keweenaw Broadband Network
- Share research resources fairly



Best Practice for Distance Education of Aboriginal Adult Learners



Contact Information



- Brian Walmark
- Director of Research
KORI
216 s. Algoma St
Thunder Bay
- Keewaytinook
Okimakanak
- www.knet.ca
- brianwalmark@knet.ca

AFN Flip Chart Notes

Day 1

AFN GROUP

GROUP 1A

Question #1 - Working Definition

- Depends on the community, content and program/service
- Latter part of COE definition puts a deficit slant on the definition
- Maybe the use of an asset definition would be more appropriate
- The term special needs can be reviewed as a loaded word with negative connotations
- The scope of the definition is narrow VC:K-12
- * **step back and identify organization and agencies working definition**
- labels are not always the best policy but often necessary in order to receive accommodation/support
- a workable definition will enable us to develop and support a business case
- draft working definition but there needs to be more time to come to an acceptable definition for all
- “normally” vs “typically” issue – relative terms therefore the AFN working group can focus on the scope of the definition in more detail
- balance b/w broad scope but able to identify specific special needs within this broad definition
- maybe each community/organization will have their own definition that reflects their reality/situation etc.
- ** **language plays a huge role**
- a dynamic definition/assessment model
- must take into account the child's learning style that is culturally appropriate incorporating the 4 quadrants (visual)
- struggle with using terminology that has negative connotations but are commonly used because they are often linked to policy/funding/support
- there needs to be a holistic approach: correlation b/w behavioural issues and community (systemic0 problems – IRS
- is a national definition necessary? (ed/med)
- therefore we need more time
- Who is the definition for ? Government, NGO's, communities?
- Where are the gaps?
- Depends on whose that the special needs falls under
- every child has special needs/ a more to a rights approach
- every child has rights
- there needs to be agreement by parties on what special means needs eg. FNIHB, INAC, HRSDC, HC
- need working definition
- wider discussion needs to be going on
- need to work at a process ? mutually
- agree upon understanding definition of special needs exceptionalities
- mandates are still a big problem

Diagram: circle: need to focus around the child

- funds, provider, fed, prov/terr, INAC, HRSDC,H/C (outside circle)
- service provider, teachers, Elders, social workers, psychologist (next circle)
- family, food, play, shelter, clothes, grand parents, education, learning, play, strength based play, cultural identity, traditions, values, religion, spiritual, love, respect, self esteem, physical (next inner circle)
- parents, Grandparents (next inner circle)
- CHILD in the centre

- Who is the target for the definition: gov't, FN's, AFN, ITK
- The spectrum is huge eg. Cognitive, physical, emotional
- There will be multiple definitions
- Child centered approach
- What is it we are preparing the child for? More visual learners, hands on
- The definition could have a context eg. Determinants of health, UN Convention on the Rights of the Child
- What is the context in terms of this session?
- An opportunity to reflect on the issue of special needs
- Identify what the needs are
- What are the issues facing communities and families
- Process and principles are the key eg. Community driven, culturally appropriate
- Framework/plan for special needs is key to advocate for money, programs and resources
- A business case is also the key
- Needs to be grounded in indigenous ways of thinking, knowing, being

Question 2

- the way funding flows needs to change to be more strength based
- the diagram highlights the strengths
- what is lacking are the gaps
- assessment tools – can be family focused like a background history eg. Residential school impacts
- good rapport is needed with the family
- there needs to be trust for the family to open up in terms of communicating with another agency
- there needs to be better integration of resources from various departments
- silos and single window
- hub model of service
- based on a cluster of services
- asset mapping, case management
- challenge to make service requirements fit within current mandates and government structures eg. Jordan's principle
- to make government understand our needs there needs to be a STORY, to make the need real to policy makers
- need to move from knowledge to understanding
- transition to school
- more INAC focused
- the circle of needs and asset mapping are the principles
- services need to be holistic
- policy needs to change to reflect a more holistic approach to single window program delivery model

AFN

GROUP 1B

Question # 1 - Working Definition

Centre of Excellence Definition

The term special needs is used to encompass all children and adolescents who require additional public or private resources **(AND SUPPORT)** beyond those normally **(TYPICALLY)** required to support healthy development. This definition includes children and adolescents who require additional resources because of exceptional gifts and talents, physical, sensory, cognitive, and learning challenges, mental health issues as well as problems due to social, cultural, linguistic, **(ENVIRONMENTAL)** or family factors.

- a) Within the scope of your work would this definition be acceptable as a working definition
- b) Would it be adaptable to policy development
- c) What else should be considered in the working definition

QUESTION AROSE FROM CONCERN RE FUNDING AIMED AT DEFICIT – MOST FUNDING GEARED TO ASSESSMENT OF DEFICITS - HOW TO GET TO STRENGTHS MODEL - PARADIGM SHIFT

RESPONSES

- Definition **of inclusion** is needed
- Need definition of **Rights**
- Who would use the definition - AFN, Govt, INAC, ? this can be limiting
- Needs to be based on strengths not deficits
- **Language “enhance development to be best possible self”**
- Needs to **emphasize family and community as a whole as special needs** not just the child
- Definition is a labelling can be good and bad
- Changing **how we communicate** based on Assessment findings
- Emphasize **assessment based on need not deficit** - lean on positives
- Definition would fit in local scope of work
- Inclusion and Rights need to be key in the definition
- What does exceptional and gifted mean and where does it fit in
- INAC funding ???
- Want **more intervention** rather than assessment based
- Govt INAC funding of special needs tends to drive the HRDSC definition because of jurisdiction
- Need **uniform implementation of funding** so kids don't fall through cracks - dying – AFN lawsuit
- **Jordan's principle** needs to be vision for a definition
- Need to develop an national definition for AFN and Inuit
- Need to **add community to definition** – Residential Schools resulted in fractured dysfunctional communities
- Needs assessment needs to be done with **community education** – dialogue so people in community has level of understanding and comfort necessary to address the issues - normalize it
- Demographics diversity impact definition of special needs
- What is special need – clean water? Special needs include
 - o Environmental
 - o Poverty
- What is context in terms of Policy
- Needs to be a policy for early childhood
- Are trying to create a subset of policy where there doesn't exist a policy for the larger group
- No anchor for a framework – human rights gives an anchor but we aren't there
- No National Disability Act so no teeth to go to court
- Start at human rights and national policy to get to building policy for smaller group
- Needs to include Context of Aboriginal Situation - **Enabling Conditions** have to be in place
- i.e. **Social determinants of health**
 - o Good community driven public policy
 - o Economy – (Poverty - Housing, Substance abuse, Nutrition)
 - o Access to networks of social supports & resources (Isolation)
 - o Healthy environment (clean water, no mould)

Frame it from strength based approach - “all children need social and environmental determinants of health AND some children have extra needs”

Summary

- Aboriginal Context
- Principles
 - o Emphasize healthy family and community development
 - o Environment
 - o Determinants of health
 - o Early, timely intervention – need Definition of early intervention - Pre conception?
 - o Jordan Principle
 - o UN Convention on Rights of the Child
 - o World Fit for Children
 - o Canada Fit for Children
 - o Convention on the Rights of Persons with Disabilities
 - o Children with Special Rights versus Special Needs

AFN

GROUP 1B

Question # 2 - How to shift the paradigm from one of deficit to one of strength

RESPONSES

- Change culture – i.e. language, assessment tools - focus on strength ability development
- Do Assets Portfolio with families – gives comfort zone to families, compels teachers to talk of strengths (only do assessment for funds)
- Use different language at family & practitioner level - educate policy people re language
- Child advocates, coalitions need to emphasize strengths
- Use existing research to validate needs
- Evidence re early intervention is strong but NEED to get it across to policy people – hasn't yet happened
- Need broad national movement and united national strategy for paradigm shift of funding for strength rather than deficit
- Tipping Point - Study other areas where had paradigm shift
- Ken Dryden – national daycare –
- Build on incremental successes and reframe things in way that doesn't diminish or sacrifice those successes
- AFN chief profiles children's issues
- AFN MNC & ITK leaders go public with campaign with specific message – keep it simple - 3 targetted issues – impt to policy people that it be simple
- 2 way accountability - transparency - leaders need to challenge govt to be accountable to these children
- Push for Tri-partite working group with agreement on principles
- Need to keep it Simple
 - o Targets - Goals - Benchmarks
- Millennium Development Goals (MDGs)
 - o Disaggregated results - how are aboriginal children faring vs children overall
- Language of contribution versus deficit (what do we mean by contribution – quality of life for families and communities versus economic)
- Need to balance approach – Best Policy Mix
- Reframe as Higher needs children drive economy i.e. job creation, training
- Abilities Campaign
 - o Target leaders with data
 - o Do easy interventions that have large outcome – Children with special needs bear burden of demonstrating outcome – Need to apply the assumption that all

intervention is worth it terms of increase of quality of life of child, family, community over a lifetime

- **Change way of thinking - VALUES**
 - Priorities
 - How to change resources to fit values
 - How to bring First Nations into discussion to ensure values respected
- **Need Coherent Campaign**
 - Engage media
 - Partner with volunteer sector
 - Seek NGO services on Reserves

DAY 2

AFN GROUP

GROUP 1B

Question #3 - TRAINING - RECOGNITION

What do we need to have training on Special Needs recognized? What steps do we need to take to accomplish that?

Responses

- AFN Report – there are ECE's who lack training - what is the context - for aboriginal communities?
- Need to make sure they (AFN, HRSDC, Centre of Excellence) are considering – multi cultural context – who is taking the lead
- Groups have their own criteria rather than there being a broad all encompassing set of criteria
- This conference is funded by HRSDC coordinated with/through AFN
- To collaborate with CECSN to validate the work
- Preliminary Research done
 - Jurisdiction
 - Context of service being given
- AFN Report
 - Not a lot of programs that are ECD specific
 - Need more courses
 - Need More FN specific programs
 - Need More certificate/diploma programs (not just courses)
 - Need ECD programs (as grounding)
 - Need Special Needs programs
- Northern Remote communities, small communities are not covered in courses - need a focus, & more community based research and course development in this area
- Differences in agreements/relationships mainly between on reserve & provinces
- Standards are by Centre – not individual
 - Certification (course work credentials are for individuals)
- On reserve – Off reserve qualifications and requirements further complicate the issue
- **Need across the board FN standards and regulations in order to enhance certification credentialing issues which would ease access to funding issues e.g. for children with special needs**
 - Would ease/enhance access to funding issues (i.e. for children with special needs)
 - Would make the requirements clear to all i.e. Centres, Administrators, Regulators, Program Developers (at colleges)
 - Would ensure reciprocity/acknowledgement of credentials - leads to mobility for those who are trained

- **EXAMPLE** - There is an FN Accreditation Board in Alberta
 - **Need to investigate this work**
- **Need to maintain the importance of community based processes while moving towards national accrediting standards** i.e. need to acknowledge community needs and reciprocities while meeting academic rigor
- There are qualified ECEs working on reserve but **need** to address discrepancy between how Aboriginal Headstart is funded on reserve versus off reserve
- **Retention is an issue**
 - **Need research on this issue specific to FN communities**
 - Wages (augment \$/Hr) - Pay scale - what is the range
 - Working conditions
 - Turnover rates (factors affecting – e.g. cigarette trade pays more)
 - Incentives to stay in school for Aboriginal youth
 - ECE as an option - opportunities to model as a career
 - Need to look at ECEs as specialists
 - **Need to Develop plan to impact wage scales** by developing strategy for how this profession is perceived by community, funders “**champions**”
- **Need ongoing Professional Development**
 - Incentives - both centre and individual based
 - Centres need to be supported and see value in providing time off i.e. need funding and need to provide paid time off for employee professional development training
 - Individuals need incentives to take PD training
 - The training should meet the needs within the community
 -

Recommendations (Re training & address Q #8)

- 1) Need Specific List of Kinds of Training that would enhance people's ability to support children with special needs (FN specific ECE & Special Needs certificate/diploma programs that are accredited and credentials acknowledged)
- 2) Not enough training in community in early intervention services – Need to develop these resources within communities so children have access to appropriate services
- 3) Work with AHRDAS to develop regional/national strategy for training for ECE & Special needs
- 4) Need to address the cultural appropriateness of assessments & training

SUMMARY

- 1) Across the board FN standards/regulations in place in order to enhance certification and accreditation issues
- 2) Have more certificate and diploma programs
- 3) More ongoing professional development opportunities and funding
- 4) Find out more about Alberta FN Accreditation Board - suggest a national Model
- 5) Need to acknowledge community needs and reciprocities while meeting academic rigor
- 6) Need to address discrepancy between how Aboriginal Headstart is funded on and off reserve
- 7) Develop plan to impact wage scales, recruitment, and retention of staff
- 8) Develop strategy to impact how ECE profession is perceived by community, leadership, funders (need champions of workers)
- 9) Identify specific list of training that would enhance ability to support children at the community level
- 10) Develop plan/strategy that would to increase number of staff with early intervention training and credentials at the community level (collaborate with AHRDS to develop plan for regional training)

Question # 4 – Training – Distance Education working Communities

Do you know of any other distance education methods that are working in First Nations and/or Inuit Communities?

RESPONSES

- **YUKON**

- set up college campuses in community which are using video conferencing for course work - don't have to come to Whitehorse - 15 years
- Justice Institute (JI) - brought courses from Vancouver to communities for training - intensive course 25 people at a time - negotiation & mediation training - 5 other communities now want to participate
- Leadership training offered by teleconferencing through University of Victoria to students in the Yukon – very successful

- **NOVA SCOTIA**

- Video conferencing in NS for in-service training for educators
 - dependent on type of training
 - In schools in FN communities and open to community members i.e. elders, teachers etc.
- Fast Track ECE program - used Six Nations expertise on reserve to offer program in partnership with colleges and universities
- Saint Francis of Xavier offers program for Bachelor of Education (B. ED) and Bachelor of Arts (BA)
 - - instructors go on reserve

- **NEW BRUNSWICK**

- University of New Brunswick offers a Bachelor of Education (B. ED) on reserve with video conferencing
- Department of Education of New Brunswick bought laptops for all teachers in the provincial schools and all in band schools and provided training and access to the portal and training

- **ONTARIO**

- Learning Disabilities Association of Ontario (Idao) - Online training for parent advocates for children with Special Needs

Website <http://www.ldao.ca/oaia/index.php>

- **MANITOBA**

- Red River College
- Gender impact re training (do women not embrace technology as quickly)
- Also need to consider tutoring and support side - need to set this up and it can be just as expensive
- Involved broad section of people to spread general knowledge across community and not keep it within small group
- Struggle with balance of professional knowledge and ensuring the knowledge isn't "owned" but appropriately distributed in community
-

RECOMMENDATIONS

- 1) Ensure Infrastructure
- 2) Tutoring Support
- 3) Broaden spread of knowledge base and knowledge acquired by distance education is distributed to whole community that is raising the child i.e. technology and content - not owned professionals – widely owned and accessible to community members
- 4) Need mentors and mentorship
- 5) Jurisdiction - Set up a working group to look at what has been done between regions and work to get cooperation between federal, provincial and territorial governments
- 6) Promote vision of "it is for the kids"
- 7) Collaborative principle regarding technology, programs, funding
- 9) Emphasize/focus on message that early intervention is Money better spent

SUMMARY

Distance Education Methods that work in communities now

- 1) Ensure adequate infrastructure
- 2) Provide on-going tutoring and support in communities
- 3) Encourage broad ownership and accessibility to skills and knowledge in the community (on IT, on ECE, Parenting, Child development, Advocacy (don't keep the knowledge contained to one "expert")
- 4) Co-operation between Jurisdictions

QUESTION #5 – RESEARCH NEEDED

What areas of research are still required? Prioritize.

RESPONSE

- 1) What is the need - Data on Children with Special Needs
 - What is the prevalence of special needs in our communities
 - Number of children with special needs and types of special needs
 - First Nations – Aboriginal numbers
 - Are rolled up with regional, provincial, national data - used to develop plans for community specific training, staff ratios, needs for TAs or Special Needs assistants, and professionals for assessment
 - Local community based research and capacity to develop community plans of action
- 2) Funding issues - Where does the funding flow?
 - Tracking of how funding is accessed, and then used , on reserve and off reserve
 - Tracking of funding for early learning & special needs
 - Analysis
 - Recommendations of what funding mechanisms would be most appropriate/what is necessary to meet needs
- 3) Literature review of key initiatives addressing ECD/special needs from holistic/collaborative/integrated approach
 - Aboriginal Circle of Early learning Care – Literature reviews, resources may be found here – need to take it a step further with analysis, opportunity for national discussions and sharing/development of national plan - look at building regional capacity to implement
 - Environmental scan of what research regions are doing - what are successful/useful models? Best practices?
- 4) Research on Assessment, Curriculum resources, Methodologies
 - Find some community examples of this
 - Case management styles
 - Integrated and collaborated foundation to assessment and program planning
 - Integrated services and coordinated planning taking place at 15 demonstrations sites
 - Research on collaborative holistic approaches to assessment
 - look at what is being done
 - pilot program
 - develop shared learning
 - support communities to use approach to assessment
 - Need buy in from Provinces and School boards to develop a Common Tool and a Common Curriculum
- 5) Human resources issues in First Nations communities
 - Staff qualifications, wages, turnover
 - How we value the work of an Early Childhood Educator

- **6) Parents and Families**
 - How to better support Parents and Families of special needs child
 - Important how approach and get input
 - How can we best support
 - How do we involve parents
 - Where do parents want to be involved
 - **Trying surveys**
 - ask how parents see early intervention
 - Services where when how?
 - Ethical issues of approaching parents for survey – difficult for parents shame and blame - one more thing to fill out
 - One way to break Residential school cycle – trauma big component of special needs – integrate parents into process - don't have to label - create normalized environment - put in necessary supports – training parents to be parent advocates for child
 - How do we involve and support parents where parents want to be involved – a holistic approach helps accomplish this
 - Online Parent Advocacy Course given by Learning Disabilities Association of Ontario (ldao)
 - Book - *Exceptional Children Ordinary Schools* – Dr. Norm Forman
 - Website - <http://www.ldao.ca/oea/index.php>
- *** **AFN needs to give ECD and Special Needs a higher profile**
- more education to our leadership
 - what is the commitment
 - costly to acknowledge the problem and more costly not to
 - impact on systems with investments in ECD & Special needs

SUMMARY OF RESEARCH NEEDED

- 1) Data Research - number of children with special needs and types of special needs
- 2) Funding Research Tracking of how funding is accessed and then used on and off reserve.
- 3) Literature review of key initiatives addressing ECD/special needs from holistic/collaborative/integrated approach
- 4) Research on culturally appropriate assessments/curriculum resources/methodologies
- 5) Human Resources Research on staff qualifications, wages, turnover etc
- 6) Parents and Families of Special Needs Children – how to involve and support
- 7) Leadership mobilized and educated

DAY 2

AFN GROUP 1A

QUESTION #6 APPROPRIATE DIAGNOSTIC/ASSESSMENT TOOLS

Are you aware of any existing diagnostic/assessment tools that are appropriate for First Nations or Inuit Children. If there are not appropriate tools what needs to be done to achieve this goal?

RESPONSES

- Is a process
- Screening tools should not be used to diagnose
- **“Step by Step”** program in **Kahnawake** isn't standardized - flexibility
 - **ASQ** (screen) ages and stages questionnaire
 - Parents become involved – creates partnership
 - **AEPS** a linked system of assessment, evaluation, and intervention performance 0-3, 0-6+9
 - For all children on Kahnawake
 - Isn't a diagnostic test – empowers parents/teachers
 - Must come from a cultural perspective

- Adapt to community needs
 - Use community norms as baseline
 - Can be made applicable nationally
 - Can be adapted to the child/family's needs
 - Helps identify goals – curriculum
 - Isolated communities
 - Inclusive intervention
 - Available online through Brookes
<http://www.brookespublishing.com/onlocation/topics/AEPS.htm>
- AFN research to develop a picture of where communities are Re: assessments and how they are addressing issues in their community
- Partnerships (Kahnawake/AFN/CEACASN) are important regarding lessons learned and next steps i.e.
 - Using a diagnostic test creates a gap (resources)
 - What do we really want to know?

QUESTION # 7 Knowledge still to be gathered – Steps to be taken

RESPONSES

- Engage with funders to look at diagnostic testing
- Look at funding mechanisms
- Resources to modify existing diagnostic tests
- NEXT STEPS
 - Changing/adapting tests to make them appropriate
 - Focus on supporting the people who are using the tools – tool is only as good as the person using it
 - Kahnawake should be part of AFN research (1/20 communities)
 - Share data/Best Practices
 - Use federal/provincial to disseminate information
 - AFN update website re Special Needs
 - AFN to Champion Special Needs in meeting with Federal Government
 - Collaborative process
 - Speak the same language as Govt helps FN strategies
 - Influence Senior officials and Politicians
 - Develop a Framework and Action Plan
 - Develop Special Needs Specific Policy Framework
 - Look at what has been asked, done, data, numbers, lessons learned
 - Ask Federal Government what they need and why and what they have done
 - Develop the policy framework based the findings from the 20 communities
 - Look for similar “Step by Step” programs
 - Study Special Education Funding Models
 - US research on funding models
 - **Critique the current funding model**
 - **LINK TO Agreement to which Canada is a Signatory (Article 23, 30) A Canada Fit For Children**

QUESTION # 8 WHAT MISSING AND NEEDED TO MOVE AHEAD WITH SPECIAL NEEDS

RECOMMENDATIONS

- **1)** More community based case studies (AFN)
- **2)** First Nations regional longitudinal Health Study (RHS) expanded
- **3)** Build on other initiatives e.g. Disability, Aboriginal Human Resources Development Strategy (AHRDS), PSE.
- **4)** Report Card on implementation of recommendations from previous research
- **5)** Funding models need to be researched - models from literature need to be critiqued

- **6)** Best Practices (Social Development Canada) sources of expertise
- **7)** Government Responsibilities – Link to research on eliminating Silos
- **8)** Look at what is being done Internationally e.g. New Zealand, Australia
- **9)** The Professionalization of educators - First Nations training/programs/courses that are available
- **10)** Jurisdictional issues – Where do Children's hospitals fit in
- **11)** Thinking that puts Children First – need paradigm shift
- **12)** Educate ECDs
- **13)** Culturally appropriate tools
- **14)** Develop questions for RHS 2009
- **15)** Long Term Mentoring Pgm for isolated communities
- **16)** Asset Mapping Training for Communities and Support from Tribal Councils
- **17)** Pilot Project - Demo site – Tag on Provincial/Territorial involvement
- **PRIORITY**
 - **More value based assessments** – is an orientation pkg that Kahnawake uses
 - **We have to come from the understanding that all aspects must be culturally appropriate, based on our unique values and beliefs**

ITK Flip Chart Notes

ITK Group – Day 1

PUT CHILDREN AT THE CENTRE

Bring in all children to grow into their full potential.

What kind of program supports do families need?

What kind of services do children and families need?

1. Definition Centre of Excellence

(a) All children are special needs – should be looking at all of our children in this way. Every one of the children must be considered as special needs, every family knows a lot of difficulties. Inuit ECD meeting – agreed it is a fine definition.

(b) yes- adaptable to policy development in the north – yes – elsewhere it would be too philosophical, not categorical enough-will need the infrastructure to support the policy-inclusive practice versus categorical funding – political hot potato-inclusion is the correct way to go – categorical = assessing kids - \$/per capita for a particular label i.e. FASD

(c) Assessing without labeling – parameters to assess without labeling – categorical model detrimental to children – what does giving a child a label? – No funding pot to do categorical funding so how does this help?

OK with definition but would it be readily accepted as a policy piece – actively advocate for this. We have advocate against labeling kids.

PHAC - will stop saying \$ is tied to labels - autism \$, FASD \$, diabetes\$ - money without labels from here on in - working together for the common good

2. No question #2

3. Deficit to strength? 5 top ways to shift from deficit to strength? Perspective/paradigm Report Back

Group 1

- The Community already treats the child as an individual. Child first based on the strengths of the child.
- Don't remove the child from the group of children. Don't let them feel isolated. Incorporate their work into the group work. Inclusion. Not moved out.
- Mandatory training for service providers in Inuit values, practices and community environment- what's there, what's not there, asset mapping.
- Common working ethics. (All teachers have same training, consistency across the region. Don't silo school programs, ECE, have to have underlay of whole system. Articulating same philosophy Inuit values and practices.)
- Community led.

Group 2

- Accept the definition. Enact resources – Resources & Policy. Collaborative focus so its multi disciplined. Multiple supports. (Holistic)
- Focus on individual not special need (human qualities-need support)
- Assessment based on gifts not deficit-attitudes (appropriate tools and attitudes of assessors).
- Training consistency-appropriate to meet education need, ongoing-community driven, community based.
- Young children will grow up – life long aspects of this person – life long learning – support that commitment life long.

- Measurement of success based on the individual – success measured against individual not society norms.

Put the child centre.

Group 3

- Treat people how you would want to be treated.
- Special needs is loaded with negative stereotypes –conjures negative stereotypes – perhaps need a new term
- Education and exposure – know people and love people with special needs – more accepting than those who do not have this experience – know they're loveable
- Learn from all children
- Child centered policies will give the movement momentum.

Group 4

- Not problems (no Inuit term for problem – they didn't have the luxury of problems) – opportunities to seek solutions is the only way to survive up north (work in a solutions-based to change the perspective) but opportunities to seek solutions)
- The guilt and fear that is attached to labeling, prevents people from moving on to real goal of supporting and providing services (get caught up in the blaming, internalizing guilt, immobilizes them)
- What is the “best” for each child? Who decides? How do you integrate services around the child?....Wraparound
- The significant “loss” in parenting strengths has to be addressed ... “inuguinning”
- Empower, advocacy, enhancing capacity building

Commentary associated with questions/answers

(Look at healing within families, communities, cultural healing to free people to do the solutions-based work to make sure we are getting the best for each child

What is the best of each child-who decides? Education system, parents, within what context, how do we ensure we are integrating the services around the child, wrap around approach, no services or ad hoc services in the north, no mental health workers in the community – residential school survivors – re traumatized – where do they get help? No one to provide support – community comes together to provide own services. How do we help ourselves to wrap around this child?

The significant “loss” in parenting strengths has to be addressed. Parents need to be engaged in making decisions with and for their children. A lot of guilt. Build on the strengths and build strengths back into the parenting process. Look at traditional roles of parents and grandparents in the process of building strength in children.

Empowerment, advocacy, capacity building is a colonialist term – **enhance and support capacity building** – individuals build their own capacity – paradigm shift.)

DAY ONE : AFTER BREAK

***** Treat the child not the special need.**

***** Not problems but opportunities to seek solutions.**

***** Wraparound (document assessment every day – review and celebrate children's accomplishments on Fridays) surrounding the child with support, every child has a special need at some point in their life, child and family support**

3 Groups

What needs to be done to fully understand the situation of children with special needs in Inuit communities rural/urban?

Group 1

- Trained people to be able to recognize special needs
- Do assessments on all children
- Know the history of the community i.e. social, language, culture (lost, has community moved, lost?)
- Identify what is not available
- Using wraparound integrated approach
- Access to LFF (label free funding)
- Involve parents in continuity
- Community training for community people to be the 'professionals'
- Follow up infancy to adulthood
- Focus on strengths not weaknesses

Group 2

- Joint commitment from community, regions, territorial, federal level to develop research framework as fundamental
- Collaborative, language and culturally appropriate
- Gathering the info in a way to get the best response
- Respecting the needs of the community – provide childcare, food etc
- One on one (gathering info)
- Federal coordination focus on community members, needs
- Focus on uniqueness and diversity, culturally appropriate tools
- Develop Inuit specific screening and training models

Group 3

- Fully understand the definition of special needs trained people
- People have fears, need to be at peace with it
- training reflecting Inuit values and beliefs, non judgmental, traditional child rearing
- language (ages and stages questionnaire for parents and professionals)
- standardize assessment tool that is culturally sensitive
- translating is a barrier into all dialects
- reduce the isolation by sharing case information
- each community requires individual blueprint/vision- web of available resources- safety net (i.e. health station, mental health workers to provide early intervention)
- proactive rather than reactive – training early detection and intervention
- do not assume written materials are understood; audio and video taped information
- involving families a create a clear picture of the child and means of most effective intervention

Group 4

- consolidation and collaboration around funding support
- avoid fragmentation of stages and address the protocol issues i.e. Small Steps Programs – from point of referral throughout school years – the ways a child's profile is communicated sometimes children still fall through the cracks
- parents have to agree that their children participate with continuum of intervention plans at daycare and at home through to Head Start – put the child first – share the information
- decision making process regarding an intervention for a child has to involve all stakeholders i.e. wraparound – parents recognized as the 1st supporter and ultimate decision makers
- need to have accountability for the child across the board

- aajiiqatiginiq = wraparound = help support Mark to be the person he wanted to become given his new situation as having no hands = model for wraparound

Carol Notes: Training, assessment for all, appropriate tools, strength of focus of vision, clear vision, broad and individual level, joint funding commitments, leadership, need work to be done in communities

Everyone needs a piece of paper and a pencil because in a minute I'm going to say "go" ...

Ready ?

List: Do you know of any Inuit specific diagnostic assessment tools? NONE! (Enviro View/AHS Carol Rowan)

Assessments have to acknowledge there is huge diversity in the population. I.e. Child diagnosed with language delay from the north but child was newly living in the south. Mother upset. Child not language delayed.

Adapt assessment tool – Ottawa – child in month one at Head Start compare with months later – get parent engaged – being part of the child's education – keeps notes each day on child and share with parents in progress reports

Evaluation form – Nunavik

Nippising

Ages & Stages (translated)

Brigantz (Inuvialuit)

Eckers

Enviro View – look at child care centre itself – what makes it an Inuit or FN place – looks at music, language, art, environment using 10 or 11 points?

Linguistic screens (x2) being developed – government of Nunavut

- kindergarten and grade one/early childhood program and tested again 6 months later – linguistic ability for children entering school – develop programs for Inuktitut first language speakers – developing benchmarks for children

WSS – used at Head Start Sites – Work Sampling System – Goose Bay & Tuk

- build on the strengths of the child

List:

Any tools that you think would be appropriate for Inuit children? What's needed?

- Culturally sensitive
- Visuals

What should be done to get tools appropriate for Inuit children?

- Portfolio- need training around indicators to know when a child is in need of actual support – how do you document this?- great way to communicate with parents that is non threatening and is concrete
- Understanding child development

Is there consistency on what is actually being assessed? What are the competencies that staff are identifying i.e. language?

- Identifying the "items" i.e. language that need to be assessed
- Need for consistency
- Understand and document indicators
- Buy-in from parents(one thing wrong with my kid) and staff (over worked)
- Readiness measures to learn all this stuff before going to school and we think you're putting our kids into school too early anyway
- Always teaching to the head

- Elders: You haven't done anything to build from the heart; thinking begins in the heart – how? when? – starts pre birth, name the child, having a healthy pregnancy, elders want to see character building stuff, grounding, heart building stuff – is he a good boy, what kind of a human being is he, how does he relate to other kids, foundation pieces – focus on relationships, feelings, need to get this from early childhood program – want to report on the heart stuff
- What are children doing in the classroom, what do parents want, what are parents hopes for their children, how do we design programs that answer these questions, what are we assessing exactly
- Children with developmental delays do well if identified early and do well with the right kind of support – i.e. Ages and Stages (delays come up – work with parents to enrich the child's environment), looking at interventions to support the child's development, ages and stages done in the home as well as the program, having a child in an early childhood program allow comparison of information, a collaborative approach for intervention and extra support

Is there a need for additional Inuit tools?

- Ages and Stages goes up to age six, looking at taking it to age 21 as a self screen-youth at risk-youth suicide rate- under development
- Linguistic assessments in development
- Not looking at diagnostic assessments yet
- Dad's becoming very engaged with their children – this tool engages father in child with early childhood assessment
- Ages and Stages – trained 19 communities in Ages and Stages – birth to 6 years – questions about milestones – doesn't take long to administer – has been translated
- Social/emotional development screening that gets back to helping ECE's to understand the heart piece (cross curricular competencies: the way you serve others, the way you support each other help each other heal, the way you seek solutions – what competencies can we expect at this early age?)
- If we look at where our kids are demonstrating special needs in our system, we have very few children at high risk special needs category- the bulk of them need social/emotional/behavioural issues need strength building – better equipped to deal with other issues in their lives like learning disabilities

FACILITATION Wed. Feb 28th

SHIRLEY Begin with: Word for “not problems but focus on opportunities to seek solutions”.

How to tackle questions/answers, commonalities, differences in evolution around special needs (Inuit at the beginning of the process?) and Next Steps/Priorities, Setting up a Working Group

Ottawa Inuit Children's Centre (Moving Forward) Karen phone # on paperwork – AHS workshops

DAY TWO

ITK Group Flip Chart Notes

RECAP

1. Definition

Inuit ECE working group agreed that the definition was excellent except our prevue is focused on children 0- 6: one change would be to remove word adolescent.

2. Shift to a paradigm of strength and address transitions to school

Early years enhancements have an impact on school age children. Children with highest needs in Small Steps Program part time are quite often better served than go into the school program full time – transitioning. There are individualized components for 5-6-7 year's olds.

Relationships established with team at daycare helps strengthen the children in their transition from child care to kindergarten.

If a wraparound process is in place for a child having difficulties in the school system, certainly their early childhood staff would be part of the wraparound team as having had an important impact on the child's life. Let's not create educational silos. Continue the relationship – community learning networks 0-end so transitions are fluid.

Nunavut: the kindergarten program has not caught up with the daycare. Kindergarten teachers know which children come from daycare and which did not. Kindergarten builds a curriculum without consulting with the

Daycare to ease transitions. An educator should expect a huge range of school readiness. Take the child with what they bring to the classroom. The child should not have to fit the curriculum. There are peer learning opportunities for children to learn from one another. This also sounds like a professional develop opportunity for teachers. Could be more sharing between daycare, preschool and kindergarten.

How do we support the transition to school?

- Situate the preschool next to the kindergarten class
- Build relationships with the local school
- Meet with teachers to do cultural awareness work
- Child care can support parents to fill in kindergarten forms
- Open house for teachers
- Explain what teachers do at daycares
- Daycare/HS goes on field trips to the big school to the gym/library to get used to the environment
- Daycare will build a relationship with the principal and kindergarten teacher to discuss each child
- School board has to think about what can they do to support the teacher with variable readiness skills amongst the children
- Training teachers for childcare/student placements – kindergarten to grade three
- To teach kindergarten, ECE's can be certified to teach kindergarten in Nunavut – difficult to recruit
- Children could begin with competency profiles in HS and carry it through their school programs
- Need funding to be properly staffed to do documentation and observation on each child, need enough staff to spell each other off from the floor to attend to very important documentation (catch 22-not enough staff, need to document)
- Ottawa- more children in care in the class than in families of origin – supporting their emotional needs as it relates to trauma – change the classroom to meet the needs of each child
- KRG staff participate in teacher/training session
- Curriculum being developed by the government of Nunavut and government of Quebec
- Documented progress reports should follow the child through the school system and provides common language
- Have an appropriate child focused transition plan (wraparound) for each child with special needs parents, childcare, and kindergarten teacher
- Demystify the process

3. What is that we really need to work with children, understanding children and giving them the best possible opportunity to learn? (ITK added this question).

- education for special needs and training
- recruitment/retention equation needs stability; there are jurisdictional difference in Canada ; no increments
- salary discussions in Nunavut, Iqaluit is ongoing about salary disparities which create a problem supporting children equitably across the north
- professional development for staff needs to be targeted
- high turnover of ECE workers, wages an issue – they take positions at elementary schools for more money & benefits
- ECE should be a career opportunity; starting salary \$10/\$11/hr remains the same for 10 years into their career
- elementary schools pay higher salary and benefits, ECE is not really recognized as a career
- build on the skills of current staff through professional development opportunities to support the children in the classroom
- train according to population individualized to daycare population
- a base of information re: children's behaviour, assessment skills and tools and how to support them
- a sum of discretionary money for centres to use to provide specific staff training for student support
- documentation is important as it helps the coordinator to assess the training needs of the staff

4. What do we need to have training on special needs recognized?

- is specialized training important at this juncture and recognized by CEGEP, community college or university?
- recognized training is important for a CV, but it is more important that there be dedicated funding for ECE programs for training
- if a child comes into the program there can be targeted training for a teacher to work with this child
- it is difficult to get registration fees – need a pot of money – teachers have \$ but ECE staff do not
- competency-based Special Needs Certificate or Record – need to have it recognized as a professional profile that is career long – should be recognized as on the job skill building and demonstrated ability.
- 3 day training sessions followed by work practice on the job with follow up – could this work in the north?
- sustainable career in ECE/Special Needs – should have value economically and be valued in the ECE community.

What programs exist?

- Ottawa – one year program to work with autism for graduates
- Nunavut - ASL training
- Effective Behaviour Support (EBS) Training
- social, emotional, behavioural supports training in the community
- target such as ASL or more general community
- CEJEP – Special Needs – competency-based like ECE (intervention planning & assessment)
- PHAC – workshops specific to special needs and Aboriginal children

- “TRIBES” training (create supportive classroom environment/community embracing approach) – expensive
- VIRTUES training (expensive)

5. Distance Education Models of Training

What is the best way to train educators working with children with special needs?

Group One

Main components for training

- competency, practical field work, hands on, scaffolding support, language, academic, reading, organizational skills, life stage, relationships in their lives, maybe need upgrading, personal life skills, time management, stress management, providing balance between personal and professional life
- mentoring is a successful model
- elders are essential for healing and educating staff about traditional ways to take care of children
- audiologists
- itinerant specialists visiting the north
- use local professionals, raise awareness, wraparound, asset mapping

Possible delivery methods

- Need modular development as family life may interfere with traveling for training over a long period of time
- need multiple access to program
- hands on for immediate needs
- more specialized modules
- hybrid types of programs
- specialized areas with on-line experts
- community experts could facilitate course
- mentorship important to support students in the community, graduates of ECE could work with new ECE recruits as mentors
- potential to support across the entire north
- success of distance education depends on the quality of facilitation, the on-line environment and support for hybrid model
- distance education (painful) on the telephone for 2 or 3 hours; it takes 4 years to complete a one year certificate in this way

Group 2

- whatever is offered should be offered in a flexible format to answer the need of individual learners.
- emphasis on practice, practical experience, hands on within the context staff would generally use the information
- should be feedback on that practice – videotape interactions, send off to experts with comments, here's what we're doing, here's what we tried, this is what happened when we tried, what are your comments?
- information must be relevant, meaningful, useful and valued and perceived as useful for ownership by the student
- must have multi load learning as text-based learning is only not enough
- video and other enhancement need to part of the learning package
- must be competency based – chunks of info and opportunity to practice etc, book approach and practice, review
- one-of workshops are not considered particularly effective; need mass practice

- create opportunities where people are getting info over long periods of time, opportunity to talk about this within a community of practice through chat sites and to share
- examples of the challenges and best practices within a supportive environment.
- workshops should be offered within the community where staff live and work
- ownership of learning relates to how it is formatted and presented
- use adult learning principles

6. Areas of Research

- People need to understand the situation, need educated educators, researchers and trained people to create assessment tools and diagnostic tools for all children
- screening tools need to be researched for ongoing developmental assessments that are culturally-based, language-based, holistic, inclusive of socio emotional component, community-based commitment and delivered through multi leveled partnerships

7. (a) Diagnostic and Assessment tools

- valuing of our work (wages another discussion)
- screening is very different from diagnostic
- there seems to be very few Inuit diagnostic/assessment tools
- list of recommendations for the development of culturally appropriate screening tools needed
- looking at assessment in an ongoing way to give us a snapshot of a child, a broad picture of a particular child to help to track, and file a continuum of information
- this is part of continuous learning piece about the child, what the child brings into the program which defines a starting point, bench marks
- linguistic screens, social/emotional screens (Elders-character building – less commonly available-must be aligned with cultural appropriateness for Inuit child development)
- look at the training of ECE to do screening
- ECE do not do diagnostic work, only apply assessments
- how does the screening help regarding preferred learning style, richness of the child
- must build on strengths of the child that he or she can share with peers
- identify gaps to fill in for the child, do a lot of work with educators to enhance the program, puts value on work of educators, come up with a plan to support a child, stand back and see what you have achieved
- documentation of child's progress helps
- helps children reflect on own learning and helps family to see progress
- communication pattern, language preference (mark where they are on a continuum ... may know a couple of languages/multiple languages: English, French, Inuktitut)
- social/emotional development in Inuktitut – culturally appropriate (just because children use English it is assumed that the children are culturally mainstream but this is not true; we cannot take mainstream screening tools and apply them)
- ECE must be equipped to use screening tools
- language has to be accessible and not overly academic
- linguistic screening: must be practical
- a package of strategies to use depending on the results of the screening, guidelines and supports that help educators interpret the information and move the child along
- package needs a contextual basis, foundational support and be able to stand alone

7. (b) Steps to be taken

- do not take main stream screening tools and adjust to own community needs
- start with a tool designed and developed by and for Inuit

- the community can validate Inuit specific screening tools using culture and language indicators to note changes over time in a dynamic way - like a living document
- screening tools must be strengths based – focus on what the child can do.
- assessment tools needs to be supported – unsupported practice leaves people ill equipped to use the tool appropriately
- teachers need hand book or guide internet sources, books/video/DVD's/audio/discussion forum to support the learning so the teachers become familiar with the information and curriculum.
- culturally appropriate diagnostic tools are needed
- parents need to be involved; screening tools we use should include parents.
- photos, portfolios shared with parents to celebrate children's growth.
- parents can manage ISSP's
- parents need individual support and parents need to be offered resources, workshops i.e. autism, linguistic issues
- targeted funding to include \$ for parents
- parents need the message to get children to bed on time, nutritional intake, no blame
- enhance home supports and education
- gather information from the parents
- parent/teacher interviews – share observations from home and that gets documented
- encourage parents to advocate on behalf of their children.
- the whole program needs to be embedded in assessment practice in the philosophy of the program and community; should be happening in your program all the time, rich feedback, assessment for learning, child's progress
- resources – good doctors, tester must be equipped to work in the community, diagnostic assessment piece – Centre of Excellence can contribute to this piece.

8. Recommendations

*** This Report should go to the community for input before being published ***

1. The definition is holistic, culturally appropriate: holistic funding not silo funding or label funding. Add child development throughout whole life (0-age of majority).
2. A strength-based inclusive approach philosophy puts the child at the centre; using the wraparound process with participants who participate in the building of the life of the child. We need a philosophical statement.
3. Training (we don't get anywhere dividing up into small jurisdictional groups); ITK & Pauktuutit have the mandate to work nationally with no barriers to establish training protocols, wages, accreditation; they are non-biased national NGOs; advocates for Inuit children. ECE must be recognized as a profession rather than a job.
4. Turn the information over the current working group and task them to consider the recommendations to create a feasibility plan; ITK will be doing a special needs survey.
5. A needs analysis and description of how those models can be applied to the existing child care programs and ask what the teachers need for distance education.
6. Ensure identification of key components of successful distance learning models; consider needs analysis, access, content, certification, individual learning (staff, community), package with modules specific to the community, multi modal programs.
7. Virtual conferences, workshops and all kinds of new distance learning models are coming on-line which can be harnessed to get info and get the skill sets for ECEs.

8. Distance learning attributes: flexible, supportive, practiced, community-based, module based, competency based has been successful and linked to practice.

9. Southern, university driven does not work. Find out what fits. Content must be practical, useful, relevant, meaningful, culturally appropriate, analysis of what works i.e. pedagogically, content, approach, pod cast (audio recordings), offers opportunity to create a community of practice, sharing, discussions, get resources out and across jurisdictions, distributive learning.

10. Develop Inuit Training Model

11. Funding and resources are needed for speech therapists, linguistic/sounds, professional resources and pediatricians at communities

12. Screening tools need to be culturally appropriate: screens most work done on them, consistency across jurisdiction with a philosophy of approach for dynamic application

*** there are 7 principles of dynamic assessment; Shirley will send document

13. Diagnostics requires outside expertise, additional funding, tri level collaboration with a number of experts and stakeholders; the Centre of Excellence for Children and Adolescents might be a good place to ground this work.

14. Research that is still needed: parenting, elders, culturally appropriate, linguistic, cultural loss.

Next Steps

Short Term

1. Building in professional development through distance education

2. Support a community of practice to help ECE's feel less isolated, share success stories, share opportunities for professional development

3. We are making a difference and we need to get that info out there

4. Improve Inuit info on Aboriginal Childrens Circle of Learning (ACCEL: info@accel-capea.ca) website to reduce ECE isolation

5. ITK Newsletter connected to ACCECL website

Long Term

1. Getting recognition for the value of the work being done by ECE's – ECE programs recognized in various jurisdictions

2. Strategic Investment: If we value children, early years, why are we not valuing people working with the children i.e. \$10/hr in Nunavut or anywhere.

3. ITK could set standards for certification, lead professional ECE association that would identify baseline

4. Show consistency and standards – look at how certification as a way to up the standards for early childhood workers

Inuit Specific Principles of Education and Dynamic Assessment

Inuit specific principles of education and dynamic assessment

A participant associated with Education Nunavut brought forward the following Inuit specific principles that inform education and dynamic assessment through a culturally relevant lens:

Pijitsirarniq

The concept of serving is central to the Inuit style of leadership and as such is the measure of maturity and wisdom of an Inuk. Key here is the understanding that each person has a contribution to make and is a valued contributor to his/her community, to demonstrate this kind leadership and commitment to serving the common good.

Aajiqatigiingniq

The concept of consensus decision making relies on strong communication skills and a strong belief in shared goals, to participate actively in building strength of Inuit in Nunavut being able to think and act collaboratively, to assist with the development of shared understandings, to resolve conflict in consensus-building ways, and to consult respecting various perspectives and worldviews.

Pilimmaksarniq

The concept of skills and knowledge acquisition and capacity building is central to the success of Inuit in a harsh environment. Building personal capacity in Inuit ways of knowing and doing are key expectations. Demonstrating empowerment to lead a successful and productive life, that is respectful of all, is a powerful end goal of our educational system.

Qanuqtuurungnarniq

The concept of being resourceful to solve problems, using innovative and creative use of resources and demonstrating adaptability and flexibility in response to a rapidly changing world, are strengths all students should develop. Resourcefulness should be demonstrated in all learning and thinking that seeks to improve the context in which Inuit live.

Piliriqatigiingniq

The concept of collaborative relationship or working together for a common purpose is an essential belief that stresses the importance of the group over the individual that should pervade in all teaching. Expectations for students will reflect working for the common good, collaboration, shared leadership and volunteerism. Piliriqatigiingniq also sets expectations for supportive behaviour development, strong relationship-building and consensus building.

Avatimik Kamattiarniq

The concept of environmental stewardship stresses the key relationship Inuit have with their environment and with the world in which they live. Students are expected to articulate respect for this mutually interdependent relationship and to demonstrate responsible behaviours that seek to improve and protect the relationship in ways that meet global challenges to environmental wellness.

Evaluation Template and Summary

Evaluation of Roundtable

Five evaluation forms were completed and submitted by participants.

Comments

1. What did you find most useful during this Roundtable?

- meeting all the other people and sharing some of our visions
- an opportunity to work with AFN and ITK
- research papers
- the diversity of information from ITK and AFN and the commonality of all aboriginal cultures

2. Did this Roundtable meet your expectations?

- yes, because I did not know what to expect
- excellent discussion, many common themes, fairly consistent amongst recommendations
- to some degree but the process and players were not explained adequately nor were next steps sufficiently handled
- yes, I was able to gain a great deal of knowledge on all aspects of special needs
- more than expected – too much to explain – so much information – good hearts – good minds – nye:weh

3. Did this Roundtable meet our objectives?

- yes, there is so much work to do
- first steps
- yes
- yes

4. Table

- Meals and refreshments: good, excellent, fair, good (too much starch for diabetics), excellent
- Hotel facilities: excellent, good, fair, very persistent and abrupt at check out, excellent
- Registration Process: excellent, good, good, excellent
- Conference organizer: excellent, excellent, good, excellent
- Materials provided: excellent, good, good, excellent, excellent

5. Additional Comments: great conference, good job! please send participants the report ASAP – will we have an opportunity to comment on the final?, need to meet at least three or four times a year