The Alberta First Nations Information Governance Centre

Indigenous Early Learning & Child Care (IELCC)

Environmental Scan – Alberta Region

"Children are the future generation –
keeping them safe and preparing them
for the future is our responsibility."

\- IELCC Survey Participant

January 2021

The Alberta First Nations
Information Governance Centre

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Introduction

The Alberta First Nations Information Governance Centre (AFNIGC) is a not-for profit, First Nations-owned organization that promotes, protects, and advances the First Nations´ Ownership, Control, Access and Possession (OCAP®) principles; the inherent right to self-determination and jurisdiction in research and information management.

AFNIGC facilitates OCAP® principles by:

- Increasing the impact of research and information that measures the state of First Nations health and wellbeing;
- Providing sound governance and oversight to research initiatives and specialized surveys;
- Providing stewardship of data; and
- Building the individual and systemic capacity for respectfully engaging in data collection, analysis and utilization through professional development, training and tools, standards of excellence, and access to equitable funding.
- The governance structure of the Alberta FNIGC is entrenched as an incorporated entity and includes:
- The Assembly of Treaty Chiefs as members of the corporation
- Treaty No. 6, Treaty No. 7, and Treaty No. 8 appointed Chiefs Senate, and delegates from First Nation communities to serve as Board of Directors.

Cora Voyageur Social Research Ltd.

Cora Voyageur Social Research Ltd. was contracted by the Alberta First Nations Information Governance Centre (AlbertaFNIGC) in Spring 2019 to gather information for a series of reports regarding the state of Indigenous Early Learning and Child Care (IELCC) in Alberta.

The National Indigenous Early Learning and Child Care Initiative (IELCC) was allocated $1.7 billion from the Government of Canada over a period of ten years (2018 – 2028). This funding is above and beyond existing funding and intended to facilitate the implementation of the IELCC Framework, as well as comprehensive engagement between government and First Nations.

Alberta specifically has been allocated $11.2 million for 2018/2019 and $11.2 million for 2019/2020 for Alberta First Nations IELCC programs. Core programs that fall under the IELCC umbrella include: Aboriginal Head Start in Urban and Northern Communities (AHSUNC) Aboriginal Head Start on Reserve (AHSOR) and First Nations and Inuit Child Care Initiative (FNICCI). The overall goal of the increased funding is to provide Indigenous children with high-quality and culturally appropriate early learning and child care.

The Indigenous Early Learning and Child Care (IELCC) Research Project

The IELCC research project has three objectives:

1. Participate in engagement sessions in Treaty No. 6, Treaty No. 7, and Treaty No.8 regions;
2. Conduct a literature review of demography, health trends, and best practices; and
3. Conduct an environmental scan of Aboriginal Head Start in Urban and Northern Communities (AHSUNC), Aboriginal Head Start on Reserve (AHSOR), and First Nation and Inuit Child Care Initiative (FNICCI) in Alberta to support current capacity around six components.

Program Governance and Data Sharing

In addition to these three objectives, two other issues arose with regard to governance and data sharing that also needed to be included in the project:

1. To obtain ratification for a Data Sharing Agreement from the Assembly of Treaty Chiefs of Alberta (AOTC) IELCC Table. Ratification was obtained June 12, 2019 in Edmonton, Alberta.
2. To obtain ratification for a Resolution from the Assembly of Treaty Chiefs of Alberta (AOTC). Ratification was obtained June 12, 2019 in Edmonton, Alberta.

Indigenous Early Learning & Child Care (IELCC) Core Programs:

Aboriginal Head Start Urban and Northern Communities (AHSUNC)

The AHSUNC program was the first to be launched in 1994-95 as a four-year pilot program with a budget of $87.3 million (Government of Canada, 2010). It was designed to deliver services to First Nations living off-reserve, Métis and Inuit living in urban and northern communities. This was in response to a promise outlined in the Liberal Party's Red Book "Creating Opportunity" launched in September 19, 1993 (Government of Canada, 2010). There are approximately 4,800 Indigenous children (aged 3-5 years) participating in an AHSUNC program at one of 134 program sites across Canada (Government of Canada, 2010). This program typically runs four ½ days a week for 10 months a year starting in August or September.

Aboriginal Head Start On-Reserve (AHSOR)

The AHSOR program is a structured, half-day preschool experience for Indigenous children between the ages of three and five years old who live on-reserve. This program, like AHSUNC, is meant to prepare First Nation children for success in the formal K-12 school system. There were over 14,000 on-reserve First Nations children who participated in an AHSOR Program, with an annual budget of more than $48 million (Government of Canada, 2020). This program typically runs four ½ days a week for 10 months a year starting in August or September.

First Nations and Inuit Child Care Initiative (FNICCI)

The First Nations and Inuit Child Care Initiative (FNICCI) was created to close the gap between First Nation and Inuit Child Care services and those available to non-Indigenous Canadians. The program began in 1995 with the aim to create affordable, culturally- appropriate child care services for 6,000 spaces for children in First Nations and Inuit communities across Canada. FNICCI supports the development of direct services to children rooted in the values, traditions, cultures, and priorities of First Nation and Inuit communities.

Benefits of Head Start

Education

Research has shown that Head Start preschool and Early Head Start locations can provide children with educational benefits (Foley, 2014). In fact, a survey was conducted to determine family and child experiences nationwide, which revealed testing scores for children who graduated from a Head Start program. By spring of their first year in school at Kindergarten age, Head Start preschool graduates were at normal levels for early writing and reading, while being close to national normal levels for vocabulary and early math. While this may not seem like a big achievement, it has been proven that children from low-income or otherwise disadvantaged families typically test well below the normal national average in those areas (Foley, 2014).

"Side Benefits"

The study on the impact of an early learning program also revealed that parents of Head Start preschool children read to their children more often than parents of children who were not in an early learning program.

Health

Children who participate in Head Start and Early Head Start at locations near them were healthier than children of low-income families who did not. One startling survey revealed that the mortality rate for children between the ages of five and nine-years old was 33-50 percent lower for children who attended Head Start preschool than children who were not enrolled (Foley, 2014).

A higher percentage of children in the early learning program also received dental care than children not enrolled in Head Start preschool. Head Start preschool was also shown to reduce both the frequency and the severity of problem behaviour in young children, as reported by their parents and their teachers.

Children in Head Start preschool are also more likely to have had immunizations than children who did not attend an early learning program, by as much as eight percent, and research shows that attending Early Head Start locations for education, nutrition, and health services reduces childhood obesity across the board.

"Side Benefits"

The study also revealed that parents who actively participate in their child's Head Start preschool program were found to have more confidence and ability in coping skills and quality of life satisfaction. They also had decreased feelings of depression, sickness and anxiety.

Economic

While Head Start preschool on a national level is a huge investment for the public. Research shows that this investment is paying off. In fact, preliminary results from a long-term study that was conducted in California's San Bernardino County revealed that society receives nearly $9 in benefits for every $1 that was invested in local Early Head Start locations (Foley, 2014). The study followed 600 Head Start graduates in the county area and looked at benefits associated with family stability, decreased dependence on welfare, crime costs, special education, employment, grade repetition, and increased earnings.

"Side Benefits"

Parents who receive healthcare and nutrition education through their child's early learning program participation can decrease Medicaid costs for the family by $198 each year.

Law Enforcement

Head Start preschool focuses on improving the education, nutrition, and health of the children and families who participate. There are even larger scale benefits to those families and the community at-large through crime reduction and costs associated with victims of crime.

"Side Benefits"

Head Start preschool graduates were found to be significantly less likely to be charged with a crime – even compared to siblings that did not participate in the Head Start early learning program.

IELCC Program Deliverables

The five deliverables associated with this project include:

1. Complete the **Community Engagement Report** of Treaty Six, Treaty Seven (G4 and Blackfoot Confederacy), and Treaty Eight regions of Alberta.
2. Complete a **Literature Review**
3. Complete an **Environment Scan** using primary data collected from Aboriginal Head Start in Urban and Northern Communities (AHSUNC) Aboriginal Head Start on Reserve (AHSOR) and First Nations and Inuit Child Care Initiative (FNICCI) sites across Alberta
4. Prepare a **Research Findings Presentation Slide Deck**
5. Prepare a **Research Findings Fact Sheet**

A brief analysis of the information gathered from the events held to fulfill the list of deliverables follow. These data illustrate the benefits, challenges, and workplace experiences of the Indigenous Early Learning and Child Care workers who participated in this project as well as those who attended the data collection sessions. The first deliverable was a Community Engagement Report

Deliverable #1:
Community Engagement Report

Four community engagements were hosted within the three main treaty regions in Alberta. They were hosted in either Edmonton and Calgary and were held between April 10 to May 8, 2019 by the Treaty Eight Chiefs of Alberta, the G4 Nations (Tsuut'ina and Stoney Nations), Blackfoot Confederacy, and Yellowhead Tribal Council.

Regional engagement meetings were attended by almost 200 First Nation politicians, educators, Head Start administrators, daycare administrators, Head Start employees, daycare employees, First Nation Elders, Federal government administrators[2] and other interested parties. The composition of the groups varied with the YTC meeting being over-represented by community elders while the Treaty Eight gathering consisted primarily of Head Start and daycare workers.

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[2] On the second day of the Treaty Eight meeting, all federal government employees, the hired facilitator, and myself were ordered out of the meeting by the ranking Treaty Eight administrator.

Table 1: Community Engagement Meetings –Host by Date, Location and Attendees, 2019

HOST	DATE (2019)	LOCATION	ATTENDEES
Treaty 8 Chiefs of Alberta	April 10 & 11	Edmonton	30
G4 (Tsuut'ina & Stoney)	April 23 & 24	Calgary	24
Blackfoot Confederacy	April 23 & 24	Calgary	~35
Yellowhead Tribal Council	May 21 & 22	Edmonton	108
		Total Participants	**197**

Each Community Engagement host wrote a separate report on the findings of their engagement session. The findings of the hosts' reports were amalgamated, analyzed, and developed into another document entitled, Treaty Region Engagement Report, which was delivered to AFNIGC in August 2019.

Methodology

Each community engagement session featured small and large group discussions prompted by a slate of questions set out by the individual host organizations. Each session was hosted by a professional facilitator. There was a great variety in the types of questions asked with some being more broad-based and others being more specific.

The questions and group discussions generally focused on expected outcomes, recommendations, the appropriate implementation of the IELCC framework, increased funding, and a governance structure for improved program delivery. Presentations were made by a variety of government representatives who helped inform the participants on the funding envelope, prior actions, and program priorities.

The community engagements were hastily organized (due to a rushed timeline) and Treaty No. 6 participants stated that the time allotted for discussion was insufficient. Treaty No. 7 community engagement participants noted that the sessions did not include all stakeholders with important input on the AHSOR and FNICCI programs.

Community Engagement Results

These sessions featured aggregate results of various communities and representatives from throughout Alberta's First Nations. Key themes were identified but individual topics were not captured. IELCC programs face a vast range of issues and further engagement would have been useful in identifying all of the issues and challenges experienced.

The three primary concerns[3] to emerge from these sessions were: inadequate program funding, an increase in special needs children attending the programs, and inadequate and unsafe facilities.

Inadequate Funding

Participants stated the allocation of funds was not in line with the reality of running the IELCC programs. Communities needed more input into funding allocation with independent control of resources and funding. Further, the lack of long-term funding inhibited multi-year program planning.

Special Needs Programming

Participants noted an increased need for tailored services for children with special needs, high needs, and disabilities, including autism, FASD, ADHD, and behavioral and speech concerns. Support for special-needs students and additional training for the teachers and care givers was recognized as an emerging area of need and concern. Few of the existing care workers or Head Start teachers have the required equipment, training, or manpower to adequately care for special needs students.

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[3] Other concerns were raised in the community engagement session with only the primary issues highlighted here. Please see the complete Community Engagement Report for a more fulsome reporting of those sessions.

Inadequate and Unsafe Facilities

Head Start and Child Care programs are lacking satisfactory and safe facilities with adequate space, storage, and specialized learning materials. The current facilities were not meeting the needs of the IELCC programs and the programs had inadequate funding to address these concerns. The second deliverable was a Literature Review.

Deliverable #2:
Literature Review

A Brief Description of the Indigenous[4] Population in Canada

Higher Percentage of Indigenous Young Children

Nearly 1.7 million people identified as Indigenous in the 2016 Census of Canada. This means Indigenous people were 4.9% of the Canadian population which is up from 3.8% (or 1,172,790) in 2006 to 4.9 (or (1,673,785) in 2016 (Statistics Canada, 2017).

The population increase in 10 years was 42.7% or more than four times the growth rate of mainstream Canada (Statistics Canada, 2017). Figure 1 shows that as the Indigenous population in Canada has a higher percentage of children under the age of 5 than the non-Indigenous population, ECE is a particular concern for Indigenous children and it is very important to focus on ECE for Indigenous populations (Preston, et al., 2011).

Figure 1: Percentage of Children under Five years-of-age by Indigeneity, Canada 2016
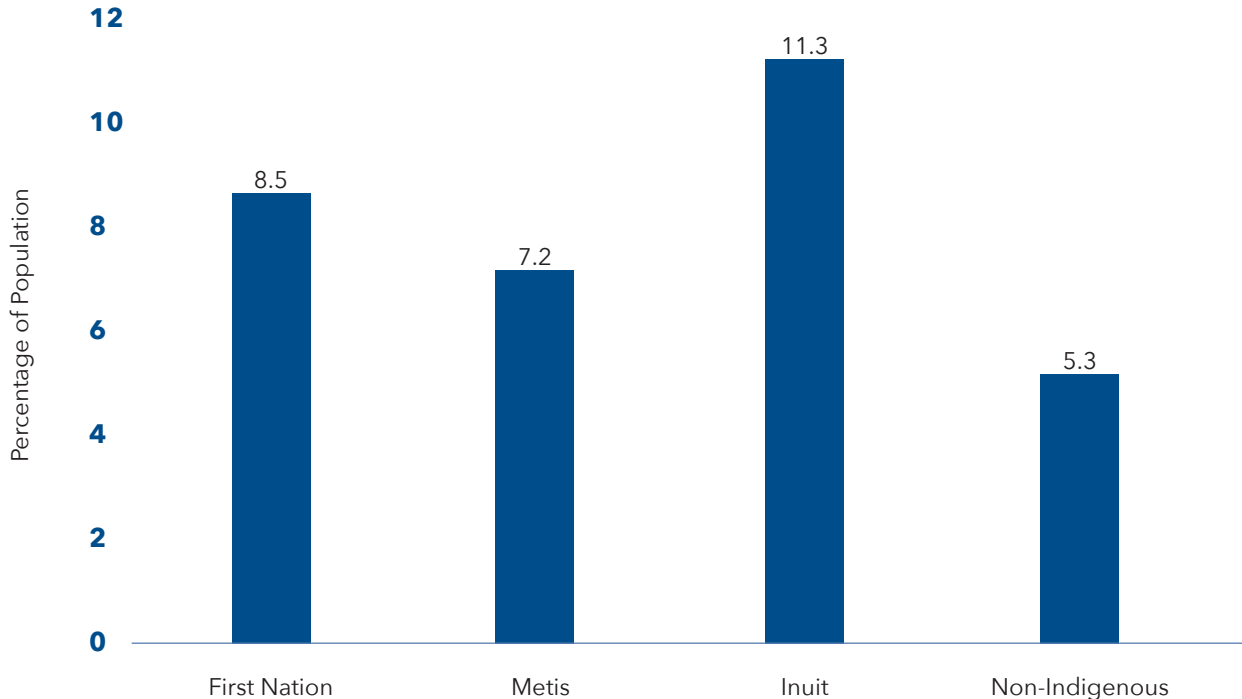
Note: Excludes census data for incompletely enumerated Indian reserves or Indian settlements. Source: Greenwood, et al. (2018)

[4] *The term 'Indigenous' is used throughout this paper to refer inclusively to all First Nations, Inuit and Métis peoples, except when 'Aboriginal' or "Indigenous" is used by source documents.*

A Brief Description of Indigenous People in Alberta

In Alberta, there were 29,750 children aged 0-5 for whom Aboriginal identity was reported in the 2016 census. There were 17,765 First Nations children, 11,239 Métis children, 307 Inuit children, and 439 children who were reported to have multiple Aboriginal identities (Statistics Canada, 2016a). This equates to 9.2% of all Alberta Indigenous people, while non-Indigenous children aged 0-4 make up 6% of the Alberta population (Statistics Canada, 2016a, 2016b). Figure 2 shows the Alberta population by age group and Indigeneity. The data shows a larger proportion of the Indigenous community are in the youngest age category (aged 0-5 years). The youngest age category contains only five-year cohorts while the others have at least 10 years in each cohort.

Figure 2: Age Cohort Percentage of Alberta Population by Indigenous Type, 2016
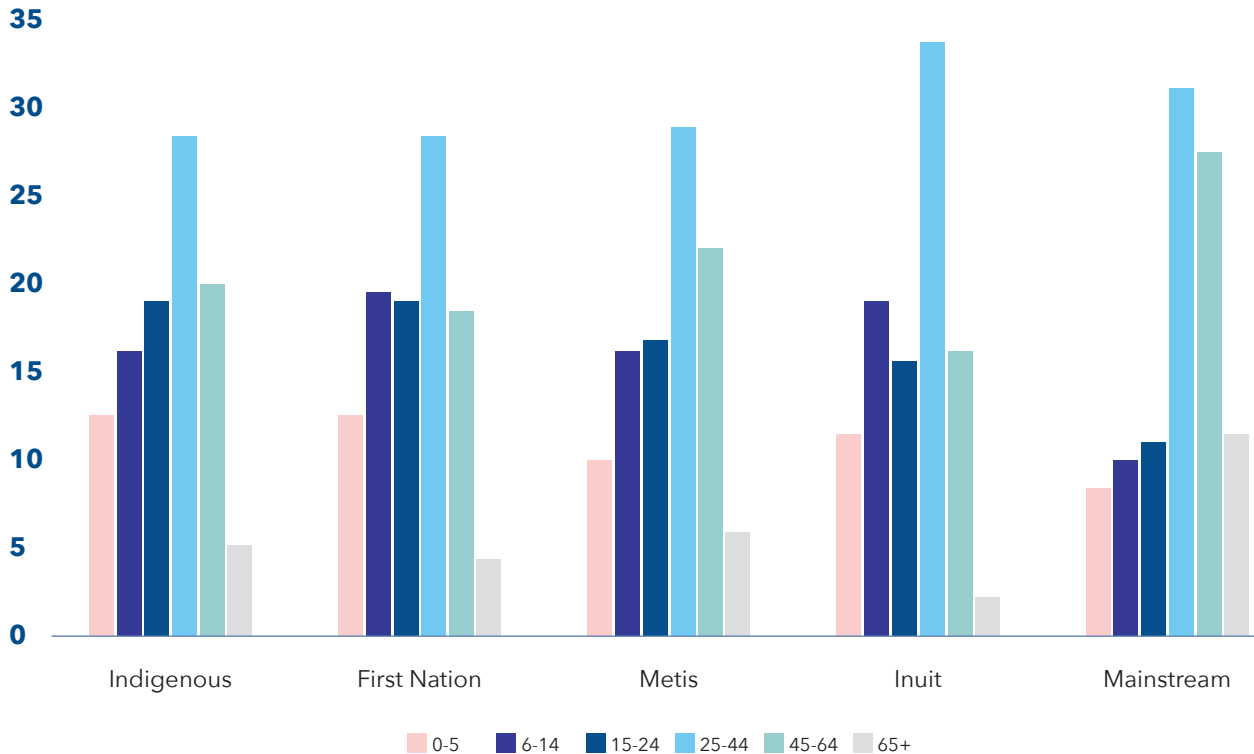
Source: Census of Canada, 2016

Indigenous Families and Communities

Indigenous families have characteristics that can be either strengths, challenges, or both. When contrasted to non-Indigenous families, they are younger, larger, and include more extended family members. They are also more often lone-parent or foster families (Halseth & Greenwood, 2019).

There are real and negative impacts on child development that stem from Indigenous families' generational disruption caused by the Indian Residential School system, the Sixties Scoop, and ongoing inequities. These include:

- high rates of child poverty in Indigenous communities (Ball, 2014; Halseth & Greenwood, 2019)
- low rates of educational attainment (Halseth & Greenwood, 2019)
- poor, overcrowded housing and food insecurity (Halseth & Greenwood, 2019)
- lower rates of employment, and therefore income (Halseth & Greenwood, 2019)
- difficulties parenting children (Dion Stout & Kipling, 2003; Mussell, 2005)
- family and inter-personal violence (Dion Stout & Kipling, 2003; Mussell, 2005)
- mental health issues and addictions (Boksa et al., 2015)

These impacts can lead to poorer health and educational outcomes for Indigenous children. Although educational outcomes for Indigenous youth have been improving, they are still behind non-Indigenous youth when it comes to high school completion rates (Ball, 2014). Those living off-reserve had higher rates of completion than those living on-reserve (Ball, 2014).

Compared to non-Indigenous children, Indigenous children also have poorer health outcomes. This affects both their development and their life potential (Ball, 2014; Greenwood et al., 2018; Reading & Wien, 2009). Social determinants of health are of particular importance to Indigenous children. These can be separated into categories such as: employment, income, housing, health behaviours, education, food security; intermediate (health care systems, educational systems, community infrastructure, resources, and capacities); and distal (colonialism, racism, social exclusion, self-determination) (Reading & Wien, 2009). These determinants are complex; they intersect and interrelate. Taken together, they create an integrated view of Indigenous health that is key to a child's development. Given these systemic challenges for Indigenous children, there is a greater need for ECE programs in Indigenous communities. More evidence was needed to determine social risk, social cognition, child health screening, and family outcomes (Anderson et al., 2003). The next section explores the Head Start Program.

Introduction to the Head Start Program

The Head Start program originated in the United States of America in 1965 to reach children from disadvantaged backgrounds due to poverty (Anderson, et al., 2003). Over its first 35 years in operation (1965-2000), it served 20 million children. It was introduced into the UK in 1998 under the name of Sure Start (Ball, 2008).

In the US, American Indians and Alaskan Natives are also part of the Head Start program as part of Region XI, where they comprise 81% of the program participants. (U.S. Department of Health and Human Services, 2018).

Aboriginal Head Start in Canada[5]

Aboriginal Head Start is a national community-based early intervention program for pre-school children. The program is a structured, half-day preschool experience for children between the ages of three and five years old. There are two distinct Aboriginal Head Start programs in Canada: Aboriginal Head Start in Urban and Northern Communities (AHSUNC), and Aboriginal Head Start On-Reserve (AHSOR).

Aboriginal Head Start in Urban and Northern Communities (AHSUNC) Program

The AHSUNC program was the first to be launched in 1994-95 as a four-year pilot program with a budget of $87.3 million (PHAC, 2012b; Ontario Aboriginal Head Start Association, n.d.). It was designed to deliver services to First Nations living off-reserve, Métis, and Inuit living in urban and northern communities. This was in response to a promise outlined in the Liberal Party's Red Book "Creating Opportunity" launched in September 19, 1993 (Ontario Aboriginal Head Start Association, n.d.). Community consultations took place in 1994 in 25 cities and involved over 300 Indigenous organizations.

It was renewed in 1999-2000 as an ongoing program with annual funding of $24 million (PHAC, 2012b). The AHSUNC program currently receives approximately $41.3 million per year (PHAC, 2012b). As of 2016, there were 4,800 children and their families participating in an AHSUNC program at one of 134 program sites across Canada (PHAC, 2016).

Aboriginal Head Start was developed primarily on the information gathered from the cross Canada consultations, as well as child development research, including research and evaluations of the American Indian Head Start Program. Its goals were to provide holistic support to both children and their parents, and to provide children with positive self-esteem, instill in them a desire for lifelong-learning and provide them with the opportunity to develop to their full potential as young people and throughout their lives (Ontario Aboriginal Head Start Association, n.d.).

[5]   *Excerpt from Indigenous Early Learning and Child Care Literature Review, 2019*

Curriculum

National Aboriginal Head Start principles and guidelines were developed in 1996 and revised in 1998 that outlined the program parameters (Aboriginal Head Start Urban and Northern Initiative: Principles and Guidelines, 1998). There were six mandatory program components:

- Parental Involvement
- Culture and Language
- Education
- Health Promotion
- Nutrition
- Social Support

Program standards were also developed in 2003 by Aboriginal Head Start programming representatives (Health Canada, 2003). These standards discussed program development components such as program services, administration, nutrition, facilities, and human resources as well as education services.

Teaching children about their culture, traditions, and language was of particular interest to Indigenous communities and was supported by both AHSOR and AHSUNC. This teaching creates a holistic foundation and interconnectedness for the creation of both individual and collective identities at a young age (Auger, 2016; Kirkness, 2000; Kirmayer et al., 2014; Oster et al., 2014). When children learn their language and culture at an early age, this can act as a protective factor which can positively impact their mental and physical health (McIvor et al., 2009). Kirmayer et al. (2014) found that this can be an important element in healing from inter- and intra-generational traumas such as Residential Schools, Sixties Scoop and others.

BC AHSUNC

BC runs its AHSUNC program through the Aboriginal Head Start Association of BC (AHSABC), the only province to do so; although Ontario also has a provincial association. BC's association has been in place since 2001 but the AHSUNC program and has become a leader in developing resources and best practices, while sharing them nationally. They also provide training for leadership administration and management, as well as external assessment of programs using the Early Childhood Environment Rating Scale (ECERS-R).

Aboriginal Head Start On-Reserve (AHSOR) Program

The AHSOR program was an expansion of the AHSUNC program and was announced in 1998 for Indigenous children living on-reserve. Funding implantation for this program was an issue, as Ontario, Manitoba and the Pacific regions refused to respond to the funding request for proposals (RFP) (Barrieau & Ireland, 2003). First Nations in Atlantic Canada, Quebec and Saskatchewan took a universal funding approach so that 100% of their First Nation communities received funding, but not as much per capita as those who received funding from the RFP (Barrieau & Ireland, 2003). There were over 14,000 First Nations children on reserve who participated in an AHSOR Program with an annual budget of more than $48 million (Government of Canada, 2018b).

BC AHSOR

Similar to the AHSUNC program, in BC, ASHOR is delivered by the First Nations Health Authority, as they had taken over responsibilities for health care delivery from the federal government.

Effectiveness

There have been many studies of both Aboriginal Head Start programs, with many showing that the program was effective and meeting its goals in a similar way to the US Head Start program. The program funder, Public Health Agency of Canada, reaffirmed its effectiveness in 2012 and 2016, providing the following as proof points:

- AHSUNC participants showed significant progress in school readiness skills over the course of the school year (PHAC, 2012).
- The AHSUNC program is having a positive impact on school readiness skills (PHAC, 2012).
- AHSUNC is reaching children in the greatest need, as participants of Indigenous-focused early child development programs experienced a significantly greater number of socio-demographic risk factors than those in non-Indigenous early child development programs (PHAC, 2016).
- Despite greater socio-demographic disadvantages, Indigenous children and youth who participated in AHSUNC have similar education and health outcomes as their peers (PHAC, 2016)

Aboriginal Head Start was mentioned as an example of successful Indigenous ECE interventions and programs by Halseth & Greenwood (2019). AHSUNC was also mentioned in the 2014 Report of the special rapporteur on the rights of Indigenous Peoples in Canada by James Anaya (UN Report):

> *The Aboriginal Head Start in Urban and Northern Communities program has shown achievements in eliminating disparities between aboriginal and non-aboriginal children in terms of school readiness; unfortunately, this program reaches less than 10% of aboriginal children (Anaya, 2014).*

Jessica Ball (2008) noted that although more research was need to determine exact effects of the Aboriginal Head Start program on children's quality of life and developmental outcomes, the program has much potential with a "number of positive and promising features that are highly congruent with principles advocated by many Aboriginal organizations." Six years later, she felt they were reaching their potential as:

> *positive contributions with even greater potential to function as sites for integrating and coordinating health promotion, disease prevention, early identification, referral, after-care and community development to improve children's overall quality of life (Ball, 2014).*

De la Cruz & McCarty (2010) called Aboriginal Head Start a "highly beneficial intervention" after evaluating an off-reserve AHSUNC program in Alberta. They found that Aboriginal Head Start children match non-Aboriginal Head Start children in verbal and language abilities and academic tasks, with the Aboriginal Head Start children better at word reading and math operations.

Longer-term effects showed that Aboriginal Head Start children were keeping up with their classmates. A 2008 longitudinal evaluation of Aboriginal Head Start programs in the Northwest Territories found that children were "holding their own" when measured against non-Aboriginal Head Start children in elementary school (Chalmers and Associates, 2008).

The Aboriginal Head Start Association of BC also analyzed 2015 Youth Nomination submissions of alumni of their programs, which were overwhelmingly positive (Martin, 2015). Highlights for the students included learning Aboriginal cultures, traditions and languages. Some alumni had gone on to high school completion, post-secondary education or are now carrying on a career. Former students also felt their participation gave them a strong foundation for school readiness, and a healthy lifestyle from the physical activities and nutrition education. They understood and valued the support they received from parents, community, and teachers in providing them a sense of inclusivity and a safe and supportive environment. They also felt the program helped their social development, and many are now role models.

Hare (2011) studied five rural and urban AHSOR program sites in BC. The results showed that the goals of the program were being met. The report noted, in particular, that Indigenous children learned "ways of knowing and being specific to their communities and Nations, drawing on the repositories of indigenous knowledge that include land, ceremony, oral tradition and elders, families, and community members."

Outcomes

The outcomes of the Aboriginal Head Start program were noted in many reports (ASHABC, 2017; Jack et al., 2011). Table 2 shows that there were benefits for children, their parents, communities, staff and Elders. Gerlach & Gignac (2019) focused on AHSUNC's outcomes for parents in BC programs by conducting 26 semi-structured interviews with parents, Elders and program and family workers.

Table 2: Aboriginal Head Start Program Stakeholders and Outcomes

STAKEHOLDERS	OUTCOMES
Children	- Sense of cultural identity builds confidence, self-esteem - Social skills - helped in character formation - School readiness - Lifelong friends - Valued part of the community - Medical/dental attention - Were successfully screened for development issues (speech delays, etc.) - Spiritual/holistic learnings - Health and good eating habits
Parents	- Sense of belonging and support - Learned parenting skills and habits - Confidence to pursue further education - Became advocates for their family - Learned, reconnected and shared their culture - Many parents stayed involved with programs as volunteers or have become ECEs
Communities	- AHS centres served as a community hub – the new village – for those in urban areas - Educational success of Aboriginal children increased - Identity builds lifelong desire for learning - Empowered parents to become more active in child's development - Families create long-term friendships - Networking with community services and opportunities - Shared culture with others after leaving the program - Raised awareness and cultural safety for extended communities
Staff	- Rewarding, meaningful work - Created sense of community with other AHS programs - Empowered by training and skills - Sought own educational pursuits - Developed deep connections with AHS families and community – can help in other aspects of their lives
Elders	- Sense of belonging to a family/community - Felt respected and valued/surrogate grandparents - Helped healing own childhood experience of Residential School - Learned about other cultures by sharing stories, culture and language - Had physical and emotional needs supported by community
Non-AHS community members	- Can easily spot AHS children in kindergarten - Has improved their lives (bus drivers, program workers, teachers)

Source: Gerlach & Gignac (2019)

They found that it was important for staff and parents to take relationships very seriously and support the whole family.

The third deliverable is this Environmental Scan. This section begins with a brief definition of an Environmental Scan, an explanation of the purpose of an Environmental Scan and a model showing the component parts of an Environmental Scan (Sharma, 2017).

Deliverable #3: Environmental Scan

What is an Environmental Scan?

An environmental scan is a planning tool used to make decisions about the future. It involves the process of gathering information about an event, organization, or situation and their relationship between an organization's internal and external environments (Thomas Edison State University, 2020). It provides baseline data. It includes a listing of best practices and tries to determine the benefits and challenges manifesting in an organization or process. The following adapted six-component model was used to examine the data gathered from the Alberta IELCC program sites.

Environmental Scan Components:[6]

1. *Environmental scanning aids in decision-making:*
   Decision-making is a process of selecting the best actions from a variety of options. An environmental scan is an important tool in fully understanding a situation and helping in decision¬ making. Success of the program depends upon the precise decision-making ability. An environmental scan enables a program to select the best options for sustainability and success.

2. *Strengths of Program/Service:*
   Strengths of the program means the program's capacity to optimize its resources and deliver the most efficient and best possible service. An analysis of the program's internal environment helps identify its strengths. After identifying the strength, the program must try to consolidate or maximize its strengths by further improvement in its existing plans, policies and resources.

3. *Weaknesses of Program/Service:*
   Weaknesses means the limitations of the program. Examining the internal environment helps to identify not only the strengths but also the weaknesses of the program. A program may be strong in certain areas but may be weak in others. For efficiency and effectiveness, the weaknesses should be identified so they can be addressed.

4. *Opportunities of Program/Service:*
   Environmental scans help to identify opportunities for the program. These opportunities can be new funding prospects, donations to the program, sponsorship, resource sharing, partnerships, and/or alliances with complementary program or agencies.

5. *Threats to Program/Service:*
   Programs are subject to threat from various factors. Environmental scans help to identify threat from the external environment. Early identification of threats helps to mitigate them and adjust for improvement.

6. *Optimal Use of Resources:*
   Environmental assessment helps to make optimal use of scarce human, natural and capital resources. Systematic analyses of the program environment helps to reduce waste, redundancy, and overlap.

Purpose of this Environmental Scan

The environmental scan serves as an analytical tool used by decision-makers to make plans for the future. It provides information about the conditions of a program, organization or agency and helps to identify and to describe the environments, circumstances or issues that may affect the development plans (Fordham, 2020).

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[6]   Adapted from Akshay Sharma (2017). "Eight Important Needs and Importance of Environmental Scans in Business." Entrepreneur. Retrieved from https://www.linkedin.com/pulse/8-important-needs-importance-environmental-scanning-business-sharma on 22 May 2020

The main goal of this environmental scan is to provide current information on the conditions of Indigenous early learning and Child Care (IELCC) programs in Alberta. This information will assist First Nations and other Indigenous early intervention program providers to subjectively tell their successes and challenges they have encountered running their program.

Environmental Scan Methodology

This project followed the Ownership, Control, Access, and Possession (OCAP®) principles as set out by the First Nations Information Governance Centre (FNIGC). Participating First Nations own, control, have access to, and have possession of the data; and authority over its future use.

Environmental Scan data was collected using a single survey with multiple data collection methodologies (to suit the needs of each respondent). Password-protected Samsung Galaxy tablets running the Android operating system were loaded with Voxco Mobile Offline. Voxco Mobile Offline is an Android application that connects to Voxco Server (the software used by Alberta FNIGC to create surveys). Mobile Offline is extremely useful in that it can be used with or without an internet connection. The majority of interview participants completed the survey using the offline method as internet was rarely available at the Head Start or daycare sites. Mobile Offline stores the survey data on the tablet until such time as a secure internet connection becomes available. Data is then immediately sent to the server using a secure connection and is simultaneously deleted from the tablet. Most respondents completed the survey on their own, while others preferred an interview format. Due to time constraints and scheduling a few sites chose to do the survey online. The survey instrument was made available to all and administered at more than 114 sites (AHSUNC, AHSOR, and Aboriginal Daycares across Alberta).

This primary data was analyzed both quantitatively (through looking at the numbers) and qualitatively (through looking at the narrative stories). All responses to the survey were guaranteed to be both anonymous and confidential; no one was able to see the survey responses beyond the consultant, the interviewers, and those who coded the data. An additional level of anonymity is that findings were presented in aggregate form so that no one person or agency can be individually identified. The survey responses are stored on Alberta FNIGC's secure servers. All other data were also returned to Alberta FNIGC for safe-keeping. The following are the research findings from the questionnaire.

Research Findings

The information for this section of the report is drawn from a semi-structured interview schedule that served as the basis for the study (see Appendix A). Among other questions, the 168 participants were asked about their age, gender, Indigenous affiliation, credentials, and length of employment in the early learning and child care field. These questions were aimed at describing the subjective and individual answers given by the respondents. Trends in the data, such as the similarities and differences between the people who are employed in the Indigenous early learning and child care programs in Alberta will be reported. The research findings are separated into the following categories: the employees, the program, the workplace, and the Head Start curriculum components*

The Employees

One hundred and sixty eight (168) Alberta Indigenous early learning and child care workers participated in this study. Of the participants, the vast majority were women. Approximately 95% (or 159 of 168) were female while the remaining 5% or nine individuals were male. This is consistent with daycare and other early learning and child care data that shows approximately 98% of child care workers are female (Langford, 2011).

The interviewees were placed into age categories. There were six individuals (or 3.5%) who did not give their age. This reduces the number of valid cases from 168 to 162. The following describes the ages of the valid cases:

Figure 3: Age Range of Early Learning and Child Care Employees

Legend: <20 | 20-25 | 26-30 | 31-40 | 41-50 | 51-60 | >61

Values: 3.0%, 13.0%, 9.5%, 32.0%, 18.5%, 15.0%, 6.5%
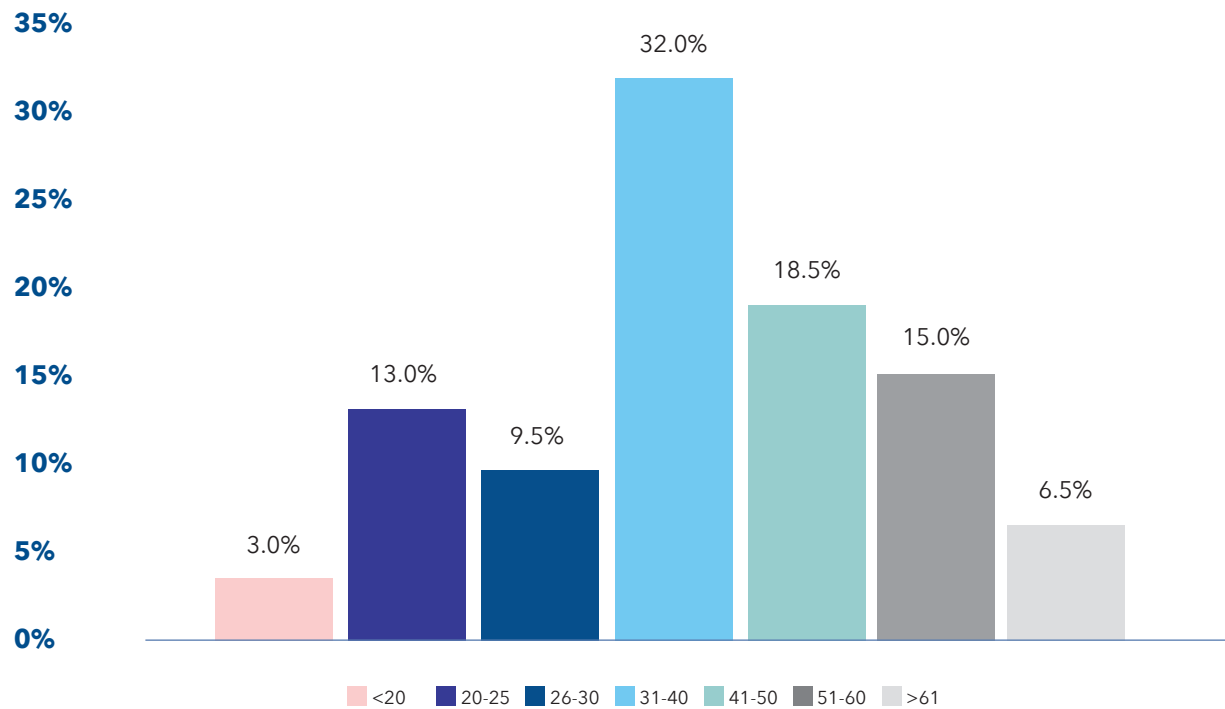
Ages for the Alberta Indigenous early learning and child care workers who participated in this study ranged from 18 years of age to more than 70 years.

The vast majority (94%) of the respondents were Indigenous ; of these 84% were First Nation; 6% were Metis; 4% were non-Status Indians, and 6% were non-Indigenous individuals. Approximately three quarters (71%) of respondents lived on reserve while the remaining 29% lived off reserve.

Education
The educational attainment level for the respondents ranged from those who had not completed high school to some who had completed graduate degrees. Undergraduate degrees, in a variety of disciplines, were held by nine individuals.

The respondents' level of child care certification varied. Three had child care assistant certificates, two had teaching assistant certificates, and 77% had early childhood certification; with 30% holding a level one certificate, 20% holding a level two certificate, and 27% holding a level three certificate. (See Appendix D for Child Care qualifications.)

Fifty-eight percent of the respondents planned on upgrading their certification. Approximately half of the respondents who planned to upgrade their certification wanted to start their coursework in September 2020. Some were already enrolled in online courses that were being offered by various post-secondary institutions. Twenty-eight percent of the respondents did not know whether or not they would upgrade their certification level.

Many of these had just begun their employment at a Head Start program or a daycare. Some said they would take a wait-and-see approach to see whether they could either obtain funding for further education or whether they would stay at their job. Most of those who stated they would not upgrade their certification were already at the highest level of training–level III. When asked what the barriers were to upgrading their certification participants

spoke of the uncertainty of programming. Many were eager to begin training to upgrade their certification as soon as possible. Upgraded certification was helpful in securing their employment opportunities but also to increase their wages.

Upgrading their certification was stated as a difficult process for many of the participants. The period of training is long and it needed to fit in around their jobs. This means that people had to take evening or weekend classes. Those who are pursuing upgraded certification were very dedicated to completion.

The Programs

When asked about the type of program that they worked in, 60% stated that they worked in a daycare; while 37% stated that they worked at a Head Start. Three individuals said that they worked at a combination Head Start and daycare and the remaining two did not respond to this question.

The program or service could be located either on-reserve or off-reserve according to the specifications of the federal funding agencies -- Aboriginal Head Start On Reserve (AHSOR), First Nation Indigenous Child Care Initiative (FNICCI) and Aboriginal Head Start in Urban and Northern Communities (AHSUNC). Of those who participated in this research, 145 worked at on-reserve programs, while 21 worked at off-reserve programs. The remaining two programs were located on Métis settlements.

Some participants stated that they hold multiple roles in either the daycare or the Head Start program. For example, one person mentioned that she was the bus driver, the janitor, and a child care worker. She stated that she did these multiple positions for two reasons: that the pay was low and doing more than one job made it possible for her to support her family; and secondly, that the budget would not allow a full-time person for each of these jobs.

A disproportionate number of the respondents worked in programs in the Treaty Six region - 60%. Treaty Seven programs had 23% of the respondents and Treaty Eight had 17% of the total.

When asked about the location of the program, 49% of the respondents worked in a rural setting (located between 50 km and 350 km from the nearest service centre with year-round road access); 46% of the respondents worked in an urban setting (located within 50 km of the nearest service centre with year-round road access); 4% of the respondents worked in a remote setting (located greater than 350 km from the nearest service centre with year-round road access); and the remaining three participants lived in an isolated setting (sometimes called 'special access' with no year-round road access.)

As a rule, daycares run five days a week for the entire year. The hours vary but they primarily run from 7:00 a.m. to 6:00 p.m. The Head Start programs can begin as early as late August (with most starting in September) and usually run until June.

Differences in Program Mandate and Services

There were differences in both mandates and functions between the Head Start program and daycare. Daycare is funded by the First Nation Child Care Initiative (FNICCI), while Head Start is funded by Health Canada. Of the participants, 58% worked in a daycare where they worked year-round. These workers generally worked five days a week with shifts that began as early as 7:00 a.m. and stayed until 6:00 p.m., which means facilities were open for about 11 hours per day. Head Start workers (76 respondents) who participated in this research worked generally from fall until spring. Approximately 40% of the Head Start programs ran from September until June while an additional 5% ran from August to May.

Head Start's mandate includes six components: Nutrition, Language and Culture, Health promotion, Parental and Family Involvement, Education, and Family and Social Support. Daycare, in contrast, did not appear to have these components as their primary mandate.

One of the issues with mandate, service, and operational model had to do with the length of time the children were under the care of the workers. Head Start, for the most part, was a half-day program whereas daycare could be a full-day program depending on the age of the child.

Further, one of the highlights of Head Start is that the children are picked up from their home and dropped off after the program. Daycare does not provide this service since parents or guardians are expected to drop off their children in the morning and pick them up at the end of the day. This means that transportation is the responsibility of the parent for children attending daycare.

The Head Start programs primarily served three, four, and some five-year-olds while the daycares served infants to school-age children. Only 43% the respondents stated that their program or service was filled to capacity. The respondents were also asked whether there were any children on the waiting list. Of those who responded 28% had children on a waiting list.

Stand Alone or Partnered Program
The daycare centres and Head Start programs were located in a number of places within their community. The vast majority of the programs (79%), were standalone, while the remaining 21% were combined with other types of programs or agencies. Some programs were housed in schools, community centres, daycares, health centres, and education departments. Two locations were not reported in this category.

For those who responded to this question, the most common partnership was between Head Starts and daycare centres. On-reserve programs were more likely to be governed by another department on the First Nation. The respondents stated that there were benefits and drawbacks of being combined with another service or agency.

There were benefits and drawbacks to these locations within the community. For example, standalone programs had autonomy and many had complete control over their own budgets.

Benefits of Partnered Programs
Being involved in a partnership with another service or agency was viewed as positive by many participants. There was an opportunity to share resources and equipment. This was seen as saving funds and an opportunity to have access to more programming and resources than they would have if they were standalone.

There were numerous benefits to having a partnership with another department or agency, including access to more funding and support as well as having access to language programs and fluent Indigenous-language speakers. Access to the Early Learning and Child Care (ELCC)[7] program practicum students helped alleviate issues with funding for staff and also helped to fill gaps when staff were absent from work.

Access to other staff also helped to lower the staff-to-child ratios. Some of these individuals were trained in areas that aided with the identification of high-risk behaviours and developmental delays in children.

Partnerships with other agencies also meant that they had more resources and better access to elders that worked in the other agency. They were also able to co-sponsor events such as cultural camps, round dances, giveaways, concerts, and graduations.

Affiliation with another agency also allowed for access to community resources, training, and learning opportunities for the workers. In the case of a partnership with a school, the Head Start children were in close proximity to their older siblings or other relatives. The transition between Head Start and kindergarten was also easier because the child was accustomed to the location of the school and were more aware of the timetable and other expectations.

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[7] *This statement makes reference to practicum component of the Early Learning and Child Care program that is offered by Grande Prairie Regional College.*

Many believed that the benefits of the combined program overshadowed the negative aspects. Although some of the programs are partnered with another agency or service, this does not necessarily mean that they occupy the same site. Difficulties can arise when the two programs are governed by one entity but do not share the same physical space.

When administration of the program was undertaken by another agency it can be beneficial in saved time. However, issues can arise when permission must be obtained before expenditures or changes can be made to the program. This means that autonomy and decision-making powers can be lost.

The benefit of a partnership between Head Start and a daycare is that the children can attend Head Start programming when they turned three-years-old. In some cases the partnering agency takes care of the paperwork for the other. This means that funding can be pooled to hire a full-time administrator.

Drawbacks of Partnered Programs
Drawbacks to a combined system included limited space because the area had to be shared. It was also difficult in some partnered programs because various events occurred at the same time. Noise levels could be an issue if children were having quiet time. Some commented that the tone, volume, and type of language used by others in the shared space was at times inappropriate in the presence of small children.

Some in the partnered programs mentioned they had lost control of their budgets and had to have approval from others for expenditures. Some also commented that they did not know the exact amount of the budget that was received for their program and questioned whether they received all of the funding to which they were entitled. Some believed that they were being "short changed." Some commented that they paid a higher rent when partnered with another program.

Sharing the same location can be problematic when there is limited space. Issues around storage and square footage available for various activities can impinge on the success of the program. The timetables in both agencies and services may need coordination. For example, if the children in the daycare are having quiet time and the children in the Head Start program are playing a game that generates a lot of noise and laughter, it can be problematic.

Special Requirements for Attendees
Respondents were asked whether they were any special requirements for children enrolled in their program. Of these, 59% said that their program had special requirements for admission. The special requirements for enrollment included:
- Being off the bottle by age two
- Children who were in the 3 to 6-year-old room had to be potty trained as well as all of the children who attended Head Start
- Be free of illness, have good hygiene, and dress appropriately for the weather
- Have indoor shoes, extra clothes, and blanket
- In the daycare, the children had to be walking before they could move into the toddlers' room
- Immunization was a must for the children
- Being potty-trained was essential for attendance at Head Start. However, some children were given a grace period in which to become potty-trained. The rationale for this decision was that children who were slow to potty-train would enjoy the program so much that it would serve as an incentive for the child to reach this goal.

Special Needs Attendees
Participants were asked whether they had adequate resources to serve special needs children. Only 56% stated that they had adequate resources. Purchase attends answered as follows. The most common request from respondents was to receive more training in dealing with special needs children. Respondents also mentioned needing special equipment, as well as various experts - such as physical therapists, behavioral consultants, and

speech pathologists. Equipment and an enclosed area within the facility were also required. Supplies such as sensory blankets, weighted blankets, and fidget spinners were other items mentioned.

Building

In many cases the buildings were old and required either replacement or major renovations, such as upgraded electrical power or stronger, wider doors. One respondent reported that they had been operational for many years and that while everything was new when they first began to provide the program, it was beginning to wear out as it got daily use. Things needed to be replaced but there was no money in the budget to do it. One respondent commented, "Our ceiling collapsed and we were closed for one month."

The buildings that we have were new when the program began. However, they are now getting to an age where they need major repairs. Repairs to the electrical and plumbing are common. High winds and severe storms are common in the area we live in. This causes damage to the building. For example, a windstorm caused shingles to be ripped from the roof and siding to be blown off. These are expensive repairs and are not part of our budget. The building must be safe for the children and for us as workers.

- Respondent

Workplace

The participants were asked what worked well in the workplace. This information was placed in to four categories: staff, program, curriculum and other. The following are the responses to this question.

Staff

The most common answer for those who responded to this question was that the co-workers got along well with each other and that they could rely on others to be part of a team. Participants stated that their coworkers were committed to their jobs and to the children. Communication between coworkers was effective and efficient. Staff view themselves and others as a community committed to their jobs and felt that they were very kind and patient with the children.

Staff felt they served an important purpose in the workplace. They strove to provide a consistent, high-quality program that included a reliable routine for the children. Participants saw themselves as childcare professionals and were committed to improving their qualifications and other training.

Program

Participants stated that the program was of a high quality and was effective. The program had been honed over the years, which has resulted in a cohesive and sound curriculum. The coordinator also needed the services provided by professional health staff was also appreciated in diagnosing issues with children. They also felt there was an efficient use of floorspace for the various daily activities.

Curriculum

The participants worked together as a team to help develop the curriculum for the children. They reported they engaged in effective communication techniques with a goal to solve problems as a team. The children responded well to the routine set out by the workers and this routine helped the children in their development because they knew what to expect. There were new and innovative parts to the programming which helped keep it fresh and helped to aid the children in their learning. Some commented on the outdoor activities in which the children participated. They believed that fresh air and outdoor activities were beneficial for the children and these

were highly encouraged. They were happy that they had outdoor space for the children to play. Respondents appreciated the amount of thought and planning that went into the program. However, some of the respondents stated that there were gaps in service.

Gaps in Service

The gaps of service were a result of a number of issues raised by the participants. Approximately one-third of respondents believe that there were gaps in-service.

Insufficient Funding

Respondents stated that they were not able to provide parents with extra social supports due to the lack of funding and the costs associated with running programs. Another prominent issue was the need for more staff and especially someone to deal with special needs children.

High Staff Turnover

There was a high turnover of staff reported because of low wages being paid to them at the reserve programs (AHSOR and FNICCI). There were core staff in most facilities, however there was also a group of workers who left after a short time. People were able to earn more money by leaving the Indigenous daycares and Head Start programs and working in non-Indigenous agencies. A shortage of staff was caused by employees being absent from work and not having enough staff to do all of the tasks that are required.
Unsafe Outdoor Play Space

Some reported that no dedicated outdoor play space was an issue for the children. This was problematic in that children could easily be hurt by older and larger children playing in the same space. There were also comments made about the children not having appropriate surfaces for the children to play outside.
Lack of Special-Needs Training

Respondents also mentioned there was an inability to include special needs children because of lack of training. More space was needed to work with special needs children. They felt one-on-one care was needed for special needs children because they require exclusive care and attention. Caring for special needs children means that a worker would have to be diverted from caring for the other children.

Respondents also felt that the children do not continue with their Indigenous cultural practices when they leave the program. This is partly due to the parents' inability or lack of interest in cultural activities.

Old Technology

Technology challenges reported included a lack of access to WIFI and cell phones as well as older computer systems that needed to be replaced. These higher-priced items were not funded within the program budgets.

Lack of maintenance and janitorial staff

A dedicated position for maintenance and janitorial staff was lacking in many of the facilities. Generally, the teachers and other staff members were responsible for doing the janitorial work. In some programs, employees worked in multiple half-time positions that resulted in full-time employment. For example, a person could be a part-time bus driver and a part-time cook.

Supply Shortage

There was a shortage of all sorts of supplies required to run the program. The cost of supplies such as groceries, gasoline for the bus, utilities, and art supplies kept going up while the budget remained the same.

Credentialism

Child care workers are expected to upgrade and maintain their certification. The situation was seen to be untenable because of the low rate of pay so they were not able to pay for upgrading. Also, there was no money for staff training in the budget. They wondered how their employers could expect staff to upgrade their training when there is no personal or institutional money to support this demand.

Emerging Concerns

A number of emerging concerns were reported by the participants around parental behavior.

Young Parents

There was a concern about young parents who participated in the "party" lifestyle which included drug use. amongst the parents as well as low literacy rates. This led some participants to believe hat their work with the children would not be supported or reinforced at home.

Some reported problems with absenteeism and that young parents did not see Head Start as important. As a result, they did not regularly send their children to the program. Some children were absent for up to a month which meant they were behind the other children when it came to learning and the curriculum. The irony to this situation is that the families who would benefit the most from the program were the ones who were the least likely to ensure that their children regularly attended the program. Further, the children were the ones who missed out on a program that they enjoyed and excelled at.

Special Needs Children

Respondents reported they were beginning to see more special needs children, such as those with speech impediments and autism. One participant stated that they were seeing more children with FAS (fetal alcohol spectrum). This was concerning to them because they did not have the proper training or the required number of staff to deal with children one-on-one. Who will pay the costs for special needs programing, equipment, or other resources for special needs children brings Jordan's Principle[8] into the equation.

Funding

There was great frustration with the level of funding given to the on-reserve programs. Funding was never enough for all their needs and the new funding initiatives are often viewed as "too little, too late." Decisions about childcare, whether Head Start or Daycare are frequently made behind closed doors. This means that child care workers do not have an opportunity to have their concerns publicly addressed or acknowledged by the decision makers. In the reserve situation, the Chief and Council must agree that the entire funding allocation must go directly to the daycares and Head Starts.

Program administrators felt frustrated with "the higher ups" because they believed that they did not receive all of their government-allocated program funding. They wanted direct authority over their program's funding and they did not want to convince "the higher ups" to give them the money that was meant for their program.

Children's Safety

There were concerns expressed about the safety of children. Some communities or areas of town where the programs are situated were not necessarily the safest areas. In some cases there was drug activity and crime which meant used needles were nearby and drug trafficking was occurring. Some reported homeless individuals loitering close to the centre. There were worries about this when the children travelled to and from the centre, but also when the children were playing outside. One respondent also mentioned that if there was the need for a lockdown in the case of an emergency, the building has too many windows to make it effective. In some situations there was drug activity in the home. This meant that people under the influence were in close proximity to the children and this placed them at risk.

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[8]   *For an explanation of Jordan's Principle see Appendix B.*

The Workplace Environment

Participants were asked what they liked about their jobs. The most common answer to this question was that the participants loved working with children. They got to help to develop a young child's skills for the future. Respondents also enjoyed the variety in the work which included new challenges to deal with all the time. They felt the work was rewarding and that they were providing a service that helped families to be successful. There was a feeling of pride that they were delivering high-quality programs to children.

Respondents appreciated the camaraderie that developed between fellow workers. They felt that they could rely on each other and that they could ask for help if they needed it. The majority of the workers stated that it was the people that made the job – their coworkers and the children.

> *"I like the staff I work with and they're very hard workers."*

Support for Employees

Almost all (90%) of the workers said they felt supported in their work from a number of sources including their supervisors and other coworkers. Unfortunately, very few of the people who worked at reserve-based agencies said that they felt supported by local politicians – Chief and Council.

Participants also mentioned support they received from their families: husband, wife, siblings, children, and others. Many remarked that their families knew how committed they were to their jobs and they could ask them for help if they needed.

> *"My director makes sure that my questions are answered or my concerns are dealt with. My co-workers also provide emotional support as well because they are knowledgeable about their jobs and the experience they've gained over the years in child care."*

Most employees said that their supervisor was helpful and understanding. The Coordinator/Director was also seen as someone who wanted to see the employees grow in their positions and supported their continued education and certification. One person responded, "As a child care worker in this facility, I feel we are all a team. I feel supported by my whole team as a unit. It is important to feel safe."

Some individuals stated that they did not feel supported in their work. Some said they felt that they worked in a bubble where people did not know or necessarily care what they did. Further, some commented that Chief and Council had never visited their program.

Brief Description of the Six Head Start Components

The Head Start program has six components. These components are meant to support the child's development and promote healthy families and communities. The components include: Indigenous language and culture; education; health promotion; parental and family involvement; nutrition; and family social supports.

1   Indigenous Language and Culture

This component helps Indigenous children and their families to learn about Indigenous cultures which includes their history, traditions, spiritual practices, folklore, day-to-day skills, societal rules and expected behaviour, and language.

Language is an integral part of culture as it is the vehicle by which cultural knowledge is transmitted from one generation to the next. Language is also used to teach the child the norms of the society. Thus, the child learns the societal expectations that the community will have of him or her. Children learn behaviours that are accepted and those that are forbidden.

The aim is to help instill pride in themselves as Indigenous people and in their heritage and beliefs. Staff members and community resource people use a variety of methods such as conversation, songs, games, and educational materials to teach the children and their families their Indigenous language.

Education
The education component prepares children to enter the formal K-12 school system by teaching the necessary skills and abilities required for academic success. Further, this module supports and promotes a love of learning and a life-long learning practice.

Health Promotion
The health promotion segment focuses on improving the children's health and well-being. It empowers the children, their families and caregivers to actively participate in their fitness and health. The program supports an holistic health viewpoint which provides information and resources for physical (immunization, vision, hearing, and dental) health, emotional, mental and spiritual health for children and their families/caregivers.

Parental and Family Involvement
Parental and family involvement play an important role in this program. Parents and other family members are actively encouraged to become involved in their child's learning process. Parents have the opportunity to be involved in boards, advisory committees, or to participate as a volunteer in an array of special events. These opportunities help the parents create a network of like-minded parents and to increase their skill set. While parental involvement is highly encouraged, program administrators recognize that not all parents have the ability or resources to participate.

Nutrition

The nutrition portion provides the children with nutritional food choices and teaches them about the physical benefits of eating a healthy diet. Traditional and country foods are incorporated into this program when practical and available. Staff and Elders will sometimes include children and their families in gatherings and preparing traditional and country foods.

Family Social Support

Family social support aims to help the child's parents and family gain access to available community resources and agency services. Referrals can be made to appropriate agencies and services. Program staff are often involved in inter-agency meetings to keep themselves up-to-date on changes in services and program availability.

Head Start Curriculum Results

Language and Culture

This component helps Indigenous children and their families to learn about Indigenous language with the aim of instilling pride in themselves as Indigenous people. Staff members and community resource people use a variety of methods such as conversation, songs, games, and other educational materials to teach the children and their families their Indigenous language.

Languages Taught

The Head Start language programs that the participating sites provide for children in Alberta were quite varied. The most common language taught to the children in Alberta is Cree. Blackfoot, Nakoda, Saulteaux, and Dene languages were also taught.

Methods of Teaching

Teachers used basic words from the specific Indigenous language, utilizing pictures of animals and other objects. For example, the language instructors taught the children about the animal and its cultural importance, along with how the word is pronounced. This method helps children remember and understand better through stories attached to the representative word and the object itself. The children were also taught commands, greetings, animals, numbers, shapes, colors, body parts, days of the week, kinship, actions, and prayers.

One program stated that they introduce specific words for a certain time of year or according to season. Another program stated that they label items throughout the classroom with the Indigenous language and had words written in English and Cree on the upper part of the walls of the classroom. An interesting tool used in one program was the cultural literacy bag that children could take home; this included English-Cree translation cards. A variety of methods were used to get the children to hear and practice the words in the Indigenous language. One example was listening to audio resources, viewing pictures, and repetition.

Children learned about culture and language while having fun. Some programs had the children listen to pow wow or drum songs and allowed them to dance however they felt. They were taught the language and culture through play or through games.

Elders and resource people were brought in to help the children learn their language and culture. Elders came to the program to speak their language throughout the day, so children were hearing the language regularly. Some programs had a cultural teacher who came in to sing with the children who converted every song into the Indigenous language.

Some programs had a cultural teacher who converted songs into the Indigenous language and came in to sing with the children in that language.

In order to learn more of the language and the culture, many Head Start programs did a morning smudge and prayed in the Indigenous language. Staff drummed with the children and taught them drum or rattle songs. One Head Start had a male cultural navigator come in to establish and maintain the male connection. He was a male role-model, helping to show the little boys that it was okay and good for males to drum and dance. They also encouraged the little girls to be proud to wear ribbon skirts. One Head Start program stated that their whole curriculum was based around the Seven Sacred Grandfather teachings, which were the guiding principles of being a good person and of relating to others in a respectful manner.

Many of the programs gave the children opportunities to identify, gather, eat, and learn about traditional foods such as a variety of berries and roots, while also learning the Indigenous words for those foods. One program, for example, stated that they prayed in Cree before they ate their food. The children learned traditional activities that ranged from the everyday to seasonal and special occasions.

Most of the cultural learning was done in a group setting. For example, one program used Indigenous languages during circle time. Programs also taught each child individually. Much of the methods used to teach children their language and culture involved parents – either directly or indirectly. For example, the Head Start staff will teach parents traditional parenting through activities like how to make drums, rattles, and regalia.

One Head Start site stated that many of their graduated children have gone on to participate in pow wow dancing because of their Indigenous language and cultural education. These graduated children and their parents are now actively engaged in passing the torch to keep culture alive, especially in the urban community. The staff serve as a resource that teaches not only the children but also the parents about cultural learning.

Benefits to Children
The children were exposed to cultural practices and Indigenous language daily. In many communities this learning continued into kindergarten and grade school. Children learned the basics of their traditional culture and way of life while learning words and phrases. It allowed the children to feel pride in themselves by learning about their heritage and their culture. The children were interested and asked a lot of questions. This gave each child a glimpse into their ancestral traditions. The program gave the children a strong sense of self, supporting the development of their cultural identity - an important aspect of their overall well-being.

The children had the pleasure of seeing and experiencing their own culture. Learning words and getting the chance to learn their meaning and origin helped the children be proud of who they are as Indigenous people. The children also showed pride in their creations. They showed great pride and happiness when parents came to the school and they could demonstrate that they are able to speak in their Indigenous language.

Benefits to Family
Children were able to teach their siblings about cultural practices and the language they have learned. Parents were proud that their children were learning about the culture and language. Many parents wanted to learn as well, so the children can now teach culture and language to their parents; many were excited for the children to come home and teach them what they had learned. This familial language and cultural-learning opportunity also led to the parents taking their children to cultural events and interacting with the children in cultural activities.

Learning language and culture in the Head Start program enables families to continue with language and cultural traditions in their own homes. For example, parents became involved in making regalia; with one respondent stating that their children are proud to have regalia made by their family members. Some parents said that the language and cultural learning that their children have brought home has actually helped them to reclaim their own Indigenous identity. Extended family members were impressed when children greeted them in their Indigenous language.

Benefits to Community

The children's sense of belonging and pride in their culture ripples out to their family and helps to build a stronger connection with their heritage and their community. The entire family had an opportunity to connect with the knowledge holders within the community. It also helped to unite the generations of the families in the community. Children were now able to speak to older people who are more likely to know the language, and therefore could build intergenerational connections.

The language program also provided a resource for people who may not have had access to cultural teachings in the past. Residential schools, the Sixties Scoop, and other societal policies have cut many people off from their Indigenous cultural teachings. The program helped keep the Indigenous language and cultural traditions alive in communities. Some people did not have the opportunity to learn their language and now efforts must be made to revive it. This program gives families many of the supports needed to raise happy, healthy children, revives the learning of family, community, first nation, and territorial history as a whole. All of this helps to break the cycle of child apprehension.

The community was able to learn what Head Start programs have to offer and how they benefit the community. Some people in the community are part of traditional families and they were the most appreciative of the values and traditions that were being taught to the children through the program. One person stated that they collaborated with others in making their presence known in the community and how the programming was helping families through the cultural teachings their children learn. Another person stated that the more children and families engaged in the program, the stronger the Indigenous urban community became and people could therefore develop a sense of community and belonging in an urban setting.

Best Practices:

- Culture is learned in a social environment. It is often learned from people the children know and sometimes family members who can serve as Elders to the program. The children enjoy teaching their siblings and other family members what they learned.
- One the most beneficial practices for learning Language is to make it fun. Children learn best through songs, repetition, and at various times throughout the day. The children learn as a group and as a result do not feel as self-conscious as an adult might feel.

2 Education

Educating children is a primary objective of the Head Start program. It is designed to give the children a Head Start on learning and development before they reach school age. A considerable effort is therefore placed on the education program with particular attention to social skills, developmental skills, and curriculum.

For social skills the children learn: manners, taking turns, sharing with others, patience, interactions, making friends, and finding new opportunities to connect. They also focus on getting the children to learn and understand the concept of self, and how one is socially connected. For developmental skills, children learn to express their feelings and how to deal with their emotions in a positive way. Curriculum learning includes the alphabet, counting, days of the week, how to print their name, and the names of items and animals to expand their vocabulary. The staff also work with the children on speech and language development, and further language acquisition. The very young ones are taught motor skills as well. This is done through sensory-based activities, fine motor skills, as well as small and large gross motor activities. Mobility and coordination are practiced. Developmental milestones are recorded for each child and any developmental issues are reported so they can be addressed.

Most staff state that they use a learning through play system to teach the children. They use a lot of fun activities such as singing and dancing while teaching the children important knowledge and skills. The curriculum is designed to prepare the children to enter the formal K-12 schooling system with activities around social skills and developmental skills to promote school readiness but has the added advantage of curriculum and activities to promote Indigenous culture and language.

The education portion of the Head Start program occurs daily, with the teachers using repetition and regular reinforcement to help the children learn. Teachers will ask questions of the children to extend their thinking and learning. Some activities and events occur less frequently - from weekly or monthly, to special occasions or seasons of the year. Some Head Start programs have supplementary components such as a literacy centre, lending library, or a take-home book bag program.

Benefits to the Child

The education component has numerous benefits for children. In addition to formal learning the children are taught to be respectful and socially conscious so that they are prepared for kindergarten and the school system. They are taught about the concept of self – that they are a unique individual who may have different likes and dislikes than others; this helps them to become more independent and builds their self-esteem. Children also learn how to interact respectfully with others; learning about social and personal space and how to be respectful of those spaces. Motor skills are developed and fine-tuned with daily activities, including enjoying the outdoors and physical exercise. Children learn how to communicate with others and to share their feelings and ideas. Good communication skills allows them to connect with others and to be more participative.

Benefits to the Family

The family benefits from the education program since the children are developing and growing in a healthy and safe manner. The children bring their knowledge home and share it with the family, making everyone proud and building familial relations. Information and knowledge about good nutrition and healthy food choices, or about Indigenous culture and language, brought home and shared by the children can influence the parents on these issues. It also inspires parents to become more involved in their child's learning and that they could develop a routine of fun learning at home. The children learned to be more independent, freeing parents up from the constant attention needed by very young children. The child's increased communication skills meant that their feelings and ideas could better be shared with the family, alleviating some frustration. The child was being prepared for school, making the transition to kindergarten and the school system easier; the child is already used to attending an educational facility and will likely already know many of the other children. Parents learn about their child's developmental milestones and progress, and if any developmental issues arise they can be addressed early on.

Benefits to the Community

The community benefits greatly from the education program since the children are developing well at a very early age, preparing for the formal school system while learning and developing in a safe, healthy environment. The children bring home their teachings - influencing and getting their parents involved in their learning. Children and their parents are better prepared for the children's educational journies. Families and then whole communities come to understand the importance of education and the love of learning is encouraged. Education helped children become positive role models in the community and thereby influenced others to achieve their education dreams. The community benefited when the children and their families get to celebrate graduation. Head Start education programs also helped the community preserve their culture and language as these are learned throughout the curriculum and activities.

Best Practices:
- Learning through play stimulates a child's curiosity.
- Encouragement and age appropriate activities can foster a desire for lifelong learning.

3   Health Promotion

The health promotion program is designed to teach children about a healthy personal lifestyle which includes learning about good hygiene practices, healthy eating, exercise/physical activity, and safety. They also work on manners and social well-being. Staff will read books to the children about personal hygiene and manners. Most sites have posters up on the walls of the classroom to remind the children about good manners and how to treat each other. The children also learn how to clean up after themselves, thereby learning the importance of cleanliness in their rooms and environment.

The program at each Head Start includes many health services such as access to healthcare, dental screening, hearing tests, eye exams, immunization, mental health screening, and checking for head lice. Some programs include bringing in a dental hygienist, speech pathologist, and nutritionist. Staff at one site stated "we also have a nutritionist come to the centre and do learning activities by showing how important veggies are and incorporate them into different recipes. The kids are very intrigued and very interested." Families are encouraged to take their children in for assessments and also to learn about speech and language programs that are available in the community. After assessments have been done, staff will let parents know if a referral is needed for their child.

The children are taught about the importance of handwashing, brushing their teeth, covering their mouth when they cough, and sneezing into a tissue or their elbow. To emphasize the importance of good handwashing, they might use an ultraviolet light to demonstrate the germs left behind if the handwashing was not done properly.

Healthy eating and food choices are a major part of the health program. A Head Start food menu complies with the Canada Food Guide to ensure proper proportions and food groups are offered. The children learn that healthy foods, such as fruit and vegetables, are good for them. They are fed healthy snacks and lunches. Head Starts send pamphlets home regarding healthy food choices. Some sites have a play kitchen that teaches the children about healthy foods. Some sites will prepare a nutritious meal for the family once a month to illustrate the importance of healthy eating. Some also offer a cooking circle program for parents, to teach them the importance of healthy food choices for their children and family.

Some communities have a community garden where the children and their families participate in growing healthy foods; this not only teaches about healthy foods but saves money during harvest time. Head Start programs enter into partnerships with organizations that provide information on health and well-being.

Physical activity and exercise are important for children's health. The Head Start program gives the children time to play outside and enjoy the fresh air. The movement and activity help them to thrive in their learning environment in the classroom.

Benefits to the Children

Children benefitted from the health promotion program because they learn early on how to live a healthy lifestyle; e.g. better food choices, exercising, personal hygiene, and safe practices. This helps increase health outcomes for the children.

Benefits to the Family

Children are learning to live healthy and safe lives while at Head Start, and in fact, are living and eating healthier. The parents can rest assured that their child gets proper daily nutrition – enabling better sleep, better learning, and fewer sick days. The children could be role models for others. Families, including parents, could also learn and be influenced by their children talking about healthy food choices. Children could begin to insist on eating healthy foods at home, and thereby encourage families to be more health-conscious.

Benefits to the Community

When children and their families are aware of and acting upon better, healthier lifestyles the entire community benefits. The community knows the children are safe, clean, eating healthy, and are better able to learn. This collective effort sees to a healthier community, and thus less illness. An additional community benefit is that children are screened for any physical, emotional, or mental health problems at Head Start, making these issues easier to deal with when caught early on. Contagious illnesses can be detected early before they spread too widely. Overall, everyone gets to live in a healthier community where there are healthy children with healthy families.

Best Practices:

- Assessments by professionals is beneficial to diagnosing health issues experienced by the children. Aids and accommodations can be set in place to assist the child if needed.
- The community garden is popular with the children. They learn where their produce comes from and they are interested in watching it grow.
- The children benefit from good hygiene practices that they can use throughout their lives.

4   Parental and Family Involvement

The parental and family involvement program works on helping the entire family to live healthy lifestyles that support child learning and development.

Many of the programs include basic life skills training (including literacy) for the parents. These often consist of budgeting, coping skills, self-help, and ways to increase self-esteem. They help parents build upon the skills and knowledge they already have and add new ones to enhance them. The parents' confidence can grow when they learn to voice their ideas and thoughts about matters. The program promotes positive parenting with a focus on helping parents understand child development, behaviour, health, and safety. This program also includes family training, encouraging families to come together and to support safe, healthy lifestyles that promote learning and child development. There are a variety of parenting classes offered. The program supports parents' active participation in their child's development. This is done through parents' night, once or twice a month. Head Start advertises parent events associated with their programs to get the parents to come out. There are child-parent nights where they do activities together, such as sewing, drawing, painting, and cooking healthy meals.

Awareness and learning about nutrition and healthy food choices are part of parental training. They also learn about efficiency in shopping for food and clothing, and staying within a budget, while still buying healthy, nutritious food. Parents learn about how to prepare healthy meals and snacks.

Many of the Head Start sites also have a lending library to encourage the parents to continue the parent-child learning at home. Videos, books, and other materials can be borrowed. Parents are encouraged to volunteer and occasionally attend regular class times to participate in everyday activities and play. The program also focuses on informing the parents of the child's behaviour throughout the day, the child's likes and dislikes, as well as napping and eating/snacking habits.

These programs also involve learning and celebrating the culture and identity of each parent and their children. This provides and supports socializing and bonding time between the parents and their children as well as with other families and teachers/staff. Some of the evening events are group projects so children and parents interact and work with others.

On parent nights or other gatherings involving parents, the parents and their children can work together to make traditional crafts such as making a vest or shawl, drums, rattles, dreamcatchers, regalia, or moccasins. Sometimes parents work with the children to make regalia or traditional dress that the children wear at the graduation ceremony, showing their pride in their culture and their accomplishments. The parents also have the opportunity to take language and culture classes, thus giving them access to ceremonies and medicine teachings.

The parenting program also includes awareness and training to deal with a safe, loving home and the prevention of family violence. They use an Indigenous focus of traditional parenting, and the idea that no one is perfect, and work on being better persons, parents and community members. Conceptual programs like "love and logic," "North Star," "Triple P," or "Ages and Stages" are often worked in, including ways to support fathers' involvement in their children's learning and development. The program brings parents mutual support and makes them aware of community services and resources available to help prevent family violence.

The frequency of programs varies depending on what course/event is being offered and is limited by available resources, including budget constraints. Some evening courses are weekly, some classes are six weeks in length but may run once or twice a week, or rotate through the year; some courses are only once or twice a year, while other events happen at special times of the year such as Christmas, Easter, Halloween, or graduation. Some programs occur through partnerships with other departmental programs such as Child and Family Services or with Health. Many made mention that budgets are tight and they would like to do more, but do what they can with what they have.

Benefits to the Children

Children benefit from the parental training program because parents take a more active role in learning and development. In the evenings or on the weekend, children share what they learned or worked on at Head Start. This builds on their pride and self-esteem; encouraging them even more. Children also benefit from a safer and healthier home environment when parents learn skills to help them cope and deal with stress so that their reactions do not erupt in violence.

Benefits to the Family

If the family takes an active interest in the children's learning and development the children progress more and feel secure and supported. Families benefit from a safer, less volatile home environment when parents are made aware of and learn about children's behaviour, and the coping skills necessary to deal with stress or things that may go wrong. Families are more able to network and build relations with other parents and families through the activities and events of the parental training program. The program helps parents better understand, deal with, and work toward positive outcomes with their children. Parents could also develop themselves and continue to learn and do more.

Benefits to the Community

When children and families are more healthy, stable, and safe the community naturally benefits. The program helps build community by bringing different families together during classes or events. Parents feel supported and part of a like-minded community of concerned parents and citizens. The entire community benefits from the enhanced collective quality of life of all the children and families who not only become more active in their child's development, but also become more involved in the community. The community's cultural knowledge can be enhanced or even revitalized when programs teach children and parents about the traditional culture and language, keeping cultural identity strong.

Best Practices:
- Parents and children working together to make traditional crafts such as vests or shawls, drums, rattles, dreamcatchers, regalia, moccasins.
- Partnering with other departmental programs such as Child and Family Services or with health departments help get assistance to families and help lower the cost burden to the Head Start program.

5　Nutrition

The nutrition program introduces the children to healthy foods so they learn to make better food choices for themselves. The children, in turn, can tell their parents about the healthy food choices they have learned to make. Along with the children teaching their parents, the staff send home printed information describing healthy nutrition.

Head Start nutrition programs start with the Canada Food Guide, and supplement with the Canada Indigenous Food Guide. The focus at Head Start is on daily nutrition for the children since they may not be eating as healthy at home. They have a hot lunch program based on the Canada Food Guide.

Cooks work on preparing balanced, healthy snacks and meals, ensuring the children get enough vegetables and fruit on a daily basis. While they have a variety of foods available for lunch and snacks sometimes the children are reluctant to try new and unfamiliar food items. The cooks are trained to prepare nutritious and wholesome meals and snacks. They only have healthy menus. They also make themselves aware of any children with allergies and plan accordingly.

A dietitian/nutritionist comes into the classroom once a month to help with recipes that have more vegetables and fruit. The nutritionist engages in activities with the children to help them learn about how important vegetables and greens are, incorporating different fun things with the children as they learn about healthy nutrition. Staff try to discourage parents and children from eating junk food and encourage them to eat healthy foods instead. Posters of the food groups and good nutrition are up in the classroom.

Activities

The staff and cooks prepare snacks and meals with the children, thus helping the children learn about good, healthy foods, and how to prepare them. Children help with the cooking and preparing snacks and meals through the Kinder Cooking initiative. The children learn about healthy foods in fun ways too; playing with toys or reading books with pictures of healthy foods. Some Head Start programs work with the children to prepare a healthy meal to take home to their families. The children are taught to wash their hands before they prepare meals, and before they eat, and are also taught to brush their teeth afterwards.

Children are introduced to and served traditional Indigenous foods, following the Indigenous Food Guide. They are also introduced to new foods - such as dragonfruit or sprouts. The children also learn about gardening and thus, how to grow some of their own food.

Some Head Starts hold cooking classes and information sessions to teach the parents about nutrition and healthy food choices. They also distribute healthy recipes for low cost but nutritious meals for the families. Taking recipes for healthy foods home expands the children's and their family's eating habits and knowledge of healthy foods.

How often these activities occur is dependent on the programming, availability of resource people, and funding. Much of it happens daily, while some parts happen weekly or monthly.

Benefits to the Children

Children benefit because they are healthier – they eat a balanced, healthy lunch and snacks throughout the day. They also learn about good nutrition and become smarter eaters at home.

Benefits to the Family

The family could benefit through the Good Food Box program where they buy in to the program for a small fee (e.g. $25) and are able to receive a box of healthy foods containing fruits and vegetables. This is a much lower cost than buying from a grocery store. Families benefit from having healthy, well-fed children, who can learn better as a result. Receiving information and recipes on healthy foods helps parents learned to consider healthy food choices. The children and their families become knowledgeable about the benefits of fruits and vegetables as part of a balanced diet, conversely they also learned about what is not healthy food - such as junk food or foods with a high sugar content.

Benefits to the Community

The community benefits when children in the community and their families are eating healthier, promoting a decrease in sickness and unhealthy lifestyles. The quality of life in the community collectively increases. In other words, a better and healthier community can result from the learning associated with the nutrition program at Head Start. The food could be purchased from the local community store and thus support the local economy. The community also benefits by knowing children are able to experience healthy meals during the day, which are not always available at home.

Best Practices:
- The Canada Food Guide is supplemented with the Canada Indigenous Food Guide.
- The Kinder Cooking initiative teaches the children to make nutritious snacks.
- Hosting cooking classes and information sessions teaches the parents about nutrition and healthy food choices.
- Distributing recipes for low-cost but nutritious meals to the families can help the parents make affordable and healthy meals for the family.

6   Family Social Support

The family social support program has a number of facets: advocacy, household supports, health, and agency referrals. Some sites have a support worker to deal with the individual issues faced by the family. Many agencies have an open door policy to help families deal with a plethora of issues.

A connection between the program and the home is fostered. Family support must be offered in such a way that the parents and children are not made to feel embarrassed or incapable for receiving assistance. The main concern is to support the child enrolled in the program and the supports are different for each family.

Advocacy

Some parents, especially young parents, must be empowered to advocate for themselves and for their children. For example, sometimes a parent may need assistance in working with the health centre to deal with their own or their child's illnesses.

We always ask for the family's input in what they want us to do.

In addition, home support workers become aware of services available to those in need by attending interagency meetings.

One of the issues involved in advocacy are the jurisdictional disputes regarding service delivery. A foundational philosophy that guides these disputes is Jordan's Principle (see Appendix B), a child-first policy named in the memory of Jordan River Anderson from Manitoba's Norway House First Nation. He was a special needs child who was forced to live his life in a hospital while the provincial and federal governments battled about who was responsible for delivering home care services for him. According to Indigenous children's advocate, Dr. Cindy Blackstock (2012), the crisis arose because legislation states that the federal government is responsible for funding on-reserve health care, but it is the province that normally delivers health care off-reserve.

Household Supports

Some parents require help obtaining the necessities for setting up a home. These items include such things as: food, housewares, and clothing. Parents are made aware of the types of services available to them from various agencies throughout the community and beyond. Written material such as pamphlets and phone lists inform the parents of the available services and supports.

Health-related Issues

The support worker deals with health issues such as information about children's immunization or other types of health records. Information about childhood diseases is also important for the parents to know about and the support worker is able to provide some of this information.

Measures needed to protect oneself and family members from community outbreaks of childhood diseases such as measles or chickenpox are also provided by the community support workers. Cases of head lice or other common skin infections (for example, Impetigo) will occasionally crop up at the centres and preventative measures must be taken by parents to deal with these highly contagious diseases.

Parents are made aware of health-related issues that are observed by the child care workers and referrals can be made for specialists such as speech therapists, optometrists, dentists, physio-therapists, and behavioural therapists.   The services of these specialists are especially hard to obtain for those individuals living in rural, remote and isolated communities.

Many respondents stated that they deal with parents around coping with stress and other mental health issues. Referrals can be made and steps taken to ensure that treatment is received to help deal with these matters.

Social Supports

Many Head Start sites have a support worker to help them deal with matters that must be resolved.

There is an open door policy to help families deal with a plethora of issues. Workers are open to any concerns regarding the child or children enrolled in the program. However, parents must be empowered to advocate for themselves and for their children.

Respondents said they kept themselves informed on programs and resources in the community through monthly interagency meetings. These meetings provide information about available community resources and serve as an incubator for community partnerships with other organizations.

One participant stated:

> *"I'm a family support worker and I do home visits with all of my families. I get them in touch with social supports if they need them. I make home visits based on individual needs, as well as suggest parent education classes suited to their needs. I have an open-door policy with my families and work hard to build relationships with them to assess their needs and to get supports for them."*

Parenting Classes

Attempts are made to best support young parents. This is done at some sites by having monthly parent meetings. For these meetings, transportation must be provided and snacks are offered to the parents and to the other children that sometimes accompany them.

Planned monthly gathering referrals and supports we have family support front staff.
Support workers try to get the parents to volunteer because they can make valuable social connections with others who have children of the same or similar age. This can lead to friendships and social supports for people who may be isolated or away from family members who can help them.

Activities

Evening events such as community meals, crafts nights and cultural teachings, are held at the centre. Again, transportation is provided for those who do not have vehicles to attend these evening events.

Children and parents are given an opportunity to socialize with like-minded families outside the home. This provides support and networking; helping hone social skills

Fundraising events are hosted by the programs to give parents the opportunity to come together. These types of events benefit both the centre and the parents. The centre benefits because they are able to purchase much needed supplies and the parents have an opportunity to socialize with each other.

Pamphlets about delicate issues such as parenting skills, social skills, and emotional skills can be given to the parents as a means to start discussions about available services.

The frequency of programming can be difficult – in enough to support previous training but not too often as to cause training fatigue. Budgetary constraints, interest, and busy timetables further exacerbate family support programming. Home visits are done two times a year, while everything else is made available upon demand.

Benefits to the Children

Children benefit as the connection between the program and their home is developed. The parents and the children feel comfortable seeing familiar faces. This helps ease the transition to kindergarten and the formal school system. The social support worker provids encouragement, growth and development for the family and the child. This teaches the child how to interact respectfully and kindly with others.

The child can be successful when they are away from their parents for the first time. Home visits are conducted with all parents and children before children comes to school so the child has a familiar face in their program before they start.

Benefits to the Family

The program aims to let the parents know there are people available to assist them. The workers get to know the families and provide resources that help the family unit grow and gain confidence in their school and community.

Relationship-building between the family and the program is important. A support worker could give a family a sense of being open to accepting social support in a non-judgmental way. Giving assistance where it is needed helps locate the resources available to families and helps them with their individual needs. Social supports help the family get the things they need to be healthy. It also gives parents a sense of security by providing a one-on-one relationship with the parent as well as a relationship with the child.

Benefits to the Community

The community benefits by having parents better able to advocate for their children and having parents more aware of social supports available to them. This could lead to more participation on the community and children appreciating their community more.

Best Practices:
- Always ask for the family's input about what help they want. This approach places the family in the driver seat and promotes empowerment and agency.

Challenges in Program Delivery

Head Start provides amazing and successful programs to help children develop in a safe and healthy manner, however, staff encountered difficulties in trying to implement programs.

Funding, or more accurately, the lack of sufficient funding was always reported as a problem for all Head Start sites. Some found that their budgets had not increased in years, yet the cost of living continues to rise. Thus, related issues arose such as the lack of sufficient space, not enough staff, lack of resources for staff support. Staff at one site stated that they were unable to take any special needs children because they did not have the training, the equipment or the facilities to properly provide such services. Field trips or any peripheral events could be expensive and budgets did not always allow for them. \ Upgrades to buildings and equipment, outside play areas, more materials and supplies, materials for making traditional cultural items, and Elder involvement were some of the needs expressed by respondents.

> *We need to start planning for children who are affected, who were in care and looking for long-term effects for the family. I would like an opportunity to get involved and to do some strategic long-term planning based on early childhood in early intervention.*

Some Head Start staff mentioned that they did not receive the support they needed from their supervisors or the Elders. Some found that the cultural advisors or Elders were not always reliable to show up and do their work adequately. Yet they did need the cultural and language programs as they witnessed its benefits for the children and their families.

Children's personal problems could be very difficult to deal with. It could be very difficult to try to get the children to eat healthy; when at home or away from Head Start they were making unhealthy choices, such as hotdogs and chicken nuggets. Children were at different emotional growth stages and some had anger issues that needed to be dealt with. Some parents were not supportive of the Head Start staff efforts. A few parents were very critical of the staff dictating how things should be done regarding the care and learning for their children.

Getting all parents to be involved with their children at Head Start, or even to be supportive in their home can be an issue. Some parents did not have reliable transportation while others may have had personal problems. The parents that attended the Head Start program after-hours or to volunteer tended to be the same ones, so some parents did not receive the benefits of learning and companionship. While some sites did have planning workshops to meet the needs of the parents, many others did not have any kind of a parent support program or did not have a family support worker to assist the parents.

One serious community problem that affected certain families including their children is the opioid crisis and other serious addictive behaviours that can lead to children being apprehended. Head Start did not provide support for those children or their families, yet they recognized that counselling and other supports were needed to address it.

Overcoming the Challenges of Program Delivery

Efforts were being made by all the Head Start programs to try to deal with program delivery challenges. Many believed that they could be overcome. At one site, they stated that all departments are working together on some of these matters and are being creative with their solutions.

Since funding is an issue, staff and parents lobbied for more program dollars. To deal with the funding shortfall, many Head Start programs did some volunteer fundraising.

One way they stretched their budgets was to partner with other agencies and departments in the community to jointly fund certain programs, or to obtain donated space, or to utilize facilitators or other resources others could lend.

They worked to hire and keep qualified staff. Providing adequate compensation for their work was key to keeping them, along with creating a respectful work environment. Thus, a supportive supervisor and fellow staff members and everyone being held accountable for their personal role and as a team member were seen as important. They also needed to work to ensure the staff they hire are reliable people who can be depended upon. Many felt that all staff need certain skill levels in child care and that a part of the budget should provide for continuing education and professional development for staff including field trips or off-site training and seminars or workshops. Many were working on getting staff to achieve better levels of fitness and health. When funds were made available they want to hire more staff. While many continued to search for trained facilitators, others tried to educate some of their staff to be facilitators. One staff member mentioned that they could really use a family liaison person and a program manager. Cultural and language programs seem to be very impactful on not only the children, but the parents and entire family as well. Half of those interviewed stated that they believed their Head Start needed additional programming. Many voiced the need for more family supports: special needs child care capabilities, and even a steady cook to come in part-time. Some spoke of the need for after school care. Some also spoke of the need for skills in dealing with children and parents who experienced traumatic events.

With respect to good parenting, some talked about having parenting skills and knowledge in the high school. They do, and are trying harder, to provide parents with information on the importance of healthy food choices, and how to prepare healthy meals and snacks. Events like sewing night worked to bring families together to build community networks. Some stated that they always need more parenting programming to get parents involved in their children's development. Some even talked about providing wraparound services for parents that could continue even beyond Head Start. One staff member stated that young mothers have a lot of questions and programming should also focus on that group. They felt that parents do need training in how to deal with behavioural issues of their children.

To get parents to come after hours or to volunteer, they have discussed providing transportation to those who need it and perhaps provide some food/snacks, and maybe even give out door prizes. Some even discussed ways to provide babysitting so parents could participate.

It appears that most Head Start staff stated that some of the greatest struggles centre around inadequate funding. As a result, there are many needs in the community not being addressed. One staff member stated that it is the families that need it the most that suffer. Staff are trying innovative measures like collaborating with other agencies and departments to stretch scarce resources, creative ways to fund raise, and ways to get parents to come out and become active participants in their child's growth and development.

Required Resources

Resources were needed in almost every aspect of the operations. This includes staffing, resources, furniture, supplies, and renovations.

Staffing

Staffing was one of the biggest issues mentioned throughout the program across all Head Start sites. Almost one-third of the respondents, (30%) said that they did not have enough staff members to provide the services required in the program. An additional eight percent said that they did not know whether they needed more staff members. Only 48%, or slightly less than half of the respondents said that they had adequate staffing levels in their facility. Slightly more than half, or 53%, stated that either one or two more staff members would adequately support the services they provided. As a result, an additional investment in wages for new staff would allow the current programming to run more smoothly. It would provide a more effective service and result in a happier workforce.

When the facility was short-staffed it was even more difficult when a worker was absent and the others must cover for them. A number of individuals stated that they would like to have a casual worker to be "on call" when a regular employee is absent.   Others spoke of having a floater that moved from room to room to cover for people who were having lunch or a coffee break. Most of the individuals said they did not get a break throughout their workday, which is illegal.

When asked about the rate of staff turnover, 21% stated that staff turnover was an issue at their facility. When asked why they believed there was such a high staff turnover they answered as follows:
- wages/pay not enough
- inadequate benefits
- stress
- no support from director
- lateral violence in the workplace with co-workers not treating each other with respect
- lack of education/unable to fulfill certification requirements
- found other employment
- needed to change
- working in the day care was not for them.

As one person stated, "This job isn't for everybody."

Inadequate Funding

Inadequate funding was unanimously reported as an important issue. Many said that increased funding was required in all aspects of their programming. In fact, 46% of the respondents said they did not have enough funding to operate the program/service.

The amount allocated for each week to buy fruit, milk, and veggies was simply not enough. One person said that food prices were higher in their area and thus the costs to provide a snack and lunch for the children was very expensive. They felt as though they had to sacrifice nutrition because of the inadequate budget. As well, most felt that the price of food and drinks continued to rise while their budget remained the same.
Some spoke of the need for better wages needed in order to retain staff.

Some stated that they really needed a new day care, that is, a new building, because their building was run down, the carpets were old, furniture was old, etc. In fact, 53% said there were structural issues with the facility or the building where the Head Start program was located. Many sites were in need of new equipment in order for the staff to properly do their work, since some had old computers. Many stated they needed equipment for kids to play outdoors. One person stated that in order to keep the kids safe when they are outdoors, they really needed a new fence and gate. There was concern that the buses used to transport children were old and often in need of repair.

Programming costs continued to rise. In order for the children to do crafts, there was a need for new items such as art supplies and materials. Cultural resources for programs were expensive too since they had to cover the cost of materials and facilitators. Many felt that more money was required for mentoring parents in the area of nutrition and cooking healthy meals for their children. Thus, many stated that they needed the funding to increase when the operating costs increase.

The need for staff continuing education and ongoing training was noted as being sorely needed. Many complained of the lack of funding to attend seminars and conferences that could further the knowledge of care providers. One person stated that they did not have enough funding for training staff in the area of special needs. Also, there was a lack of adequate funding to support a special needs parenting program.

We constantly order craft supplies. We need them to teach our children the curriculum required under the program. These supplies are expensive and are sometimes hard to obtain. We must think of ways to stretch our supplies to try to remain within our budget. The budget is meagre and inadequate.

Some expressed not only what they absolutely needed but also what they would like to have. For example, some wanted to change the sand in the outdoor monkey bars to rubber foam for reasons of cleanliness and safety. Another expressed how nice it would be to have a Smart Board to write on.

The issue of lack of adequate funding was unanimous. Everyone needed more funding for programming to meet costs that continued to rise. Quite often the building, furniture, and equipment was old. There is just so much need. As one person stated, "we need more money to fix everything."

Building

Almost all of the participants stated that there were issues with the building that housed their program. While some of the programs were located within multi-use structures, the issues mentioned dealt primarily with standalone structures. Renovations and repairs are expensive at were not included in the budget.

Some concerns had to do with the interior and exterior of the building itself: age, repairs, and replacement of structural components, including roof repairs, siding replacement, windows and screens. Heating and cooling systems were generally inadequate. Many stated that the buildings were either too hot or too cold for comfort. Some of the repairs required are necessary for safety. For example, some buildings required electrical and plumbing repairs. Renovations to the exterior of the building included needing a ramp with a non-slip surface because some of the Elders had difficulty managing the stairs when they came to the centre.

Other comments dealt more with cosmetics and convenience. For example, some individuals mentioned that it would be nice to have an air conditioning system in the building, while others spoke about carpets being worn out and the walls needing a new coat of paint. One other thought that an intercom system would make it easier to locate people in the building.

Burst pipes and freezing water lines were mentioned by a number of the participants. These occurrences actually caused the facility to close down. These repairs were costly and sometimes the replacement materials must be ordered which could cause a delay in repairs.

One participant stated the building was not on level ground which meant as it shifts the doors and windows were difficult to open or close. The situation impacted the airflow in the building. Further, safety issues could occur if children cannot be kept in or out of a particular room.

There was water damage in the building and there were concerns about mold. One participant said:

> *"It's an old building. Everything needs to be redone - the kitchen must be redone with industrial appliances, the fixtures and the floor in the children's washrooms need to be redone, the ramp must be replaced, better fencing needed for the children's safety, a new roof, doors and windows. Honestly, we need a new building."*

Slightly more than half (56%) of the participants stated that their facility required renovation. When asked about the types of renovations that were required the participants answered as follows: paint, flooring, cubbies, shingles, lighting, a sanitary sink, air conditioning, a new heating system and an extension on the building.

When asked whether their facility was inspected by the province, 69% said yes, while 27% said no, and another 15% did not answer the question.   When asked who inspected their facility, the largest percentage stated their inspection was done by the health inspector, followed by Health Canada, and then the fire department.

Exterior

Respondents also mentioned that fencing and gates surrounding the properties must be repaired or completely replaced. There were concerns for the safety of the children when they were playing outdoors.

"The playground must be upgraded by leveling the field and installing a soft material under the equipment such as pea gravel, sand, or crumb rubber" said one participant. Another commented, "The playground had gopher holes and this made it unsafe for the children". Yet another stated, "It's embarrassing and it's sad. We have to tie our gate with a rope."

Storage

Storage was an issue for most participants (approximately 80%).   Limited storage was mentioned in all activities carried out in the building including: kitchen (food storage, dishes, pots and pans], janitorial (cleaning supplies, brooms mops pails), toys and books, arts and crafts supplies, office (file storage and stationery supplies), maintenance (tools and gardening implements), toddler supplies (clothes, blankets, diapers), and furniture (cribs, highchairs, mats, tables and chairs).

When asked to explain their storage issues, responses included that there was "barely any room for storage" and, "the limited space was taken up by the cook who needs it for food." The respondent added, "There simply is not enough room."

Toy and book storage were always at a premium. Arts and crafts are a big part of the program to promote motor skills so they needed storage for those supplies. Space was needed for unused items. For example, one room was needed for family involvement items and shelving.

Security

When asked about security issues in their buildings, 20% said they had issues. When asked to explain the security issues, some programs mentioned they have had break-ins and had to deal with broken glass before the children could come into the building. They would like to hire a security guard to patrol the property at night.

Another reported that the fence needed repairs and they needed new playground fencing. Another said they were in an area where there were a number of drug dealers. When there were shootings they were never notified to lockdown.

Equipment

Participants were asked to describe the equipment they required. The broad categories of equipment and supplies they required can be divided into indoor and outdoor needs. The indoor supplies needed included:

- new toys
- Indigenous-themed books
- more furniture (including adult sized furniture)
- kitchen appliances
- iPads and other electronics
- Indigenous-themed learning aids

Outdoor requirements included:

- an outdoor ramp for special needs children and Elders who cannot manage the stairs.
- a playground that meets licensing requirements
- a bigger gate
- a level playfield
- fencing
- security system with lights and cameras

Our office computers are ancient. We could use a whole new office. Everything is old and should be thrown out. Honestly, we just make do with what we have. We would love to have a little bit of extra money to buy new toys or books for the kids. But, something comes up or needs to be fixed and there goes the "extra" money.

Other Participant Concerns

Some respondents felt that they did not have the power to make necessary changes to the programs, even though they worked in the area and knew better what needed to be changed.

Others mentioned that there was a need for some older workers to obtain updated training, as "Old School" ways sometimes brought conflict into the workplace between these older workers and newer workers who had received more recent training and certification.

We bump heads with older employees because of their lack of training and their lack up upgrading to new ways of thinking and of doing things.

Another mentioned that personal and family connections were very important and without these, some parents can cause trouble for workers.

There is a paradox with early childhood learning. Those who have the power and the money to make changes do not necessarily prioritize this demographic. On the other hand, those who do work in this area and make early childhood learning a priority and their life's work do not have the resources or the power to make the changes that are needed.

Comments on Environmental Scan Components:[9]

Environmental scanning aids in decision-making:
The participants in this study gave decision-makers a lot to think about. Their honesty and candidness gave a rich depiction of their work, including the successes and the challenges. The administrators and workers in this program work hard to ensure its success in situations that are less than favorable.

Strengths of Program/Service:
The strengths of this program are many. The program greatly benefits the children, their families, and the community. It helps the children learn and take pride in their Indigenous culture and language. It also supports their academic success in the formal K-12 program.

The workers make this program successful. They are committed to working with children even in conditions that are less than favourable. They are rewarded by knowing that the children are being helped to succeed in school and in their lives.

The curriculum is comprehensive and is, as Margo Greenwood (2017) says, "designed to counteract the effects of residential school."

The program also provides employment in the community. It helps local people to increase their employability and skill sets.

There is no waste of resources in these programs. All the space, equipment, buildings and other supplies are used for the maximum benefit of the children. There are so many things about this program that are working well. This is due to the dedication and hard work of the employees.

Weaknesses of Program/Service:
The employees are underpaid. There should be a yearly wage or salary increase for employees.
The program's success is threatened by the challenges encountered by the workers when they try to complete or upgrade their qualifications. Not only are the courses run sporadically but they are also expensive and in many cases the program budgets do not cover these expenses.

The program budgets are inadequate and cannot cover the resources needed and infrastructure repairs and replacements (buildings, outdoor spaces, equipment, etc.)

Unfortunately, one of the factors that threaten this program is the low level of involvement of some parents. Ironically, it is these parents who would benefit the most from this program and who are the least likely to participate.

Chief and Council are viewed as being uninvolved and disinterested in the on-reserve program.

Opportunities of Program/Service:
There are opportunities to partner with other agencies and departments. This means that resources can be shared and programming can be more cost effective. This is already in place with some of the sites who have partnered with girls' schools, community centres, friendship centres, and other community organizations.

There is also an opportunity to approach agencies that will make donations to programs, for example, the United Way, Knights of Columbus, Friendship centres, golf tournaments and Kinsmen. Policies and procedures should be set in place to accept donations (cash and in-kind), sponsorships, and other benefits to help the program. Head Start and Daycares have the opportunity to create a professional network and a provincial association to advocate for change.

[9]   *Adapted from Akshay Sharma (2017). "Eight Important Needs and Importance of Environmental Scans in Business." Entrepreneur. Retrieved from https://www.linkedin.com/pulse/8-important-needs-importance-environmental-scanning-business-sharma on 22 May 2020*

Threats to Program/Service:

Inadequate budgets are the overwhelming threats to this program. There should be a yearly budget increase made to at least cover cost of living increases. Many of these communities are in rural areas and in the North, which means that freight costs and accessibility to goods is limited and the goods are expensive.

Some of the sites are not running to capacity and this can threaten the viability of the program. Efforts should be made to fill the available seats.

Many of the buildings in which the programs are located are in need of either major or minor renovations. Some of the buildings are unsafe with electrical, plumbing, eating, and structural issues. A line item for capital maintenance should be built into the annual budget to help these buildings remain safe.

Programs also stated that it was difficult to retain reliable and committed Elders to teach the programs.

Optimal Use of Resources:

The administrators and workers are dedicated to the program and to the children. They "make do" with scant resources and inadequate, and sometimes unsafe, facilities.

As human resources, the administrators and the employees are precious commodities. Their dedication to the children and to the program means that they are underpaid and do multiple jobs in the workplace. For example, a child care worker can also be the janitor and the bus driver. The resources given to the IELCC programs are well used with very little waste or overlap.

Appendices

Appendix A: IELCC Questionnaire

Indigenous Early Learning and Child Care (IELCC) Questionnaire - AFNIGC – Fall 2019

UID

UID (COMPUTED) - random number identifying each respondent

INTRODUCTORY_PREAMBLE

Indigenous Early Learning and Child Care (IELCC) Survey - Participant Consent

WHAT IS THE PURPOSE OF THIS RESEARCH?
The purpose of this questionnaire is to gather information about Aboriginal Head Start, Aboriginal daycares and Indigenous child care in Alberta .This information will help the funders to distribute program monies to the childcare organizations in Alberta.

WHAT WOULD I HAVE TO DO?
People who participate will be asked questions about their workplace experience, as well as any needs, gaps, and challenges. We also want to know what you think is working well in your workplace. This information can help others adopt wise practices in their childcare programs/services.

HOW LONG WILL IT TAKE?
The interview will take about 60 minutes (perhaps longer depending on the detail you provide).

WHAT ARE THE RISKS?
This research does not involve anything other than talking with study team members. You will be assigned a Unique Identification Number (UID) and any trace of your name will be removed from the database. There will be no harm towards you for participating in this questionnaire.

WILL I BENEFIT IF I TAKE PART?
If you decide to participate then you might benefit by shaping future strategies for implementation to reduce/improve how and where future funding is directed.

DO I HAVE TO PARTICIPATE?
No.It is your choice whether or not to participate.You can change your mind and withdraw during the interview if you so choose.If you decide not to participate, then there will be no negative consequences for your community, as a partner in this work.You may ask that certain things you say should not be written down; we will honour your request.

WHAT ELSE DOES MY PARTICIPATION INVOLVE?
You will not be required to do anything else upon completion of the interview.

DO I HAVE TO PAY FOR ANYTHING?WILL I BE PAID FOR PARTICIPATING?
No. There is neither a monetary reward nor monetary request for participating.

WILL MY RECORDS BE KEPT PRIVATE?
Yes.The information you give us will not be personally linked to you.We will say only that it came from a child care provider/community member.From the information gathered we will generate a report for the funders.The results will be shown in aggregate form only so that we may draw out trends in the information. We will not reveal your identity or the name of your program/service in any of the information we publish.

WILL I BE COMPENSATED IF I SUFFER A RESEARCH-RELATED INJURY?

We don't think you will suffer an injury by talking to us.But if you do, then no compensation will be provided by AFNIGC or the Researchers that would not otherwise be covered by relevant insurance.You still have all your legal rights.Nothing written in this document alters your right to seek damages.

AGREEMENT TO PARTICIPATE

Your signature on the form and your digital consent indicate that you understand the information regarding your participation in this project and that you agree to participate in this research process. This does not waive your legal rights or release the researchers from their legal, ethical, or professional responsibilities. You are free to withdraw from the study at any time. If you have further questions, please contact:

Dr. Cora Voyageur
906 SST 2500 University Dr. NW
Calgary, AB T2N 1N4

OVERALL_CONSENT

I have read (or have had read to me) the conditions of participation, have completed a consent form, and agree to participate.

◯ yes   ◯ no

CONSENT

The number below is your participant ID. The Fieldworker/data collector will now record this number on their participant tracking sheet.

[UID]

THANK_YOU_CONSENT

Thank you for agreeing to be part of the Indigenous Early Learning and Child Care Survey

Your participation is appreciated.

If you have any questions about this survey and your rights as a participant, please consult the handout you received from the Fieldworker/data collector.

NAME

What is your name?
(Your name will be associated to your **consent ONLY**; your responses will not be associated to your name)

GENDER

What is your gender?

○ Male   ○ Female   ○ Other   ○ Prefer not to say

AGE

Age in years. ☐

INDIGENOUS

Are you Indigenous?

○ yes   ○ no

INDIGENOUS_TYPE

Are you ...

☐ First Nation

☐ Métis

☐ Inuit

☐ Non-Status

☐ Other [   ]

RESERVE

Do you live on reserve?

○ yes

○ no

○ other [   ]

CHLDCARE_HOWLONG

How long have you worked in Early Learning and Child Care overall?

[   ]

○ N/A

POSITION

What is your current position?

[   ]

POSN_HOWLONG

How long have you worked in your current position?

[   ]

CERTIFICATION

What is your highest level of certification?

[   ]

○ N/A

CERTIF_PLANS

Do you plan to increase your certification level?

○ yes

○ no

○ don't know

CERTIF_WHEN

When do you plan on increasing your certification level?

[   ]

CERTIF_HOW

How do you plan on increasing your certification level?

[   ]

CERTIF_BARRIERS

What is preventing you from increasing your certification? Please select all that apply.

- ☐ already at highest level of certification
- ☐ don't want to increase them
- ☐ no time
- ☐ no transportation
- ☐ no childcare
- ☐ the application process
- ☐ don't have the prerequisites

☐ programs are not accessible (please explain):

☐ other (please explain):

PRGSRV_TYPE

Type of program/service:

○ Day Care   ○ Headstart   ○ Other (please explain):

PRGSRV_NAME

Name of the program/service.

Select an answer... ⬍

PRGSRV_PLACE

Where is your program/service located? (Nation/City/Town, etc.)

PRGSRV_RES

Is your program/service located on or off-reserve?

○ on reserve   ○ off reserve   ○ other

PRGSRV_REMOTE

Which of the following official definitions **best** describes the location of your program/service?

- ☐ urban (located **within 50km** of the nearest service centre with year-round road access)
- ☐ rural (located **between 50 km and 350km** from the nearest service centre with year-round-road access)
- ☐ remote (located **greater than 350km** from the nearest service centre with year-round road access)
- ☐ special access (**no** year-round road access)

PRGSRV_TIME

During which months does your program operate? If it operates year-round please select the same month for both *From* and *To*.

PRGSRV_TIME_FROM

From:

Select an answer... ⬍

PRGSRV_TIME_TO

To:

Select an answer... ⬍

PRGSRV_DAYS

How many days a week does your program/service operate?

PRGSRV_HRS

For how many hours per day do you have each group of children?

PRGSRV_ALONE

Is your program/service standalone or combined with another program/service?

- ○ standalone   ○ combined

PRGSRV_CONNECTED

What program/service are you connected to?

PRGSRV_BENEFIT

Please explain the benefits of this setup.

[   ]

PRGSRV_DRAWBACK

Please explain the drawbacks of this setup.

[   ]

PRGSRV_POLICY

Does your program/service have a Policies and Procedures Manual?

◯ yes ◯ no ◯ don't know

ENROL_REGISTERED_DESCRIPTION

In your last enrollment, what was the number of children registered who were:

ENROL_FN

[ ] First Nation

ENROL_METIS

[ ] Métis

ENROL_INUIT

[ ] Inuit

ENROL_NONSTATUS

[ ] Non-Status

ENROL_NONINDIG

☐ Non-Indigenous

ENROL_PRIMARY

Who are your primary enrollees?

○ on-reserve children   ○ off-reserve children   ○ don't know

ENROL_AGES_DESCRIPTION

What is the age range of the children in your program/service?

ENROL_AGE_YOUNGEST

Please tell us the age of the youngest child in your program/service (and also **select** whether this age is in **years or months** in the drop-down menu).

☐ Youngest

ENROL_AGE_YOUNGEST_DROP

Is the age of the youngest child in months or years?

Select an answer... ▲▼

ENROL_AGE_OLDEST

Please tell us the age of the oldest child in your program/service.

☐ Oldest

ENROL_FULL

Is your program/service filled to capacity?

○ yes
○ no

ENROL_WAIT

Do you have any children on the waiting list?

○ Yes   ○ No

ENROL_WAIT_NUM

How many children are currently on the waiting list?

[   ]

ENROL_GROUP

Do you have more than one group of children per day?

○ yes   ○ no

ENROL_GROUP_NUM

How many groups of children do you have per day?

[   ]

ENROL_REQMTS

Are there any special requirements (e.g. potty trained) for enrolment in your program/service?

○ yes   ○ no

ENROL_REQMTS_EXPL

What are the special requirements for enrolment in your program/service?

[   ]

ENROL_SPCL_NEEDS

Do you serve any special needs children?

○ yes   ○ no

ENROL_SPCL_NEEDS_RES

Do you have adequate resources to serve the special needs children?

○ yes   ○ no

ENROL_SPCL_NEEDS_BETTER

What resources do you need to better serve the special needs children?

DESCRIPTION

Rich Text placeholder for displaying information to the respondent

wrkplc_workswell

What works well in your workplace?

wrkplc_jobconcern

What is your primary concern in your job?

wrkplc_wrkplcconcern

What is your primary concern in your workplace?

wrkplc_gaps

Do you see any gaps in your program/service?

   ○ yes   ○ no

wrkplc_gaps_expl

Please explain the gaps in your program/service.

wrkplc_emerg_concerns

Do you see any emerging concerns?

○ yes   ○ no

wrkplc_emerg_concern_expl

Please explain what the emerging concerns are.

```
[                                        ]
```

wrkplc_support

Do you feel supported in your work?

○ yes   ○ no

wrkplc_support_who

Please explain who supports you in your work.

```
[                                        ]
```

wrkplc_support_whynot

Please explain why you feel there is no support for your work.

```
[                                        ]
```

wrkplc_like_most

What do you like most about your job?

```
[                                        ]
```

wrkplc_like_least

What do you like least about your job?

```
[                                        ]
```

wrkplc_change

If you could change one thing about your job, what would it be?

par_inv_encourage

Does your program/service encourage parent/guardian involvement?

○ yes   ○ no   ○ don't know   ○ n/a

par_inv_support

Are parents/guardians supportive of the program/service?

○ yes   ○ no   ○ don't know   ○ n/a

par_inv_most

What aspects of the program/service do parents/guardians support the most?

par_inv_least

What aspects of the program/service do parents/guardians support the least?

par_inv_events

Does your program/service hold special events for parents/guardians?

☐ yes   ☐ no   ☐ don't know   ☐ n/a

par_inv_well

Please give an example of a special event for parents/guardians that was successful.

[ ]

par_inv_not_well

Please give an example of a special event for parents/guardians that was not successful.

[ ]

program_descr

For the following set of questions we would like you to provide a detailed explanation of the programming you provide; including the **type of programming,** the **activities**, and the **frequency.**

program_language_type

What type of **language program** does your program/service offer?

[ ]

○ don't know

○ N/A

program_language_activities

What **activities** does the language program involve?

[ ]

○ don't know

○ N/A

program_language_frequency

How **frequently** does your program/service provide the language program?

[ ]

○ don't know

○ N/A

program_language_child

What benefits does the language program provide for the child?

○ don't know

○ N/A

program_language_family

What benefits does the language program provide for the child's family?

○ don't know

○ N/A

program_language_community

What benefits does the language program provide for the child's community?

○ don't know

○ N/A

program_culture_type

What type of **cultural program** does your program/service offer?

○ don't know

○ N/A

program_culture_activities

What **activities** does the cultural program involve?

○ don't know

○ N/A

program_culture_frequency

How **frequently** does your program/service provide the cultural program?

⬚

○ don't know

○ N/A

program_culture_child

What benefits does the cultural program provide for the child?

⬚

○ don't know

○ N/A

program_culture_family

What benefits does the cultural program provide for the child's family?

⬚

○ don't know

○ N/A

program_culture_community

What benefits does the cultural program provide for the child's community?

⬚

○ don't know

○ N/A

program_education_type

What type of **education** program does your program/service offer?

⬚

○ don't know

○ N/A

program_education_activities

What **activities** does the education program involve?

[ ]

○ don't know
○ N/A

program_education_frequency

How **frequently** does your program/service provide the education program?

[ ]

○ don't know
○ N/A

program_education_child

What benefits does the education program provide for the child?

[ ]

○ don't know
○ N/A

program_education_family

What benefits does the education program provide for the child's family?

[ ]

○ don't know
○ N/A

program_education_community

What benefits does the education program provide for the child's community?

[ ]

○ don't know

○ N/A

program_health_type

What type of **health promotion** program does your program/service offer?

○ don't know

○ N/A

program_health_activities

What **activities** does the health promotion program involve?

program_health_frequency

How **frequently** does your program/service provide the health promotion program?

program_health_child

What benefits does the health program provide for the child?

program_health_family

What benefits does the health program provide for the child's family?

program_health_community

What benefits does the health program provide for the child's community?

```
┌─────────────────────────────────────────────────────────────┐
│                                                             │
│                                                             │
│                                                             │
└─────────────────────────────────────────────────────────────┘
```

program_parental_type

What type of **parental training** program does your program/service offer?

```
┌─────────────────────────────────────────────────────────────┐
│                                                             │
│                                                             │
│                                                             │
└─────────────────────────────────────────────────────────────┘
```

○ don't know

○ N/A

program_parental_activities

What **activities** does the parental training program involve?

```
┌─────────────────────────────────────────────────────────────┐
│                                                             │
│                                                             │
│                                                             │
└─────────────────────────────────────────────────────────────┘
```

○ don't know

○ N/A

program_parental_frequency

How **frequently** does your program/service provide the parental training program?

```
┌─────────────────────────────────────────────────────────────┐
│                                                             │
│                                                             │
│                                                             │
└─────────────────────────────────────────────────────────────┘
```

○ don't know

○ N/A

program_parental_child

What benefits does the parental training program provide for the child?

```
┌─────────────────────────────────────────────────────────────┐
│                                                             │
│                                                             │
│                                                             │
└─────────────────────────────────────────────────────────────┘
```

○ don't know

○ N/A

program_parental_family

What benefits does the parental training program provide for the child's family?

[ ]

○ don't know

○ N/A

program_parental_community

What benefits does the parental training program provide for the child's community?

[ ]

○ don't know

○ N/A

program_family_type

What type of **family training** program does your program/service offer?

[ ]

○ don't know

○ N/A

program_family_activities

What **activities** does the family training program involve?

[ ]

○ don't know

○ N/A

program_family_frequency

How **frequently** does your program/service provide the family training program?

[ ]

○ don't know

○ N/A

program_family_child

What benefits does the family training program provide for the child?

○ don't know
○ N/A

program_family_family

What benefits does the family training program provide for the child's family?

○ don't know
○ N/A

program_family_community

What benefits does the family training program provide for the child's community?

○ don't know
○ N/A

program_nutrition_type

What type of **nutrition** program does your program/service offer?

○ don't know
○ N/A

program_nutrition_activities

What **activities** does the nutrition program involve?

○ don't know
○ N/A

program_nutrition_frequency

How **frequently** does your program/service provide the nutrition program?

○ don't know

○ N/A

program_nutrition_child

What benefits does the nutrition program provide for the child?

○ don't know

○ N/A

program_nutrition_family

What benefits does the nutrition program provide for the child's family?

○ don't know

○ N/A

program_nutrition_community

What benefits does the nutrition program provide for the child's community?

○ don't know

○ N/A

program_soc_sup_type

What type of **family social support** program does your program/service offer?

○ don't know

○ N/A

program_soc_sup_activities

What **activities** does the family social support program involve?

[ ]

○ don't know

○ N/A

program_soc_sup_frequency

How **frequently** does your program/service provide the family social support program?

[ ]

○ don't know

○ N/A

program_soc_sup_child

What benefits does the family social support program provide for the child?

[ ]

○ don't know

○ N/A

program_soc_sup_family

What benefits does the family social support program provide for the child's family?

[ ]

○ don't know

○ N/A

program_soc_sup_community

What benefits does the family social support program provide for the child's community?

[ ]

○ don't know

○ N/A

program_diff

Are there difficulties in providing the previous types of programming?

○ yes   ○ no   ○ n/a

program_diff_expl

Please describe the difficulties you have encountered.

program_diff_ovrcom

How do you believe these difficulties can be overcome?

program_add

Do you see a need for additional programming?

○ yes   ○ no

program_add_what

What additional programming is needed?

staff_num

How many staff members does your program/service have? If you are not sure, please take your best guess.

staff_indigenous

Of these staff members, how many are Indigenous? If you are not sure, please take your best guess.

staff_enough

Are there enough staff members to do the work required for this program/service?

○ yes   ○ no   ○ don't know

staff_needed_num

How many additional staff positions are needed?

[ ]

staff_needed_what

What additional staff positions are needed?

[ ]

staff_types

Please list the type of staff members who are employed:

[ ]

staff_cc_workers_cert

Are the Child Care Workers certified?

☐ yes, all of them are certified

☐ yes, some of them are certified

☐ none of them are certified

☐ don't know

staff_cc_workers_cert_what

What type and level of certification do the Child Care Workers have?

[ ]

staff_turnover

Is the rate of staff turnover problematic?

○ yes   ○ no   ○ don't know

staff_turnover_reasons

What reason(s) would you give for staff turnover?

○ don't know

funding_have

Do you have all the funding you require to operate this program/service?

○ yes   ○ no

funding_required

Where do you require more funding?

funding_resources

Are other resources needed?

○ yes   ○ no

funding_resources_required

What other resources do you require?

funding_fee

Do parents pay a fee for their children to attend your program/service?

○ yes   ○ no

fac_structure

Do you have any issues with the facility/structure/buidling?

○ yes   ○ no

fac_str_issues

Please explain the issues with the facility/structure/building.

[   ]

fac_renos

Does your facility/structure/building require renovation?

○ yes   ○ no

fac_renos_type

Please tell us what type of renovation the facility/structure/building requires.

[   ]

fac_insp_province

Is your facility inspected by the province?

○ yes   ○ no

fac_insp_other

Is your facility inspected by others?

○ yes   ○ no

fac_insp_other_whom

By whom is your facility inspected?

[   ]

fac_storage

Do you have issues with storage at your facility/structure/building?

○ yes   ○ no

fac_storage_expl

Please explain your storage concerns.

fac_security

Do you have issues with security at your facility/structure/building?

○ yes   ○ no

fac_security_expl

Please explain your security concerns.

fac_safety

Are there any safety concerns with your facility/structure/building?

○ yes   ○ no

fac_safety_expl

Please explain your concerns about safety.

equip_res_equipmt

Do you require specialty equipment in your facility?

○ yes   ○ no

equip_res_equipmt_expl

Please explain about the specialty equipment you require.

equip_res_play

Do you have an adequate outdoor play area?

○ yes   ○ no

equip_res_play_fence

Is your outdoor play area fenced?

○ yes   ○ no   ○ n/a

equip_res_items_req

Do you require any of the following? You may select all that apply, and please provide examples of what these items might me.

☐ Learning Aids

☐ Books

☐ Toys

☐ Play Equipment

☐ Furniture

other_concerns_expl

Please explain any other concerns that have not already been covered.

○ N/A - no other concerns

thank_you_ending

Thank you for participating in the Indigenous Early Learning and Child Care Survey.
Your help is much appreciated!

Appendix B: Jordan's Principle

What is Jordan's Principle?
Jordan's Principle ensures that First Nations children receive the services they need when they need them.

Jordan's Principle:
- Jordan's Principle is available to all First Nations children in Canada.
- Applies to all public services, including services that are beyond the normative standard of care to ensure substantive equality.
- Provides payment for needed services by the government or department that first receives the request .

Jordan's Story
Jordan River Anderson was a five-year-old First Nations child from the Norway House Cree Nation in Manitoba. He was born in 1999 with a rare disorder that required hospitalization from birth. After spending the first two years of his life in a hospital, doctors felt he could receive care in a medically trained family home near the hospital. However, over the next couple of years the federal and provincial governments could not resolve who was financially responsible for the necessary at-home care.

He needlessly spent more than two years in hospital while the provincial and federal governments disputed who should pay for his at-home care. Jordan passed away in 2005 without ever leaving the hospital and receiving treatment in the comfort of a family home.

On December 12, 2007, the House of Commons supported a motion that affirms Jordan's Principle, named in memory of Jordan. A federal court ruling in 2013 and Canadian Human Rights Tribunal decision in 2016 means that Jordan's Principle is now law in Canada.

To implement Jordan's Principle, the Government of Canada is working to:
1. Resolve situations where governments and departments cannot agree about who should pay for services and supports to meet the needs of a First Nations child
2. Cover the costs of public services and ensure substantive equity for all First Nations children and youth.
3. Facilitate access to all services and supports for all First Nations children without delay or disruption

Jordan's Legacy
Today, Jordan's Principle is a legal obligation, which means it has no end date. While programs and initiatives to support it may only exist for short periods of time, Jordan's Principle will always be there. Jordan's Principle will support First Nations children for generations to come. This is the legacy of Jordan River Anderson.

> **What is Covered?**
> *Jordan's Principle applies to all public services, including services that are beyond the normative standard of care to ensure substantive equality.*

Excerpt from:
http://www.fnha.ca/what-we-do/maternal-child-and-family-health/jordans-principle

Appendix C: Education Recognized for Alberta Child Care Staff Certification

TITLE	CHILD DEVELOPMENT		
	ASSISTANT	**WORKER**	**SUPERVISOR**
Qualifications	45 hour (3 credit) college level course in early learning and child care	early learning and child care certificate	early learning and child care diploma
	child care orientation course (Alberta government sponsored course)	disability studies diploma	Alberta teaching certificate
	CCS 3110-3150 offered through Career and Technology Studies at Alberta high schools	educational assistant diploma	Bachelor of Child Studies degree
	The Step Ahead Family Day Home Training or Family Child Care Training Program	Bachelor of Science in Human Ecology – family ecology major	Bachelor of Education 4-year degree or 2-year after degree
		Bachelor of Kinesiology (B Kin or BA Kin) or Kinesiology diploma	Child and Youth Care degree or diploma
		Community Rehabilitation degree or Rehabilitation Assistant diploma	Bachelor of Social Work degree
		Therapeutic Recreation degree or diploma	
		Social Work diploma	

Type of Educational Credentials

Certificate: 1-year full time (30 credits) post-secondary credential
Diploma: 2-year full time (60 credits) post-secondary credential
Bachelor's degree: 4-year full time (120 credits) post-secondary credential

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