

National Dialogue
on
Federal Aboriginal
Early Childhood Development
Strategy

Draft Report

Distributed by Health Canada

September 2005

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Federal Aboriginal
Early Childhood Development
Strategy

(Cette ébauche du rapport est aussi disponible en français)

Original prepared by Aboriginal Research Institute of Six Nations Reserve,
in association with the Ontario Federation of Friendship Centres and DPRA Canada.

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CHAPTER 1: Executive Summary

Introduction

Health Canada initiated and guided a National Dialogue process on Early Childhood Development (ECD) for Aboriginal children. The National Dialogue's objective was to “gather stakeholder feedback on the various possibilities and best options (cooperation, coordination, collaboration, integration, consolidation) toward how federal Aboriginal ECD programs can work better together.”

National Dialogue Activities

The National Dialogue was conducted in two parts:

- Six National Aboriginal Organizations (NAOs) collected feedback from their constituents. The six included the Assembly of First Nations (AFN), Inuit Tapiriit Kanatami (ITK), Congress of Aboriginal Peoples (CAP), Métis National Council (MNC), Native Women's Association of Canada (NWAC), and Pauktuutit Inuit Women's Association. The NAOs conducted four separate dialogues. ITK and Pauktuutit collaborated on an Inuit dialogue while NWAC participated in the dialogue sessions led by the Aboriginal Research Institute (ARI).
- The ARI team conducted dialogue activities with other key stakeholders involved in ECD.

The NAO dialogue activities included workshops, research activities, telephone interviews, face-to-face interviews, an interactive website for the completion of questionnaires, and focus group sessions.

The ARI team national dialogue activities included 14 dialogue workshops with over 350 people attending across the country, telephone interviews with key contacts (17), and questionnaires completed in hard copy and on the website (29).

Findings of the National Dialogue

Reports on the dialogues conducted by NAOs are the property of those organizations. Details on how to contact them are available in Appendix 1 at the end of this report.

Findings from the sessions conducted by the ARI team are presented here according to six categories based on themes that were expressed by participants.

Category 1: Vision

The ECD strategy implementation is a complex system with a wide scope and many levels of activities. The lack of a common Aboriginal understanding or overall context for the strategy made it difficult for participants to provide specific recommendations as to whether the strategy is headed in the right direction, or if not, how it should be changed. However, participants in the national dialogue made a number of suggestions in many different areas as presented above. Broadly speaking, there is a need to refocus the ECD strategy on the children first, and then articulate the Aboriginal context within both the strategy and the federal government direction.

Category 2: Funding

Although participants in the National Dialogue were not sure what direction the government is heading with this process, they were clear that they were willing to participate in the process because there is a great deal at stake—the future of Aboriginal children. However, participants emphasized that their participation was conditional on one caveat—the result cannot mean less money in the system, or more specifically, cannot mean less funds for the Aboriginal front-line service delivery.

Category 3: Federal government/Aboriginal organization interface

A significant finding from the National Dialogue on Aboriginal ECD is the considerable divide between the Aboriginal and non-Aboriginal entities particularly related to how the ECD programs and services are funded, delivered, and reported. All parties agree that accountability is important; however, the levels of bureaucracy and the inconsistencies in defining expectations and outcomes present a tremendous burden for the Aboriginal organizations and communities. Overall, many participants indicated that reporting requirements need to be streamlined and simplified, and asked that all three federal funding agencies jointly establish standard reporting protocols and disseminate reporting guidelines.

What is a single window approach? This question relates back to the issues raised in Category 1 (Vision). One of the key challenges when discussing this concept is the lack of definition for a single window approach. In order to discuss this issue meaningfully, a working definition should be

provided. A single window approach could refer to a single pool of money for which one department is responsible for approving comprehensive proposals. Single window could also refer to one access point for funding, followed by referral to the appropriate federal department program. It could be operationalized as a consistent application, approval, and reporting process used by all programs—a seamless approach to funding. Or a single window approach could simply facilitate federal/provincial coordination of ECD programs. Participants were unable to make specific recommendations due to a lack of definition. As a result, there was a great deal of caution about the concept and there was no consensus on how to move forward.

Category 4: Unidirectional flow of information

Many participants agreed that increasing the number of community consultations would allow communities to feel that their needs are being met and that their programs are working for their children. Moreover, participants indicated that communities need to be involved from the beginning in all aspects of programming. There was also agreement on the need for a simplified integrated reporting system that would minimize administration time and maximize programming time.

A number of participants said they have the impression that only select information flows between the Aboriginal organizations/communities and the federal department. As the government designed the system, a good deal of Aboriginal-based information (and Aboriginal context) is lost. Participants said that the government does not reciprocate, and does not consider Aboriginal information and Aboriginal context. The information appears only to feed the government accountability system. It was also mentioned that much of the information created in the government system does not make it through to the Aboriginal organizations/communities. Many of the concepts and processes—transparency, accountability, and reporting—appear to be one-sided, or at least to favour the government.

So much energy is expended at the community/program delivery level addressing the needs of the ECD system that at times it can overtake the energy spent on addressing the needs of the children. The concern is that there is too much distance between the child (focus) and the top of the system designed to assist the child. The time spent supplying information is disproportionate to the amount of funding received. In addition, there is a question of whether information provided is relevant or meaningful for decision-making.

Category 5: Increased vertical and horizontal integration at government level

Many dialogue participants believe that there is a strong need for increased communication between the federal, provincial, and local governments, and the community. While there are still some questions and concerns surrounding integration and a single window approach, many participants agree that the approach should be sensitive to the needs of communities and must recognize cultural

differences. Moreover, many participants observed that this information would come from greater communication and increased involvement at the local level.

Bureaucratic silos create barriers to efficient Aboriginal ECD programs. Although four federal departments offer Aboriginal ECD programs that are similar in intent, the vertical lines of authority, jurisdiction, and operations often lead to duplication and lack of flexibility in program delivery.

As noted in category 4, participants find that too much energy is devoted to meeting the needs of the bureaucracy rather than meeting the needs of the children. There is a need to increase integration in the government processes, both vertically and horizontally. There is an impression that horizontal integration currently only occurs where there is political will. Supportive policy is required to direct meaningful federal collaboration and horizontal integration. Participants identified the need to streamline bureaucracy across departmental programs and to increase vertical integration within departments and between Aboriginal delivery mechanisms and the bureaucracy. Better communication would ideally include a clear understanding of continuum of care for Aboriginal ECD and an awareness of the range of programs, criteria, and access points.

Category 6: Aboriginal service-based organizations/community/family interface

As noted in the previous five categories, the main issues identified by participants in the ARI National Dialogue relate primarily to the government process rather than the community or service delivery process. Participants have been quite innovative and effective at delivering programs efficiently to the targeted client group. Some have successfully created linkages between programs to offer a continuum of care, but require greater flexibility at the community level to build upon these practices. However, the government process has to authorize this.

Regional Perspective findings

Northern Region

The Northern Region includes communities within the Yukon, Northwest Territories, and Nunavut. Participants from the North identified a number of key concerns:

- Funding must reflect the unique needs of the North.
- There is a discrepancy between programs and funding provided on reserve and those for Inuit and Métis people.
- There is a need for improved communication and information exchange among federal departments, territorial governments, and Inuit/First Nations/Métis.

Atlantic Region

Several issues were raised by participants in the Atlantic Region (which includes Nova Scotia, New Brunswick, PEI, and Newfoundland and Labrador):

- Universal access is needed for all Aboriginal children to all federal programs, regardless of background, residence, community, or region.
- Federal departments need to have a clearer understanding of Inuit culture and needs. They need to develop programs relevant to the Inuit population and fund those programs appropriately.
- The discrepancy between on and off reserve programs needs to be addressed.
- Where federal ECD programs are working, they should not be integrated; however, improvements should be made to streamline access to funding, and criteria for program reporting and evaluation.

Québec Region

Participants from Québec (including Nunavik) also raised a number of issues:

- Funding should be made available to urban (off reserve) communities to have comparable programming.
- The proposal writing process creates competition among service providers—it does not foster collaboration.
- Translation requirements (written documents as well as simultaneous translation) are not accompanied by adequate budgets.

Ontario Region

Participants from Ontario raised the following issues:

- The federal government needs to address the North/South and urban/rural disparity in program and service accessibility.
- The funding formula does not meet the needs of the large Aboriginal population living off reserve.
- Priority for funding should be those areas where there is currently no access to services.

- There should be improved access to funding, to the programs themselves, and to information about programs and services.

Manitoba Region

Participants in the National Dialogue in Manitoba spoke of the following issues:

- All children should have the same opportunities to access programs: the level of services, objectives, and guidelines for programs for Aboriginal children living on and off reserve should be comparable.
- More resources are needed for training and upgrading of ECD educators.
- Not enough Aboriginal people are involved in the program planning process; direction is lacking from community members for addressing the real issues.

Saskatchewan Region

Participants in the Saskatchewan dialogue described the following issues:

- The federal government needs to provide communities with clear and detailed information on available programs.
- There should be improved communication at all levels: federal, provincial, tribal council, reserve, and ECD service deliverers.
- ECD decision-making should be informed by research, community evaluations of programs, and value generated by the community.
- ECD strategies should clearly define a role for Métis people.
- ECD policies on and off reserve need to be synchronized.
- There should be continuity of services for people in transition between on and off reserve
- Local input is needed on programs, administration, evaluations, and guidelines.

Alberta Region

The following are among some of the issues raised by some dialogue participants in Alberta:

- Better services are needed for children with special needs.
- There should be a cultural component in all programs to better understand the language, spirituality, emotion, and intellect of Aboriginal communities.
- Improvements are needed to the way Child and Family Service (CFS) funding is allocated; funding is only available once the child is removed from the home.
- Funding needs to be for all Aboriginal children, including non-status children.

British Columbia Region

Participants in British Columbia raised the following concerns:

- The federal government should ensure equity in access to programs across the province: on reserve, off reserve, urban, remote, Northern, and islands.

- Some communities with minimal capacity to write proposals are at a disadvantage when it comes to obtaining funds.
- Additional services are needed for children with special needs.
- Culturally relevant ECD training for administrators, front-line workers, teachers, helpers, nurses, and parents is required.
- Aboriginal people from all over the province need to be involved in planning for improved ECD programs and services.

CHAPTER 2: Introduction And Methodology

1 National Dialogue

Health Canada initiated and guided a National Dialogue process on ECD for Aboriginal children. The National Dialogue’s objective, as stated in the Statement of Work, is to “gather stakeholder feedback on the various possibilities and best options (cooperation, coordination, collaboration, integration, consolidation) toward how federal Aboriginal ECD programs can work better together.” Reports of dialogues conducted by NAOs are the property of those organizations. Contact information is provided in Appendix #1.

1.1 Purpose of the National Dialogue Report

The Statement of Work required that the report, based on participant feedback, “describe best practices in ECD integration and coordination, and provide stakeholders’ perspectives to help inform the development of options toward a single window approach to ECD for First Nations and other Aboriginal children.”

1.2 Structure and Content of the National Dialogue Report

The ECD National Dialogue report provides an account of the background to, and purpose of, the National Dialogue, a description of the process used by the ARI team in implementing the National Dialogue project, and the findings of the ARI dialogue process.

2 Context/Background

This section of the report provides an overview of the context of Aboriginal children’s health, federal programs oriented toward Aboriginal children’s health and development, the Early Childhood Development Agreement and subsequent Early Childhood Development Strategy, and the National Dialogue on Federal Aboriginal Early Childhood Development Strategy (or “National Dialogue”) project.

2.1 Aboriginal Child Health Conditions

The general health status of Canada's Aboriginal population consistently ranks below the national average. Aboriginal children have a number of significant health issues¹:

- high infant mortality rates (2–3 times the national average)
- poor childhood nutrition
- high rates of unhealthy birth weight
- growing concerns with respect to Fetal Alcohol Spectrum Disorder (FASD) and Sudden Infant Death Syndrome (SIDS)
- higher risk (than the national average) for unintentional injuries and early deaths from drowning and other causes
- increased poverty rates that affect housing and nutrition choices and availability
- dental decay rates that are estimated to be two to five times higher than among non-Aboriginal children.
- lower vaccine and immunization rates (than among Aboriginal children)

2.2 Aboriginal Early Childhood Development Programs

The goal of the federal ECD Strategy is to promote and improve the conditions for the best possible development for every child. The Government of Canada currently offers several programs designed to achieve this goal. The following descriptions were provided to participants in the dialogue:

Health Canada's **Aboriginal Head Start On Reserve (AHSOR)** program promotes the spiritual, emotional, intellectual, and physical growth of Aboriginal preschool children. The aim of the program is to provide Aboriginal children aged 0–6 with a positive sense of themselves and a desire for learning, as well as other opportunities to develop fully and successfully as young people. Each Aboriginal Head Start On Reserve site is able to reflect the uniqueness of the local culture and language while focusing on parental involvement, education, health promotion, nutrition, and social support. Health Canada manages the program through its First Nations and Inuit Health Branch regional offices, distributing funds through a proposal driven process.

Health Canada's **Aboriginal Head Start Urban and Northern (AHSUN)** program serves status and non-status First Nations off reserve, Inuit, and Métis children. This program is administered separately from the Aboriginal Head Start On Reserve program, through Health Canada's national and regional offices of the Population and Public Health Branch, but its principles and guidelines are fundamentally the same. The majority of resources are managed in grants and contributions by the regional offices.

¹ Health Canada, "Federal Strategy on Early Childhood Development for First Nations and Other Aboriginal Children," October 2002.

Health Canada's **Fetal Alcohol Spectrum Disorder (FASD)** program for First Nations On Reserve focuses on preventing FASD and enhancing the quality of life for affected children and their families. It promotes improvements in the health of pregnant First Nations women at risk and their babies by training professional and front-line workers, developing practical screening tools, public awareness materials, and improving parental and community supports. In this program, funding is determined by the regions and is proposal-based.

Human Resource and Skills Development Canada's **First Nations and Inuit Child Care Initiative (FNICCI)** provides First Nations and Inuit parents with access to affordable, quality childcare, in part, to enable their return to the paid labour force or participation in education and training programs. This program is part of the Aboriginal Human Resources Development Strategy, which is managed by Human Resources and Skills Development. The focus is on serving children ages 0 to 6 although there is also provision for after-school care for those up to age 12.

There is a broad range of **other federal ECD programs** that provide support to Aboriginal children aged 0–6 and their parents. In addition to those mentioned above, Health Canada and Indian Affairs Canada offer the following programs:

- Community Action Program for Children (CAPC): Health Canada
- Canada Prenatal Nutrition Program (CPNP): Health Canada
- Brighter Futures Initiative (BFI): Health Canada
- First Nations Child and Family Services (CFS): INAC
- National Child Benefit Reinvestments (NCBR): INAC
- Special Education Program: INAC
- Parental Engagement Programs: INAC

2.3 The Early Childhood Development Agreement

In September 2000, Canada's First Ministers established the Early Childhood Development Agreement. Under the Agreement, the federal government is transferring \$2.2 billion over five years to provinces and territories in order to improve and expand ECD programs and services. The goal of the Agreement is to ensure that young children can fulfill their potential to be healthy, safe, and secure; ready to learn; and socially engaged and responsible.

While the Agreement is not focused on Aboriginal children, federal, provincial, and territorial governments have agreed to work with Aboriginal peoples to find practical solutions to address the developmental needs of Aboriginal children.

Subsequent to the signing of the ECD Agreement, federal commitments outlined in the January 2001 Speech from the Throne, December 2001 federal budget, and September 2002 Speech from the Throne further supported efforts to address Aboriginal children's developmental and health needs.

3 Origin and Purpose of the Federal Aboriginal Early Childhood Development Strategy

3.1 Federal ECD Strategy Background

The federal government announced its Federal Strategy on Early Childhood Development for First Nations and Other Aboriginal Children (or “Strategy”) in October 2002. A series of documents have contributed to the development of the ECD Strategy. Some of them include The Royal Commission on Aboriginal Peoples (RCAP) recommendations on ECD (1996), *Gathering Strength: Canada’s Aboriginal Action Plan* (July 2000), and The National Children’s Agenda (June 2000). The Strategy is primarily aimed at improving and expanding ECD programs and services for First Nation children on reserve, as well as for other Aboriginal children. The Strategy is five years in duration and has a budget of \$320 million.

3.2 ECD Strategy Initiatives

The Strategy identifies some existing programs for enhancement, including the following:

- Aboriginal Head Start program (both on reserve and off reserve), run by Health Canada
- First Nations and Inuit Child Care Initiative (FNICCI) run by Human Resources and Skills Development Canada

In addition, the Strategy supports new measures:

- Monitoring the well-being of Aboriginal children
- Addressing Fetal Alcohol Spectrum Disorder (FASD) in First Nation communities

3.3 Implementing Parties

Four federal government departments are involved in implementing the Aboriginal ECD Strategy:

- Health Canada
- Human Resources and Skills Development Canada (HRSDC)
- Indian and Northern Affairs Canada (INAC)
- Social Development Canada (SDC)

3.4 Aim of the ECD Strategy

Besides enhancing the federal government programs and supporting new measures aimed at ECD, the Strategy also aims to improve the coordination and integration of federal ECD programs. To this end, three key elements have been employed and a separate federal department leads each one:

- Two pilot projects at the tribal and regional levels, for a total of six sites (led by INAC), provide information on joint planning and priority-setting processes and information regarding the feasibility of establishing common measurable outcomes across all ECD activities.
- An environmental scan (led by HRSDC) reviews the state of ECD programs in Aboriginal communities and highlights instances of successful collaboration and integration. The environmental scan was conducted in the fall of 2003 and it is anticipated that the document will be completed in January 2005.
- A National Dialogue (led by Health Canada) with stakeholders focuses on identifying ways in which the federal Aboriginal ECD system can be improved, and is exploring options for a single-window approach to ECD for First Nations and other Aboriginal children.

The following section of the report describes the National Dialogue's project methodology including the data collection process in general, and the various data collection streams within the process.

4 Overview of the Data Collection Process

The data collection process developed for the National Dialogue on Federal Aboriginal Early Childhood Development Strategy was unique. A typical national dialogue involves a single party (usually a contractor retained by the federal government) to plan, design, and implement the dialogue process in consultation with the federal government. However, Health Canada chose to implement the National Dialogue project through a "multi-pronged" approach, one prong facilitated by the ARI, the other prongs undertaken by six NAOs.

ARI and the NAOs were in contact with each other during the planning stages of the project, in order for each party to be aware of the other's data collection approach and activities.

Data was collected within a tight timeframe: the project was initiated October 10, 2003; the ARI-led data were collected between November 18 and December 15, 2003; and the draft final report was produced early in January 2004. During this period, input was received from 400 persons (ARI dialogue activities) by various means.

For the purposes of this document, the term "National Dialogue" refers to the ARI-led component of the National Dialogue on Federal Aboriginal Early Childhood Development Strategy, which included the NAO dialogues.

5 Data Collection Streams

The National Dialogue data collection process consisted of six streams (or methods) of gathering information:

- Dialogue workshops led by the ARI team
- Interviews with key contacts
- Questionnaire dialogue
- Website dialogue
- Review of the draft environmental scan
- Dialogue activities by National Aboriginal Organizations

The participants in the various National Dialogue activities across Canada were provided with *A Participant's Guide*, developed by Health Canada, which provided information on ECD programs and services, outlined key issues, and provided the five questions that were asked in the dialogue activities:

Question 1: What are the federal children's programs that you are aware of in your community? What do you like about how these program(s) operate? What do you think needs to be improved?

Question 2: What best practices in your or other communities demonstrate effective coordination and integration of ECD programs?

Question 3: What would be the characteristics of improved federal ECD programming and delivery?

Question 4: Would an integrated, coordinated or a "single window" approach to these programs be helpful or not? Why?

Question 5: Currently, several federal departments offer their own separate programs for Aboriginal children, each with their own separate administration requirements. What are the benefits to this arrangement? What are the challenges? What would you do to improve things?

5.1 Dialogue Workshops led by the ARI Team

ARI team members planned, designed and delivered 14 multi-stakeholder workshops across Canada, with a total attendance of 354 people as follows:

- Winnipeg, Manitoba: November 18, 2003 (34 attended)
- Halifax, Nova Scotia: November 20, 2003 (28 attended)
- Montréal, Québec: November 24, 2003 (9 attended)
- Regina, Saskatchewan: November 25, 2003 (20 attended)
- Goose Bay, Newfoundland and Labrador: November 25, 2003 (14 attended)

- Saskatoon, Saskatchewan: November 26, 2003 (27 attended)
- Toronto, Ontario: November 26, 2003 (32 attended)
- Yellowknife, Northwest Territories: December 1, 2003 (19 attended)
- Iqaluit, Nunavut: December 1, 2003 (15 attended)
- Whitehorse, Yukon: December 1, 2003 (20 attended)
- Québec City, Québec: December 2, 2003 (19 attended)
- Vancouver, British Columbia: December 3, 2003 (35 attended)
- Edmonton, Alberta: December 4, 2003 (50 attended)
- Ottawa, Ontario: December 4, 2003 (30 attended)

Health Canada—with input from HRSDC, INAC, and two participating Health Canada branches, First Nations and Inuit Health Branch (FNIHB) and Population and Public Health Branch (PPHB)²—provided the lists of individuals to be invited to each workshop. Each person was sent an invitation letter and a copy of the *Participant's Guide* by email, fax, courier, or mail, with a request to inform ARI whether or not they would be attending the workshop and, if unable to attend, if they would like to have a telephone interview or complete a questionnaire.

Each one-day workshop was attended by a variety of stakeholders, including federal government representatives, provincial/territorial government representatives, Aboriginal Human Resources Development Agreements (AHRDA) holders, ECD program administrators, researchers, and representatives of key Aboriginal organizations. Workshop attendance varied from nine to 50 persons with 25 persons being the average. The workshops were also attended for the most part by at least one representative of Health Canada, HRSDC, and INAC. Two facilitators, one from the ARI team and one identified by local Indian Friendship Centre staff, facilitated most of the workshops. Dialogues were recorded by persons employed locally, including Indian Friendship Centre staff. At the end of each workshop, participants were requested to complete a form assessing the value of the dialogue and its strengths and weaknesses, from their experience.

5.2 Interviews with Key Contacts

The ARI team conducted telephone interviews with 17 persons across Canada belonging to various stakeholder categories. All persons invited to, but unable to attend, the dialogue workshops were asked if they would like to be interviewed. Each telephone interview averaged one hour in length and consisted of the questions contained in the *Participant's Guide*. The ARI team member conducting the telephone interview recorded the interview responses.

5.3 Questionnaire Dialogue

² As of fall 2004, the PPHB has been reorganized under the auspices of the Public Health Agency of Canada (PHAC).

The ARI team developed a questionnaire from the *Participant's Guide* and distributed it to 503 individuals belonging to various stakeholder categories. Sixteen questionnaires were completed and returned. The number of respondents was low due to tight timelines.

The individuals who were invited to participate in the questionnaire were identified from lists provided by Health Canada. These potential participants were sent the questionnaire by email, fax, express post, courier or mail, to participate in their choice of completing the questionnaire in hard copy or on the website.

5.4 Website dialogue

The ARI team developed a website in support of the National Dialogue. Provided on the website was the *Participant's Guide* in French and English and an opportunity to complete the online questionnaire. As indicated in Section 5.3, 503 individuals were sent a questionnaire to be completed in hard copy or on the website; 13 participants belonging to various stakeholder categories completed the questionnaire on the website. The website questionnaire also asked the questions provided in the *Participant's Guide*.

5.5 Review of environmental scan

Martin Spigelman Research Associates authored a paper (still in draft form) entitled *Putting Children First—An Environmental Scan of the Interdepartmental Cooperation within the Aboriginal ECD Strategy*. A draft version of the paper was submitted to HRDC, Health Canada, and INAC in the fall of 2003. It focused on nine programs under the ECD Strategy. As part of the ECD National Dialogue project, the ARI team reviewed the draft report, and incorporated relevant findings into this analysis.

The draft environmental scan had two main foci:

- It examined the degree of cooperation, coordination, and/or integration across the ECD or ECD-related programs run by INAC, Health Canada and HRSDC at the national, regional and community levels.
- It considered the barriers to and promising practices for building and sustaining a greater degree of cooperation among the various programs.

CHAPTER 3: Overview Of ARI Dialogue On ECD Findings

The National Dialogue looked at ways federal programs and services for Aboriginal children are accessed, administered, and delivered. The Dialogue was held to obtain the views of key stakeholders on possibilities and best options on how federal Aboriginal ECD programs could be more comprehensive and could work better together.

As noted earlier, Health Canada took the lead in facilitating this dialogue process to complement additional initiatives designed to inform the ECD Strategy, including an environmental scan led by HRSDC and pilot projects undertaken by INAC.

The approach generated thousands of pieces of information. The ECD process exists within a complex system of multiple federal departments and multiple funding streams within each department. The complexity is further underlined when provincial ECD programs are included in the discussions. This posed a challenge for dialogue participants, and tended to distract and lead the discussion in many different directions.

In order to provide a coherent overall perspective, the ARI examined and analyzed the data sets as follows:

- Summary of information by question
- Summary of information by region
- Identification and development of themes into general categories that capture these themes
- Development of an analytical framework that provides: an overall context in which to integrate findings, and the foundation for a higher level of analysis
- Placement of categories within the analytical framework
- Brief analysis of additional factors that impact on the ECD Strategy

Six general categories emerged from the ARI Dialogue on ECD for Aboriginal children:

- Vision
- Funding
- Federal government/Aboriginal organizations interface
- Unidirectional flow of information
- Horizontal and vertical integration
- Aboriginal service-based organizations/Community family interface

This chapter of the report is structured as follows:

- Brief introduction/explanation of each category

- A synthesis of comments made in the workshops, interviews, and questionnaires by participants in the ARI Dialogue for each category. References to “dialogue participants” or “participants” apply to comments made in any or all of the ARI Dialogue activities and forums
- Summary analysis of each category

Category 1: Vision

*“It is necessary to work toward a common vision. In the opening prayer we suggest a vision to improve the programs correctly. We musn’t lose sight of that objective.
-Québec City participant*

One theme that emerged from the ARI Dialogue was the need for a vision of federal ECD programming for Aboriginal children that comes from dialogue participants’ discussions regarding planning, direction, goals, and objectives.

Participant discussion:

A number of participants in the ARI Dialogue indicated that in order to improve programs and services for Aboriginal children, a vision of a holistic ECD Strategy must be developed. This vision would allow governments at all levels, stakeholders, and communities to work toward a common goal (e.g., improving the quality of life for Aboriginal children aged 0–6). Some participants noted that a holistic vision includes a family focus that views children as part of a community. One participant described this vision: “The child is recognized as part of the family and his/her community. It is the future. Integration and inclusion of family members are important factors for the child’s future success. Programs benefit the children by putting them first.”

Dialogue participants at some workshops indicated that programs should be looked at by objectives and expected outcomes, not by program name or program dollars. “Keep the children in the forefront and build the programs around them,” was one recommendation.

Some participants asked the federal government to develop a model of child wellness that addresses the continuum of a child’s development from pre-conception through to school age. For example, one participant advised, “Develop an integrated ECD

program that includes all the services—starting with prenatal—rather than ‘dissect the child’ with separate programs.”

“The approach of Québec is different from other provinces. Here are several communities: Cree, Inuit, First Nations. They are different: some mainly speak French, others English. The federal government attempts to form a unique model. This is not realistic. We allude in general terms to justice, vision, fairness on reserves and off reserve, of poverty struggle.”
- Québec City workshop participant

A number of participants called for an independent body focused on ECD to develop this vision, and manage and coordinate the programs for Health Canada, HRSDC, and INAC. This independent body could be an ECD Secretariat, Agency, or Commission that would work in collaboration with all levels of government, stakeholders, Aboriginal leaders, and Aboriginal communities. It would ensure the integrity, accountability, and sustainability of ECD programming for Aboriginal children while taking into account their unique needs and situation:

- Flexibility to address the unique needs of each community
- Community-based values
- Mobility between reserve and off reserve Aboriginal peoples
- Language and cultural issues
- Special education needs
- Equity in criteria and access for all Aboriginal children: on and off reserve, status and non-status, urban, Northern and remote, Métis, and Inuit
- Program and service delivery to self-government agreements.

The involvement of the communities in the development of a vision, programming, and evaluation was seen by a number of participants as key. In a telephone interview, one participant stated, “More cultural awareness, social situations, and community issues are to be incorporated in the ECD process.” At one of the workshops, a participant suggested the establishment of “an ECD Inter-Agency Council that can be the voice for the grassroots. This would serve as a means to identify gaps, decrease overlaps, increase continuity of programs, etc.” At another workshop, participants suggested that a community-based body be created for ongoing evaluation of programs and checks and balances, to ensure the programs and services remain relevant. A participant at a third location agreed, noting that an improved ECD approach would be “more in tune with issues at the community level, because federal programs look at the national level and lose touch with the local level.”

“We must bring together the Inuit, First Nations, and Métis at the beginning of the discussions—at the inception of the program implementation—[and involve them] until the program’s evaluation.”
- Québec City

Participants across the country asked that regional differences be respected in any vision. For example, it was suggested that an improved ECD approach in Québec would recognize the unique realities among communities: many languages and cultures, mobility

between on and off reserve populations, and isolated communities. This approach requires community involvement in all aspects of planning. The establishment of an ECD group in the NWT would provide a unified voice in the territory and help to gather input from the community and practitioners on the value of programs. Participants in Nunavut asked for an improved ECD approach tailored to meet the particular needs of the Inuit population. Participants in the Yukon suggested a program be specifically designed for the territory, since on reserve programs did not meet their needs. This new approach should be developed with self-governing First Nations.

Participants in many regions indicated that for an ECD vision to succeed, the three federal departments, with their regional counterparts, the provinces/territories and First Nations' governments would need to work together. However, some were skeptical that such collaboration could be achieved, given the differing mandates, needs, and philosophies, and in light of the need for the political will of all the parties to endorse change.

Some participants questioned the priority ECD would be given in any new approach and voiced concern about possible reductions in funding. While many welcomed the opportunity to provide their views on improving federal programs and services for Aboriginal children, a few were concerned that the dialogue was only “window dressing” for decisions already made. One participant was concerned that the dialogue report “is to mean action, not more studies!” Another wondered about the usefulness of developing a long-term vision, since governments—and hence government priorities—change over time.

In addition, some participants questioned the effectiveness of the environmental scan and pilot projects. They noted that the environmental scan was too limited and wondered how contributors were selected. Others mentioned that the pilot projects were too rushed, observing that the appropriate communities may not have been involved.

Overall, many participants agreed that developing ECD programming and delivery models that are responsive to the needs of communities must involve the communities themselves, along with federal, provincial/territorial, and regional governments;

stakeholders; and NGOs. As one workshop participant stated, “The communities must have a realistic approach, according to their own needs. The objectives should be fixed and the programs established according to the expectations.”

Summary Analysis:

The implementation of an ECD Strategy is complex—the system has a wide scope and many levels of activities. The lack of a common Aboriginal understanding or overall context for the Strategy made it difficult for participants to decide if the Strategy is headed in the right direction, or if not, how it should be changed. However, participants in the ARI Dialogue did make a number of suggestions in many different areas, as presented above and in Appendix B: Workshop Summaries. Broadly speaking, there is a need to focus the ECD Strategy on the children first, and secondly, articulate the Aboriginal context both within the Strategy and the general federal government direction.

Category 2: Funding

Introduction:

Although many issues raised in the ARI Dialogue relate to financial issues, this category pertains to the overall funding of the ECD Strategy.

Participant Discussion:

“If the departments were to integrate, they should all agree and commit beforehand that there would be no reduction in funding. The quality of programming should not be jeopardized. The goal is to ensure the quality and unique aspect of each program be maintained for the kids. If there is a risk of this being compromised, then don’t integrate.”
- Vancouver workshop participant

There was significant concern among a majority of dialogue participants that funding for communities would be reduced if the delivery of ECD programs and services by Health Canada, INAC, and HRSDC were combined into an integrated or single window approach. Most participants agreed that there is already lack of adequate funding for various ECD programs at the community level. They emphasized the need for increased funding for off reserve, non-status ECD programs. This funding pressure is supported by evidence that Aboriginal ECD is not universally available for all Aboriginal children. Entire geographical areas are without programming. Participants noted that a reduction in ECD funding would limit program resources and negatively change the way in which programs are delivered to Aboriginal children.

Although most participants were not clear on the future direction, vision, and administration of ECD programs for Aboriginal children, there was strong agreement that funding for various programs should not be decreased, regardless of how program delivery and administration is changed. The majority of participants argued that funding must either remain the same or increase for ECD programs to remain at status quo or to improve. Some pointed out that funding saved from a more efficient administration process should be redirected to improve program delivery at the community level.

Some participants commented that improvements are necessary in the way programs and funds are delivered and administered so that the intended recipients—Aboriginal children—receive the maximum amount of funding. In many cases, funds and resources are not appropriately, efficiently, and effectively allocated. Participants at a number of workshops recommended that the amount of funds spent for administration at the sponsorship or regional level be redirected

to direct program expenses for Aboriginal children, where it would be used more effectively and efficiently. Many argued that provincial, territorial or regional governments should not use the funds provided by the federal agencies for administrative expenses.

“There are too many administrative levels, which diminishes funding levels by the time it reaches the community.”
- Edmonton workshop participant

However, some were concerned that more efficient administration of program delivery might be interpreted by federal agencies to mean that less funding is required to do either the same amount or more work at the program level. Many participants stressed that this was not the case. Another concern was that a single window approach might make it easier for funders to reduce funding. One workshop participant stated, “Doing more with less reduces the amount of jobs available in the community.”

Summary Analysis

Although participants in the ARI Dialogue were not sure what direction the government is heading with this process, they were clear about their willingness to participate in the process because of what is at stake—the future of Aboriginal children. However, the participants emphasized that their participation has one condition: the result cannot mean less money in the system, or more specifically, for the Aboriginal front-line service delivery.

Category 3: Federal Government/Aboriginal Organizations Interface

Introduction:

A wide spectrum of issues relate to the interface between the federal government, which funds the Aboriginal ECD programs and the Aboriginal service providers, which deliver the programs. This section describes participants’ views on the interaction between the federal government and the Aboriginal ECD service providers with regard to how ECD programs and services are funded, delivered, and reported. This category specifically captures participant discussion in ten areas:

- Funding applications
- Funding formulas

“There are many administrative challenges and frustrations in having someone else tell us what our needs are.”
-Vancouver

- Additional funds required
- Coordination between federal agencies providing funds
- Funding under a single window
- Long-term funding security
- Funding equity
- Timely distribution of funds
- Information dissemination
- Reporting

Participant Discussion:

3.1 Funding Applications

Most dialogue participants agreed that funding proposal requirements are too complicated and difficult for community practitioners. Many participants indicated that community practitioners at the program level do not have the resources, experience, or the qualifications to write proposals for the federal government. A participant at one workshop noted, “Proposal writing is challenging to some communities that do not have the funds to hire someone to write proposals; therefore, fewer funds go to programming.” As a result, some community practitioners’ proposals were rejected, leaving their communities at a disadvantage. Others were concerned that some communities could “fall through the cracks.” In order to overcome this problem, participants suggested someone be appointed to advise community practitioners on proposal writing and explain funding application requirements.

Another issue identified by many dialogue participants was the application requirements and process. Too many applications to different federal agencies—all with different requirements—are obligatory. Participants would prefer to make one application for funding, which could then be forwarded to the relevant agencies. The time saved in writing and making applications could be used more efficiently for program delivery. In addition, the formats of the funding applications continually change. Given the difficulty that some ECD practitioners face in writing proposals, the change in application formats is confusing and complicates the process.

“The funding formula based on per capita doesn’t reflect the reality of what it costs to run a program in the North and the cost of living in the North.”
- Iqaluit workshop participant

However, a few participants noted that proposal-driven funding helps federal departments justify funding distribution. They pointed out that funders are aware of some of the problems faced by communities in the proposal and application process.

3.2 Funding Formulas

Some dialogue participants called for a change in the funding formulas, arguing that the per capita approach to determine funding allocations does not match community priorities and program needs. They asked that a number of factors be considered in allocating funds:

- The time needed to establish programs
- Improvements that need to be made to program delivery
- Infrastructure requirements
- The need to train staff to efficiently and effectively run the programs

Many participants commented that the budget for ECD programs should reflect the cost of goods, supplies, resources, and services needed to run the programs as well as the cost of living. As Northern participants observed, the cost of living differs across Canada. The criteria are limiting the type of funding available; communities often have to fit their needs into a criteria “box,” or funding will not be approved.

Some dialogue participants also questioned the reliability and accuracy of statistics used to determine funding allocations. Instead, they called for funding considerations to be based on population demographic needs. For example, one workshop participant noted that although the population of Aboriginal children is growing, the amount of funding for Aboriginal ECD programs has not increased, resulting in long waiting lists that continue to grow. Other participants had similar views, with one commenting, “Funding and changes to programs need to change with demographics.”

“The community needs have grown; the scope has expanded. The program needs more funding as they now use existing funding to meet other unfounded needs, for example, prenatal needs.”
-Happy Valley-

3.3 Additional Funds Required

There was agreement among most dialogue participants that not enough funding is available at the program delivery level for the necessary components. These include training staff, maintaining

buildings, paying worker salaries, writing funding applications, and purchasing or renting the necessary equipment. For example, dialogue participants at the one workshop stated that there are not enough financial resources to train staff in ECD or to keep staff up-to-date and current with ECD initiatives and methodologies. Additional funds are required to hire and pay qualified staff (e.g., therapists). In addition, participants in a number of forums mentioned that there is a lack of funding allocated to address the needs of special needs children, and preschool and infant childcare.

Insufficient funding results in long waiting lists for ECD programs for Aboriginal children. Participants identified the need for additional funding to reduce waiting lists, and to provide fair salaries and job security for ECD workers. Additional funds are also needed for training resources, childcare recreational resources, and technological resources. Additional funds for technological resources would allow communities to access information on the Internet and would help to increase knowledge of and accessibility to various ECD programs. “The better the funding, the better the programs,” noted a participant at one of the workshops.

3.4 Coordination between federal agencies providing funds

A number of dialogue participants identified the need for more coordination and collaboration on funding among federal agencies (Health Canada, INAC, and HRSDC) than exists at present. Some suggested that the provision of funding would be more effective if the various federal departments were aware of other programs and their related funding requirements. Some community practitioners have had their funding applications rejected because funding is already being provided by a different federal agency. Participants noted that funds received by various agencies could only be used for specific purposes; therefore, funding from other agencies is necessary to fill the gaps. In light of this issue, it was suggested that a more holistic approach to funding provisions and allocations would prevent gaps in ECD programs.

*“Programs should be put together in a single window or one in agency so we can see what funding is available. But departments should not be combined.”
- Halifax workshop participant*

3.5 Funding Under a Single Window Approach

There were mixed views from dialogue participants on a single window approach for funding. The following section describes some of the discussion on this topic.

Some participants stated that the single window approach would be a more efficient and effective way to deliver funding to ECD programs at the community level than exists at present. They argued that the single window approach would allow communities to submit just one application and proposal to one central administrative body; communities would not have to deal with three different types of applications, each with different requirements. The single window approach to funding applications and proposals would be less complicated, and less time consuming.

Some participants indicated that using a single window approach for funding could be beneficial in a number of ways:

- All available funds from the three federal departments would be funnelled and pooled into one location.
- The various federal programs would be integrated, allowing for more coordination between the departments and programs, resulting in more efficient delivery and distribution of funds to communities to meet their requirements and needs.
- Having one funder would make the programs and funds offered by the federal departments more accessible than at present.
- It would be easier for communities to determine what programs exist and which department is responsible for those programs.

*“Funding should be pooled and [made] available to all Aboriginal programs [but be] accountable to one department.”
- Edmonton workshop participant*

On the other hand, some dialogue participants indicated that a single window approach would not work because administrators may not agree on where the money should be spent. One respondent noted that this is particularly true in urban centres: “Having only a one stop shop is not practical nor effective; numerous single windows are needed in an urban centre.” Furthermore, many participants said that it is to the communities’ advantage to have more than one source from which to request funding. One said, “With multiple windows, a rejection is not necessarily a closed door.”

Other participants voiced their concern that a single window approach may add complexity in internal processes and processing services, resulting in a longer lead time to get funding. One was worried, “We would be forgotten ... we are lost in allocation. There

would be a risk because you have no other place to go” (for funding).

If a single window approach is adopted for funding or other administrative purposes, some dialogue participants recommended that community practitioners and program coordinators be given training on the new process and format.

3.6 Long-term funding security

Dialogue participants in the many workshops, and those who responded in the interviews and by questionnaire, indicated that long-term financial planning and provisions are necessary to deliver ECD programs effectively and to see positive long-term results. A majority of participants stated that funding should be guaranteed for programs that are established and that funding should be received for three- to five-year time spans, rather than annually. Dialogue participants across Canada recommended long term sustainable funding to allow for strategic planning of programs, to increase program benefits to children and to ensure program longevity. Some participants noted that sustainable funding provisions would reduce high staff turn over in some communities.

3.7 Funding Equity

Some dialogue participants indicated that funding requirements are met or are approved more frequently and quickly for certain groups than for others (i.e., there is a difference between on reserve and off reserve.) Some called it “unfair” that most programs are specific to on reserve communities. Many participants advocated a standard approach to distributing and approving funding requests for all stakeholders and applicants. In addition, some participants noted that funding standards for daycare centres differ for on and off reserve communities. For example, daycares on reserve do not have the same licensing requirements (standards) as those off reserve. A number of participants suggested that Métis be included in funding distribution. “Métis are not involved; there is no money allocated specifically for the Métis groups,” said a participant from the Prairies.

*“It is important to improve the ability of off reserve people to tap into programs that are now only available to on reserve children.”
- Happy Valley–Goose Bay workshop participant*

3.8 Timely Distribution of Funding

The timely provision of funding was a key issue for many participants from across the country. Promised funding that arrives late makes it very difficult for communities and organizations to run programs and achieve the goals they established in the program proposals. Funding uncertainty makes it very difficult to plan. A number of participants described occasions where funding was provided very late in the fiscal year and due to the funding provision conditions, communities, and program coordinators had to spend the money on ECD programs as fast as possible. A number of participants suggested that it should be permissible to carry over unspent money from one fiscal year to the next. Participants in Halifax pointed out that HRSDC permits this. Other participants stated that transfer agreements should be used instead of contribution agreements—the former are more flexible and allow funds to be carried forward into the next fiscal year.

*“Too many reports are required for one program. A single report will benefit program delivery.”
- Regina workshop participant*

3.9 Information Dissemination and Improved Access

Some dialogue participants indicated that a number of communities are not aware of what programs are available, who program funders are, and how to access the programs and funds. They suggested that all communities—not just targeted communities—be informed and provided with access to such information. Some participants also suggested that a website be created so that program workers and participants can obtain information about programs and funding.

3.10 Reporting

Many dialogue participants across Canada stated that reporting requirements are too complicated and time consuming. They noted that a number of community practitioners are not trained in writing reports; therefore, report writing can be very time consuming and can take a great deal of effort. “Writing many reports and/or proposals is time consuming and uses up many human resource hours,” noted one respondent. Another challenge for inexperienced program coordinators is that three different reports are required for three different federal departments, each with its own separate reporting protocols and standards, which are subject to change. “Reporting sometimes changes and smaller communities can’t adjust

and we don't want them to lose out because of it," said one participant, while another noted that the government is always changing the format.

Participants had a number of suggestions to simplify reporting requirements using a one-window approach:

- Require only one report to be written and submitted to one central federal government administrator.
- Coordinate the various funding agencies to create and establish one protocol and set of standards that will not be changed.
- Provide training for all program coordinators or workers responsible for writing reports and proposals on the new format, if one is developed.
- Coordinate the reporting cycles of federal departments to help reduce the frequent and repetitive reporting.
- Keep report writing "simple" and the reporting requirements suitable to multiple stakeholders, "not just a top down design."

*"Funding bodies need to be closer to communities to allow more opportunities to meet with funding agencies."
- Happy Valley-
Goose Bay workshop participant*

A number of participants reported that funders do not provide feedback on reports in a timely fashion— or sometimes at all. They asked funders for a commitment to communicate and to report back to communities. "Sometimes non-Natives do the evaluation off reserve and the Native group never sees the results," commented one workshop participant.

Summary Analysis:

The ARI Dialogue on Aboriginal Early Childhood Development confirmed that there is a considerable divide between the Aboriginal and non-Aboriginal entities particularly related to how the ECD programs and services are funded, delivered, and reported. All parties agree that accountability is important, but the levels of bureaucracy and inconsistencies in defining expectations and outcomes present a tremendous burden for the Aboriginal organizations/communities.

*"Publicize all available programs and funding."
-Nova Scotia respondent*

Overall, many dialogue participants indicated that reporting requirements should be streamlined and simplified, with standard reporting protocols established for all three federal funding agencies and reporting guidelines distributed.

The lack of a definition of a “single window approach” presented a significant barrier for participants wanting to discuss this concept. In order to have a meaningful discussion, a working definition should be provided. In the absence of a definition, a single window approach could refer to a number of possibilities:

- It could be a single pool of money for which one department is responsible for approving comprehensive proposals.
- It could also refer to one access point for funding, followed by referral to the appropriate federal department program.
- It could be operationalized as a consistent application, approval, and reporting process used by all programs, providing a seamless approach to funding.
- It could simply facilitate federal/provincial coordination of ECD programs.

In the absence of a definition for “single window approach,” participants were unable to make specific recommendations. They were cautious about the concept and there was no consensus on how to move forward.

Category 4: Unidirectional Flow of Information

*“Services need to be centred on the child and family and come from a set of values that are generated by the community.”
- Saskatoon workshop participant*

Introduction:

A major theme that emerged from the ARI Dialogue on Aboriginal ECD programs relates to the unidirectional flow in information, accountability, and “energy.” This section includes a summary of the discussion surrounding how information is exchanged between the government agencies and the communities. The discussion also provides some suggestions for improvement and specific areas requiring change.

Participant Discussion:

4.1 Information Sharing

Many participants from across the country asked for greater information sharing between the different levels of government and communities. In general, there was concern about “a disconnect between needs of communities and the planning frameworks,” as one participant said. Participants commented on the need to provide the community with knowledge and awareness of new programs before—not after—the new program has started. An example shared at the Edmonton workshop illustrated that no one in the working group was aware of the Parental Engagement Program. One participant asked, “Where is the information on this program? How do we access it?”

A suggestion from another workshop was that reports be shared in a forum where agencies can learn what is working and what is not working. “Enabling us to learn from each other’s experiences gives us a bigger picture of where there needs to be improvement.” Another participant stated that there is a need to share information among communities in order to “celebrate and share successes.”

Several participants observed that best practices that have worked in some communities will not necessarily work in others. It is most important that programs address the uniqueness of the communities.

“Communities are the context for ECD programs and need to be at the table when these decisions are made.”
- Vancouver workshop participant

There was agreement that much of the information from the community level is not making it to the top, and as a result, programming is not meeting the needs of the children. Decisions on programming need to come from the community and communities need to be involved from the beginning. Two participants from different regions of Canada came to similar conclusions: “Communities know their needs,” said one, while the other stated, “Government needs to recognize and address the uniqueness of communities.”

Many participants remarked that it is very important not to lose the Aboriginal perspective on raising children when developing and implementing these programs. They emphasized the importance of bringing First Nations (status and non-status), Inuit, and Métis into discussions from the beginning, and including them from implementation through to program evaluation. A participant from the Iqaluit workshop pointed out that it is “very important to re-look at the initial intent of existing federal programs and see how and if they are meeting the needs of the community.” Northern participants noted that many program criteria are based on First Nations models and that the Inuit and Métis are expected to fit into that mould.

Some participants said that the information directed to the funding agencies through the existing reporting format does not provide accurate information on what is needed to those at the federal level. Many participants noted the need for better communication and improved access to programming information.

Some dialogue participants suggested that it would be helpful to develop a National Working Group to provide advice on and information about all programs. A website could help service providers learn about where to get funding, and what programs are available and where. It was noted, however, that there should be one consolidated website and not a different website for each program. One participant suggested that a community-based body be “responsible for providing ongoing evaluations, including keeping checks and balances on the programs to ensure that it remain community friendly.”

However, while many participants liked the idea of this National Working Group or an ECD Inter-Agency Council, a few cautioned

“The federal government should be accountable to the communities.”
- Edmonton workshop participant

against establishing more bureaucracy and further layers of administration.

Some participants said that parents need improved access to information, something that could be done using websites and/or holding workshops. An Ontario participant suggested that parents should be more “involved in the ECD programs, and educated on the importance of ECD programs.”

4.2 Accountability

Many participants expressed concern about the lack of feedback from evaluation and reporting. Despite providing reports as required, communities receive little feedback or follow-up about the results, and are therefore unable to evaluate their own programs and service delivery. One participant wanted to know “what happens to the reports and how they are used.” Another stated, “We would like to see data on the questions we answer . . . Are there annual reviews of federal ECD programs?” Similarly, some dialogue participants asked for more information about why certain data is being collected.

A participant at the Yellowknife workshop suggested that site visits would be helpful. Another noted that a Northern Secretariat office or contact in the North was needed.

Some called for “top down” accountability, with one saying that the federal government “should be accountable to the communities.” Another noted that penalties for lateness only apply to the communities—there is no recourse if the federal department is late. In addition, communities need information in a more timely fashion. Some participants reported that, in a number of instances, by the time they get information on funding requests, there is little time left to set up the program, which creates “chaos” and “cash flow problems.”

4.3 Energy

There was a concern among some workshop participants that more time is being spent on reporting than on program delivery, with

*“Reports and proposals are large lengthy processes. [Communities] need more time and help to complete them.”
- Edmonton workshop participant*

many reporting that there is too much duplication with little administration support. “Many reports and proposals are time consuming and use up many human resource hours,” noted one respondent. Another said there is “too much time spent on research and paper work and not enough on delivery.” A key message from one workshop was that communities want the focus to be on programs and not to have to worry about process and policy.

A suggestion was to designate one contact person at the federal level. Organizations would explain what type of program they want and the contact person would be responsible for matching that need with available funding sources. This would eliminate the problems experienced by many communities that have to figure out where they can get funding and then writing numerous proposals.

Summary Analysis

Many participants agreed on the need for more community consultation so that communities feel their needs are being met and that their programs are working for the children. Moreover, participants indicated that communities need to be involved from the beginning and in all aspects of programming. There was also agreement that there is a strong need for a simplified integrated reporting system in order to minimize time being spent on administration as opposed to programming.

A number of participants said they have the impression that only select information flows between the Aboriginal organizations/communities and the federal department. As the government designed the system, a good deal of Aboriginal-based information (and Aboriginal context) is lost. Participants said that the government does not reciprocate, and does not consider Aboriginal information and Aboriginal context. The information appears only to feed the government accountability system. It was also mentioned that much of the information created in the government system does not make it through to the Aboriginal organizations/communities. Many of the concepts and processes—transparency, accountability, and reporting—appear to be one-sided, or at least to favour the government.

So much energy is expended at the community/program delivery level addressing the needs of the ECD system that at times it can overtake the energy spent on addressing the needs of the children. The concern is that there is too much distance between the child (focus) and the top of the system designed to assist the child. The time spent supplying information is disproportionate to the amount of funding received. In addition, there is further concern that the information provided is not relevant or meaningful for decision-making at the bureaucratic level.

Category 5: Increased Vertical and Horizontal Integration at Government Level

Introduction:

The following category describes the discussion that emerged about the current approach by government departments to administer and communicate programming requirements and needs. This section includes discussion on collaboration, integration, and single window approaches.

Participant Discussion:

Most dialogue participants acknowledged that a higher level of collaboration is needed between government departments. As one participant stated, there is a “lack of dialogue between funders and government bodies and between departments.” Another said that “communication between departments is uncoordinated and at times, departments appear to be in conflict with one another.” For example, the INAC Head Start program is different from the Health Canada Head Start program, and that can be confusing.

More emphasis should be placed on disseminating project knowledge and staff training programs. Some participants stated that it is very helpful for communities to have a greater understanding of what programs exist and how to access this information. The government needs to be the hub for this information.

“[We need] more coordinated services between departments. All three programs are situated close together in the community, yet all three do not work in conjunction with each other.”
- Alberta respondent

When dialogue participants were asked to share their views on whether or not an integrated, coordinated, or a single window approach would be helpful, it was clear that there were many questions and concerns surrounding what these approaches would mean for the programs. There was a concern among nearly all participants that any integration or single window approach might lead to a decrease in funding. Many questioned whether or not an integrated program would work. Participant comments included the following:

- There needs to be a consistent national definition of *integration*, *coordination*, and *single window*, and an understanding of programs.
- There is a lack of clarity as to what it means to have an integrated program.
- There was concern that a single window approach will lump communities together, resulting in a loss of control for communities and organizations.
- The single window approach is interesting, but must be carefully considered.
- “Single Window” means different things to everyone. The government has to know the dynamics of each community.

There was, however, support among many participants for an integrated or single window approach if it meant streamlining access to services. Some participants stated that better coordination could help to bridge gaps in services and lead to better programming. A single window approach could help to reduce costs, improve access, and decrease the amount of reporting. “Each of the pieces will be stronger when they are well integrated and coordinated,” noted one respondent.

“Departments should collaborate and cooperate on a national level, just as communities are required to do on the local level.”
- Happy Valley–
Goose Bay workshop
participant

Participants at a Northern workshop provided their views on how to make the one window approach more helpful:

- Establish common procedures among all one-window parties.
- Submit one proposal to simplify funding access.
- Submit one report to all sources to help decrease administration costs.
- Develop a workplan.

A number of participants at one workshop indicated that where current ECD programs and services are working well, there is no need for the government to integrate services into a single window.

Many dialogue participants acknowledged that an integrated approach is needed for children’s programs, but expressed concern as to how this will “look” and how it will affect funding. One suggestion was to review an already acceptable model of integration to determine what makes it successful. However, some participants cautioned that restructuring takes resources and can have a detrimental effect on fundamental issues in affecting communities.

In addition, participants at several workshops noted the difficulty in integrating programs that have different mandates or “perceived overlap of mandates.” Along with this goes a “need to ensure that the quality and unique aspect of each program is maintained.”

At many of the workshops, participants identified a need for flexibility at the community level. One participant summed up this issue saying, “Give flexibility to the community to deal with some of the gaps—let communities articulate their own needs and priorities.” Some participants asked that the government “trust” communities more.

Summary Analysis:

“More long-term stable funding would help maintain personnel [and avoid] having to change over staff. ... Having comprehensive service coordination in the collaboration of all the programs would support children and families.”

Many dialogue participants believe that there is a strong need for increased communication between the federal government, provincial governments, regions, and communities. While there are still some questions and concerns surrounding integration and a single window approach, many participants agree that the approach needs to be sensitive to the needs of communities and must recognize cultural differences. Moreover, many participants expressed the hope that this information would come from greater communication and increased involvement from the local level.

Bureaucratic silos create barriers to efficient Aboriginal ECD programs. Although four federal departments offer Aboriginal ECD programs that are similar in intent, the vertical lines of authority, jurisdiction, and operations often lead to duplication and lack of flexibility in program delivery.

As noted in category 4, participants find that too much energy is devoted to meeting the needs of the bureaucracy rather than meeting the needs of the children. There is a need to increase

integration in the government processes—both vertically and horizontally. There is an impression that horizontal integration currently only occurs where there is individual political will. Policy should support meaningful federal collaboration and horizontal integration. There is an identified need to streamline bureaucracy across departmental programs. In addition, there is a need to increase vertical integration within departments and between the Aboriginal delivery mechanism and the bureaucracy. Participants identified a need for increased communication including a clear understanding of the continuum of care for Aboriginal ECD and an understanding of the existence of other programs and criteria and how to access them.

Category 6: Aboriginal Service-based Organizations/Community Family Interface

Introduction:

*“Promotion of Inuit culture and tradition is a key element in program design and delivery.”
- Iqaluit workshop participant*

This category identifies general themes that emerged from the ARI Dialogue regarding the interface between the Aboriginal service provider and the program participants, including communities, families, and children. This section offers insight about program delivery, best practices, and government support of community program and service delivery.

Participant Discussion:

6.1 Delivery of Programs and Services

Dialogue participants commented on the aspects they liked about existing program and service delivery and what they would like to see improved.

What Dialogue Participants Like About Existing Programs

In general, dialogue participants appreciated that the programs exist and “are geared toward the investment in our children’s future,” as one participant stated.

Participants identified a number of favourable aspects of current ECD programs:

- The approach to service delivery is community based and flexible—communities can decide their own priorities and tailor programs to meet their needs.
- The philosophy of 0–6 early intervention, and its focus on prevention and proactive approach.
- Parents have a voice in programs and how they are run. They are involved in activities with the children, which helps develop parenting skills.
- The range of programs address physical, mental, emotional, and spiritual aspects—it encompasses the whole child.
- The proposal approach helps communities focus on objectives for the project and promotes accountability.
- They provide networking opportunities.
- Programs help to build local capacities.
- They present opportunities to develop culturally relevant materials.
- Communities can integrate some funding from different sources for programs.
- The programs make a difference in the lives of people.

“The programs normally use local people and therefore training is provided in the community. This helps to build capacity and also provide employment.”
- Iqaluit workshop participant

Suggestions for Improvements

The most frequent suggestions by dialogue participants for improving existing services included increased funding, improved process for accessing funding, streamlined reporting, more equitable access for all Aboriginal children to ECD programs, training for staff, more communication about programs, allowance for multi-year planning, and infrastructure development.

Other suggestions for improvement included the following:

- Provide more flexibility in mandates to do joint programming.
- Involve the community in program design, criteria, and evaluations (including on and off reserve First Nations, non-status Indians, Inuit, and Métis).
- Provide more focus on special needs children.
- Provide more childcare spaces for Inuit children.
- Fund more culture and language programs.
- Share program information.
- Provide more networking opportunities.

- Provide funds for sustainable, long-term planning.
- Improve data collection and fund longitudinal studies.
- Coordinate federal and provincial efforts.
- Recognize the value of ECD work and workers.

“Sometimes programs are not approved until November. This means that all spending must occur between November and March 31st, which is impossible due to difficulties with purchasing materials and supplies during that time of year in the North.”
- Iqaluit workshop

6.2 Best Practices

Many examples of best practices and program integration at the community level were provided in all forums. At the same time, participants asked governments to provide the flexibility, funding, and support to recognize and encourage initiatives to improve the integration and effective delivery of ECD programs for all Aboriginal children.

A number of common elements of best practices in coordination and integration of services were identified. These are described below, followed by specific examples of best practices currently being implemented.

Program and Facility Integration

When ECD programs are brought together for streamlined access, parents gain admittance to a number of services. Combining two or more ECD programs among Aboriginal Head Start (AHS), CAPC, CPNP, FNICCI, BFI, and Early Childhood Intervention Programs (ECIP) has been successfully accomplished in some communities across Canada. Integration with provincial programs was also cited as a best practice. Programs that share facilities and/or programs may benefit from combined administration and shared expenses, staff, resources and information. Best practices in ECD may also include having the programs working closely with other agencies and initiatives, such as Friendship Centres, child development centres, health professionals, schools, RCMP, training organizations, special education, dental, language programs, community kitchen, and cultural centres.

Suggested “Best Practices”

The Ashea Head Start program on Kwanlin Dun First Nation in the Yukon works with the Child Development Centre, which is housed in the daycare building. The programming is coordinated with other

agencies and initiatives, e.g. health centre, nurse-operated programs, mini-workshops with children, RCMP officer talks on safety, and a support group for parents. The key features of the integrated program are early intervention, working with staff, speech/language work, working with the program coordinator, and accessing funds from BFI. The Ashea Head Start program is open to all of Whitehorse. Also in the Yukon, CAPC funding is used to form partnerships with Dawson City, Ashea, and the Child Development Centre to represent all communities. There are separate budgets and separate programs, but these work in partnership under the direction of the Health Director.

“If it works, don’t fix it.”
- Halifax workshop participant

The purpose of the First Nations Early Childhood Circle (FNECC) is to develop and recommend structures and mechanisms for Saskatchewan First Nations to work together in actively supporting the healthy development of children within the context of their families, First Nations cultures, and communities. The FNECC goal is to move from disconnected ECD programs (such as BFI, FNICCI, prenatal, ECIP, FASD intervention programs, and Head Start programs) to the development of comprehensive programs that will cover children from birth to the school system.

The community of Arviat, Nunavut demonstrates effective coordination and integration of ECD programs by bringing them together under an umbrella of an Early Childhood Committee, which operates under the auspices of the Arviat District Education Authority. The committee is composed of parents of children in the programs, educators, nurses, and community members. Along with the Early Childhood coordinator, the committee does the hiring for the programs, writes the policies, assists with decisions on the running of the program, approves the budgets and evaluates staff.

Conne River, Newfoundland and Labrador, has successfully integrated the Conne River Health and the Social Services Centre on reserve. The administration is combined and a pool of funding sources is used for all community programs. A comprehensive Band agreement exists for funding from several sources. This integration of health with social services is coordinated with the Centre for North Atlantic Training to integrate cultural relevancy in programs.

Programming

Best practices in integrated ECD programming should include all aspects of children's health: mental, physical, emotional, and spiritual. Cultural values should be integrated into ECD programming with Aboriginal involvement. Elders could be involved in language promotion, programming development, teaching on cultural issues and as advisors. Parental involvement and support in the development and implementation of ECD programs (including addressing barriers such as transportation) were also cited as components of best practices in ECD program delivery. Dialogue participants also highlighted the need to integrate special needs children into ECD programming.

*“Government departments need to come together to form one federal policy for Aboriginal children, [determine] one strategy, build partnerships, and share resources.”
- Edmonton workshop participant*

Examples of Best Practices

At the Aboriginal Health and Wellness Centre in Winnipeg, all staff are Aboriginal people. Staff conduct home visits and integrate traditional and cultural resources with modern techniques and knowledge. Native traditional thought and the concept of the medicine wheel (which teaches the balance between emotional, spiritual, and physical health) is integrated into the programs. CAPC involves Aboriginal families in their homes. This is non-threatening and more effective. The site caters to status, non-status, Inuit, and Métis peoples.

The Skwah community of Chilliwack has had a successful preschool and kindergarten to Grade 4 program for 30 years. Although teachers are not Aboriginal, many have committed to the program for over 20 years. Much time has been invested in knowing and involving the parents. School activities engage the whole community. Community members recognize and value the ECD programs, and take measures to safeguard them from political issues. Long-term strategic planning for capacity development is found to be a major key in success and sustainability.

Information Sharing

Best practices should be shared among service providers, Aboriginal organizations, governments, and communities. Participants cited the ARI Dialogue on ECD for Aboriginal children as a positive example of this type of sharing. They asked for more opportunities to share information in workshops or at conferences, as well as other ways to network, such as an ECD website or via video-conferencing, so that participants can become aware of

available programming, compare common issues, and learn from best practices. At the community level, communications should be improved among parents, teachers, and service organizations. Some participants suggested that Elders and community leaders become involved as advocates for ECD programs.

*“Communicate with parents, teachers, and Elders at workshops. Our culture plays a role in keeping our language and learnings of the Mi’kmaq in our community.”
- Nova Scotia respondent*

Examples of Best Practices:

The Igloolik AHS, CAPC, and Brighter Futures model is a good example of a best practice. They have access to federal funding as well as the Territorial Government’s Healthy Child Initiative. They made a best practices video of this program, available through the Department of Education by email at leafloor@gov.nu.ca. One building houses all three programs. It creatively manages AHS, Drop-in Parent, teen parenting, prenatal, home visiting, resource library, and other activities and looks at ways to get the community involved. The sponsor is the District Education Authority.

Prince Albert, Saskatchewan was one of the pilot sites for the National Longitudinal Survey of Children and Youth (NLSCY). The Prince Albert NLSCY study provided information on community social indicators, barriers to accessing services, family structure, mobility, socio-economic status, readiness to learn, education levels, and youth crime. The information compiled will be used to develop knowledge on how childhood experiences shape learning, health, and well-being, to track children’s progress, and to build the community’s capacity to improve childhood development.³

³ From: “Understanding the Early Years - Prince Albert Saskatchewan Site, The National Longitudinal Survey of Children and Youth: the Insights it Provides.” The “Understanding the Early Years” program is sponsored by the Applied Research Branch of HRSDC. The program assists communities across Canada in improving ECD.

6.3 Government Support of Community Program and Service Delivery

*“We are asked to coordinate at the community level, but there are differing reports and criteria. The government needs to coordinate at the upper levels.”
- Saskatoon workshop participant*

Some dialogue participants expressed concern that government support for coordination and integration of services at the community level was lacking; communities often act on their own initiative and in some cases, supplement funding using their own resources. Other participants worried that governments may view the community integration of programs as a way to initiate cutbacks. One workshop participant said, “The government could perceive the partnerships in programming as duplication in services, resulting in programs being cut.” Participants agreed that integration of programs and services at any level should not be undertaken unless the mandate, identity, and philosophy of each individual program remained intact.

Some participants suggested that the government departments need to play a role in facilitating the integration of programs at the community level. One suggestion was to “bring ECD programs into organizations that deliver numerous family/social programs, so that services can be integrated within the organization.” Others suggested that the federal government clearly articulate how communities can coordinate programs, and they can access resources and funding from the various agencies. Participants also asked governments to synchronize programs at the departmental level, which would in turn facilitate coordination of programs and service delivery in the community. Again, participants indicated that communities need the flexibility to deal with gaps and articulate their needs and priorities.

Increased communication and collaboration with the federal government on how communities may better integrate services was seen by many participants to be of benefit for children’s programming. “For us, we only see a small piece of the whole iceberg and so are not aware of what the implications are of expanding or consolidating programs,” said a participant. “In communities we are trying to run good programs, and the better able we are to coordinate these, to administer these, and to offer training, improved programming and linked services, the better.”

Summary Analysis

As in the previous five categories, the main issues identified relate primarily to the government process rather than the community or service delivery processes. Participants have been quite innovative and effective at delivering programs efficiently to the targeted client group. Some participants have successfully created linkages between programs to offer a continuum of care. They require greater flexibility at the community level to continue to build upon these practices, flexibility that must be authorized by the government process.

CHAPTER 4: Regional Findings

Northern Region

The Northern Region includes communities within the Yukon, Northwest Territories, and Nunavut.

A key concern voiced by dialogue participants in the Northern Region was that the proposal process for obtaining funding is very involved and complicated. A number of participants suggested moving toward the development of workplans as opposed to proposals. Some noted that proposals become too criteria focused—and not enough of the focus is placed on community needs. Moreover, workplans should emphasize multi-year funding (a five-year plan was suggested), which allows for communities to put their plans into action with enough time to see results.

A number of participants mentioned the additional challenges of providing ECD services in the Northern Region, in particular the recruitment and retention of staff. Many participants articulated the need for competitive salaries and benefits including vacation travel and relocation allowances. Those from smaller communities noted the difficulties in attracting qualified workers. Many commented that they were unable to compete for staff due to lower wages. One participant observed that daycare coordinators in smaller communities often work directly with children, leaving little time for administration.

Additional concerns included the difficulty in getting supplies, inadequate funding for supplies, higher start-up costs, and the fact that shipping and other costs are not always compatible with fiscal year funding. Overall, it was suggested that per capita funding does not reflect the reality of what it costs to run a program in the North and the cost of living in the North. Moreover, some participants stated that funders need to recognize the unique needs of the Northern Region and should not replicate southern models in the North.

Of concern to many dialogue participants was the need for greater funding for capital costs. Most Inuit, First Nations, and Métis are not able to meet the needs for programs and services due to a lack of facilities and infrastructure. Some participants noted that more communities want ECD programs but do not have the infrastructure (buildings, basic needs, trained individuals) in place or adequate funding for infrastructure in which to hold or support program delivery. There is a need for more information on how to access funding for capital dollars.

Also of concern to a number of participants was the ability of programs to meet the needs of the Northern Region. The eligibility criteria for programs are based on First Nations, and the Inuit are expected to fit into that mould. Participants in Nunavut asked for programs that are relevant to the Inuit population. The North does not have a reserve system but is self-governed—programs designed for on reserve do not meet Northern needs. It was suggested there is a need to develop

programs specifically for self-governed Inuit, First Nations, and Métis. In Nunavut, it was pointed out that there is a discrepancy between what is available to Aboriginal people who live on reserve in Canada versus the Inuit population. First Nations receive more money and have access to more programs. In Yellowknife, dialogue participants suggested that there should be equal access to funding for Métis people and that the FNICCI include Métis people.

A number of participants noted a need for improved dialogue between federal departments and territorial governments and between territorial governments and First Nations. Many participants described the need for greater information exchange, noting that a lack of communication can lead to a lack of understanding. A number of participants made suggestions for improved communications including an ECD workshop to discuss available programs and success stories, site visits, and more collaboration with each First Nation. It was also suggested that there be a Northern Secretariat office located in the North to increase communication between federal and territorial governments and communities.

Atlantic Region

A key issue identified by dialogue participants in the Atlantic Region (which includes Nova Scotia, New Brunswick, PEI, and Newfoundland and Labrador) is that there needs to be universal access for *all* Aboriginal children to *all* federal ECD programs, regardless of background, residence, community, or region. Some participants called for equal access to childcare—without red tape—for urban and off reserve people. Others indicated that cultural bias should not play a part in ECD programs. However, it is important to incorporate cultural awareness, language development, social situations, and community issues into ECD programs.

Many participants in the Atlantic region agreed with the principle of equal access and eligibility for Inuit people. Some participants called for federal departments to develop a deeper and clearer understanding of the Inuit culture and needs. Many made note of the discrepancy between programs available on reserve versus those for the Inuit population: First Nations get more money and have access to more programs. For example, Inuit are not eligible for cultural language development in schools, as are the Mi'kmaq. An improved ECD system would fund programs that are relevant to the Inuit population.

A key issue identified by some participants in the region relates to the costs of running ECD programs in the North. For example, extra costs are required to pay competitive salaries, obtain supplies, relocate staff from outside the community, construct buildings, obtain perishables, and purchase equipment.

Some participants in the Atlantic Region commented that federal ECD programs that work and are well run should not be “fixed” through a multi-departmental approach. Most agreed, however, that improvements should be made to streamline the access, funding (consistency, continuity, and

timing), reporting, and evaluation of programs. Many participants emphasized that eligibility requirements should be clearly and consistently defined and be the same for all programs. Some advocated a larger capacity for AHS/daycare spaces. Aboriginal community involvement in the design and delivery of ECD programs (including determining who should be eligible) was also seen as important.

Another suggestion was to provide urban Aboriginal Human Resources Development Agreements with childcare dollars to complement their AHRDAs. The development of a closer relationship between the federal government and AHRDA holders was seen as helpful for the clients.

Québec Region

A key issue identified by dialogue participants in the Québec Region (which includes Nunavik) was that funding is often not available or accessible to urban (off reserve) communities. One participant noted that off reserve programming encompasses the Aboriginal Head Start Program for children between the ages of 0 and 6 and the Urban Multi-purpose Aboriginal Youth Centre for persons between the ages of 12 and 29, but there are no services for children 6 to 12 years old. On reserve communities, however, have access to after school programs for this age group. A number of participants identified other gaps in ECD services in urban communities:

- There is no provincial/territorial technical support in urban communities.
- Often, off reserve programs are not specific to Aboriginal people.
- Off reserve communities have gaps in services for prenatal care.
- Homelessness is an issue in urban communities, where children without an address cannot obtain services such as daycare.

A number of participants were concerned about the proposal-writing process for funding. Too often, proposals create competition among services providers. Many participants categorized this as “unproductive” and said that they would rather work collaboratively with other service providers. Of concern to a number of participants are the additional complexities related to the delivery of ECD programs and services experienced in the Québec Region. Québec is unique because of its languages (English, French, and First Nations and Inuit languages). Participants noted that the assigned budgets are underfinanced by 10–15 per cent because of the necessity to translate into French, English, or Aboriginal languages. For example, it is extraordinarily expensive to provide simultaneous translation and translate all documents for public consumption—expenses that are not incurred in other regions.

Additional complexities include poor relations with provincial/territorial governments as well as federal fragmentation. Also unique to Québec is the Centre de la Petite Enfance (CPE), which is integrated with Head Start Centres. However, participants noted that as CPE does not focus on

Native language and culture, these teachings are therefore left to the Head Start Centres and older generations.

In Québec, some participants proposed developing a model to set up a commission that would accept projects, and manage and coordinate programs. This commission, once established, would be in the hands of First Nation and Inuit peoples^{4, 5}.

Ontario Region

A key issue for dialogue participants in Ontario is the need for the federal government to address the north/south and urban/rural disparities in program and service accessibility. Seventy-five per cent of the Aboriginal population lives off reserve, but the funding formula does not match the population. A number of Ontario participants noted that urban Aboriginal and Métis children should be able to access all programs and services that are provided on reserve.

The unique situation of Northern Ontario and remote communities was also of concern to some dialogue participants. For example, there are three childcare centres and three Aboriginal Head Starts for 24 First Nations in Northern Ontario. Some participants asked that priority for funding be given to areas where there is no access to current services.

For many Ontario participants, increased funding to meet program needs is an important issue. A number of Ontario dialogue participants suggested that there should be improved access to funding, to the programs themselves, and to information about the programs and services. They suggested a collaborative rather than competitive approach to funding for communities. Funds clearly earmarked for Aboriginal children should be set aside for a holistic approach to be managed by an Aboriginal management committee that would allocate the resources appropriately and effectively. Involving Aboriginal people on and off reserve in the design, development, and implementation of future ECD programs was seen by many Ontario participants as an important way to ensure that communities have culturally relevant programs that meet their individual needs.

Manitoba Region

A key concern expressed by dialogue participants in Manitoba was the need for a comparable level of services for both on and off reserve children and families. As one participant noted, programs offered off reserve have a larger area over which to provide services for and include the non-

⁴ FNIHB clarified that a First Nations Commission already administers some funding in Québec.

⁵ HRSDC clarifies that mainstream funding under the ECD Agreement is transferred to the provinces, whereas funding for Aboriginal-specific programs are *not* transferred to the provinces.

Aboriginal population. The need for equality of ECD services was emphasized by many who noted that all children should have the same opportunities to access programs. Similarly, many participants stated that there was a need for compatible objectives and guidelines for on and off reserve, and called for fair and equitable standards for delivery of programs.

More funding is needed for training staff. Many participants commented on the lack of resources to train and upgrade the qualifications of early childhood educators. More training dollars would help to keep staff up-to-date and current with ECD initiatives.

A number of participants also voiced concern that not enough Aboriginal persons are involved in the program planning process and that direction is lacking from community members in addressing the real issues. Some participants stated that they are often forced to fit the child into the program rather than the program to the child. Moreover, some participants in Manitoba argued that the community should decide the program. There should be an increased level of parental involvement in programming; including parents in programming would help to strengthen parenting skills.

Saskatchewan Region

According to a number of dialogue participants in Saskatchewan, the federal government needs to provide clear and detailed information on available programs to the communities. Some participants suggested that this could be done through a designated contact at the federal level who was accessible to service providers and could provide clear information on available services. An ECD website (i.e., a separate site from the three departmental sites) could serve this purpose. Also advocated was improved communication at all levels: federal, provincial/territorial, tribal council, reserve, and ECD service deliverers. Some participants indicated that there would be value in sharing information among communities (and provinces) on reports and best practices to learn from one another on where improvements could be made.

In Saskatchewan, many dialogue participants highlighted the need for decision-making at the bureaucratic level on ECD policies, programs, and services to be informed by research (e.g., models of child wellness), community evaluations of programs, and values that are generated by the community. Many participants said that the federal government should have the child and family as the primary focus. Funds earmarked for children's programs should go directly to children and communities, not to government bureaucracy or other government purposes.

As well, participants called for ECD strategies to clearly define a role for Métis people. Despite the fact that Métis and First Nations often live side-by-side in a city, programs and services tend to favour First Nations cultures. One participant suggested that the federal government largely excludes Métis from "Aboriginal" and the provinces largely deny that Métis are in their jurisdictions. Many Saskatchewan participants advocated either that the "status" barriers be removed, or that ECD services—including daycare, preschool, nutrition, and language initiatives—be targeted to Métis children.

Many participants noted that ECD policies on and off reserve need to be synchronized (e.g., childcare subsidies cannot be accessed off reserve). In particular, some participants pointed out that continuity of services was an issue for people in transition between on and off reserve, and many stressed the need for equitable access for all Aboriginal children to all ECD programs and services.

Communities need flexibility to address local needs. Some participants indicated that a common template or single approach would not be appropriate: local input on programs, administration, evaluations, and guidelines were seen as important for decision-making. A key issue for many Saskatchewan participants was the inability to undertake long-term planning due to issues related to funding decisions, timing, and criteria. These participants indicated that they would like planning for ECD programs (and the funding process to support the planning) to be sustainable over the longer term (e.g., 3 to 5 years).

Alberta Region

Of concern to a number of dialogue participants in Alberta was the need to provide better services for children with special needs. This includes an improved referral system as well as increased funding for special needs' assessments. In addition, several dialogue participants saw a need to ensure that special needs children can receive support in their own communities. Many described examples of having to refer children to clinics in other regions in order to get support because services for special needs were not available within their communities.

Many participants in the region were concerned about the lack of understanding from government with respect to Aboriginal communities and values. They called for a cultural component in all programs to better understand the language, spirituality, emotion, and intellect of Aboriginal communities.

Also of note was the need to improve the way CFS funding is allocated. Many participants stated that there is no funding available to help children who remain in the home—funding is only available once the child is removed from the home. One participant described this process as contrary to the *Child Welfare Act*. Another noted that no funding is available for 33 per cent of the children that she works with.

Some participants wanted to see more emphasis placed on “life-long commitment, including more funding for early intervention and prevention.

Many participants stressed that funding needs to be available for all Aboriginal children, including non-status children. Current funding arrangements do not allow small Inuit/First Nations/Métis communities to carry out programs. One suggestion was to provide a mobile unit to bring programs to more isolated towns.

A number of participants noted that it is difficult to work with other service providers and to integrate with different departments when the regional and national levels are not integrated. Some participants, recognizing that it is difficult to address the Aboriginal needs in providing ECD programs in Alberta, suggested that an Aboriginal ECD Advisory group be formed for this purpose.

British Columbia Region

Many dialogue participants in British Columbia mentioned the need for the federal government to ensure equity in access to programs across the province: on reserve, off reserve, urban, remote, Northern, and islands. Participants in the region highlighted the discrepancies in people's ability to access ECD programs off reserve versus on reserve, particularly with respect to culture and language programs, special needs program and services, and training resources for ECD students.

One group of participants estimated that at least 50 per cent of Aboriginal peoples live off reserve, yet the services focus on on-reserve communities. One suggestion was to undertake a comparative study of on reserve versus non-Native daycare centres to observe the differences, as a starting point for addressing them.

Many participants in British Columbia cited funding inequities as an issue. A number of communities are well funded with the resources and capacity to write proposals, while others—the “have-not” communities—are discriminated against in obtaining funding due to their lack of capacity to write proposals. One suggested solution was to consider oral presentations of a community’s needs, and provide assistance for writing the proposals.

Another suggestion was to make the funding process a need-driven rather than proposal-driven process. For example, 250 Native communities in British Columbia do not receive childcare funding, and these “have-not” communities should be given priority for new funding.

It was suggested that the unique needs of communities in remote and Northern areas (e.g., increased cost of living, need for training and capacity building) be recognized. Many participants advocated for a design and policy planning process for ECD programs and services that includes all communities in the region.

Another issue raised relates to additional service requirements needed for special needs children (i.e., children with disabilities). There are long waiting lists for children with special needs. Some participants mentioned that although all three federal departments have collected data on special needs children, no training dollars are provided for adequate training of resource and support persons, child development, consultation assistance, or needs assessments for capacity building. More support is needed for other special needs programs, such as FASD and Aboriginal Infant Development.

The need for ECD training—particularly culturally relevant training for administrators, front-line workers, teachers, helpers, nurses, and parents—was highlighted by many in the region. In addition, training is needed in the communities to build capacity and to keep the trained personnel in the communities. Weekend training or distance courses may be one way to achieve the training objectives.

Some participants mentioned the difficulty of obtaining information on all the programs and resources available, including an understanding of the philosophies of the various programs. These participants suggested that community support be provided for asking questions and obtaining information through an independent (non-government) ECD body that could also provide advice on funding allocations. There was agreement on the benefits of having Aboriginal people from all over the province involved in planning for improved ECD programs and services. The goal should be to ensure equitable provision of quality programs and services across the board in British Columbia.

CHAPTER 5: Dialogue Summary Findings (By Question)

This chapter provides a summary breakdown by question of the views expressed by people taking part in the National Dialogue activities led by the Aboriginal Research Institute team. These views were expressed through attendance at workshops, participation in a telephone interview, or completion of a questionnaire in hard copy or on the website. These questions were provided in Health Canada's *Participant Guide* and used consistently in all data collection activities.

1 a) What are the federal children's programs that you are aware of in your community?

Federal Programs:

- Aboriginal Head Start On Reserve (AHSOR): Health Canada, FNIHB
- Aboriginal Head Start Urban and Northern (AHSUN): Public Health Agency of Canada (PHAC)
- Community Action Program for children (CAPC): PHAC
- Better Futures Initiative (BFI): PHAC
- Canada Prenatal and Nutrition Program (CPNP): PHAC
- First Nations Child and Family Services (FNCFS): INAC
- National Child Benefit Reinvestment (NCBR): INAC
- Special Education Program: INAC
- First Nations Inuit Child Care Initiative (FNICCI): HRSDC
- Family Violence: Health Canada and INAC
- Parental Engagement Programs
- FASD: Health Canada, FNIHB
- Early Childhood Intervention Program (ECIP)
- Building Healthy Communities: Health Canada, FNIHB
- Babies Best Start (CAPC): Health Canada, PPHB

Provincial/Territorial/Other Programs:

- Daycare centres
- Nursery schools
- Provincial/Territorial Health and Social Services
- Québec daycare program
- Healthy Baby and New Parent-Child program
- Early Years Challenge Fund
- Child Welfare Agreement
- K4–K5

- Baby First
- Early Start
- Babies First Steps/Babies Best
- Healthy Start for Mom and Me
- Aboriginal Healthy Babies/Healthy Children
- Native Child and Family Services
- Aboriginal Diabetes Initiative (not just for children)
- Aboriginal Healing and Wellness Strategy
- Family Resource Centre

b) What do you like about how these programs operate?

Children

Many participants expressed their appreciation for programs that invest in children's futures and embrace an early intervention philosophy. They noted that programs are having a positive influence on Aboriginal children in many ways, including affirming their identity through the redevelopment and promotion of culture.

Parents

Many participants stated that they like that the programs involve both parents—and not just mothers—which has a positive influence on the parents and the program. Some participants noted that parents benefit from nutrition and parenting skills education, and are having a voice in programming direction.

Community

Participants agreed that they liked that programs are run or managed at the community level. Many participants indicated that the grassroots approach allows for local ownership and program delivery, with community management also enabling community growth and capacity building.

Administration/Reporting/Funding

Some participants provided positive feedback on the administration of program funding; however these comments were very specific in identifying which departments they were commenting on. For example, some found that HRSDC was flexible in providing additional money for childcare seats, and commented that HRSDC's reporting system was clear and to the point. A few participants stated that funding should go through an HRSDC AHRDA-like process for all three departments.

Some participants also liked that the FNICCI has a five-year funding agreement that allows certain dollars to be rolled over from year to year. These participants noted that the FNICCI criteria are flexible and reporting is manageable. In terms of reporting, many participants also remarked that they liked that daycares are only required to write financial reports, not quarterly progress reports.

Some participants observed that proposals help communities focus and create specific goals and objectives and provide accountability and funding protection. Many participants stated that they like that CAPC offers more stable funding (i.e., three-year funding programs) that allow for capacity building. Finally, many participants indicated that they appreciate having access to evaluation tools and statistics generated by client reports.

Many participants value the Aboriginal Head Start holistic philosophy, which includes education, nutrition, social support, parental involvement, health, culture, and language. They also like the fact that Aboriginal Head Start is offered on and off reserve.

Coordination/Integration

Partnerships and coordination were emphasized by most of the participants as elements they like about current federal programs. In particular, they stated that they like the many partnerships between Aboriginal Head Start and local daycares, as well as partnerships with other resources such as schools, health centres, and provincial/territorial Family Resource Centres. Participants from communities where services are seamlessly amalgamated were particularly happy with the way the programs work.

Some participants also mentioned that they like the combined evaluation of Aboriginal Head Start and CAPC, and the sharing of information between the two. One participant noted that regional working groups and tribal council's monitoring are working well.

Other

A few participants voiced their appreciation that the federal government knows and recognizes the problems, particularly the challenges and difficulty of reporting. Some like the guiding principles offered by the departments and the opportunity to develop culturally relevant materials and programs. Others like the variety of programs that serve different purposes and give families a choice.

c) What do you think needs to be improved?

Administration/Reporting

There was agreement among most participants that proposal writing and reporting are problematic. Proposal writing was described as costly. The short three-week period to submit is inadequate to build partnerships and get community buy-in.

Most participants were unhappy with the repetition between reports and the frequency of reporting. Many found that reporting was complicated and requires training. Instead, they would like to see a single reporting and funding instrument with common accountability and framework.

Most of the participants at the Québec workshop stated their frustration with timelines and budgets for administration since they are required to report in as many as three languages (French, English and an Aboriginal language).

Finally, many participants from small and large communities commented that the formula (i.e., standards and timelines) does not fit small communities.

Funding

Dialogue participants agreed almost unanimously that the funding formula is flawed: funding does not match community needs, and there is a disconnect between the needs of communities and the planning framework. Some participants indicated that the funding does not reflect the reality of what it costs to run a program in the North or the cost of living in the North. Many participants also mentioned that funding comes late in the year, with no carry over, leaving only one to three months in which to develop programs. Most participants called for a long-term commitment/sustainability provided on a workplan basis rather than a proposal basis. Most agree that proposal-driven funding is a problem.

Participants commented on the inequity of funding allocation. Funding is not available or accessible to urban centres; there is a large gap between on and off reserve funding sources. One participant noted an approximate \$6 million difference between the two. Most suggested that the problem lies in the eligibility criteria, which need to be improved, and the lack of consistency between funders. Some suggested that funding should be allocated from a “healthy community builds healthy families” perspective.

In terms of criteria, many participants remarked that some types of funding are limited by the criteria; often the community has to fit its needs into a criteria “box.” A few participants observed that program managers need to be able to clearly explain what their funding can provide, what it covers, and what it cannot be used for.

Funding requirements include capital funding and operating funds, i.e., for physical space, transportation, special needs assessment, administration, training, and capacity. Many participants suggested that more funding should reach children rather than being used for administration.

Awareness was also an issue raised by many participants. These participants noted they are not provided with full information on the funding programs available to them. Finally, a few participants

think that they should not have to compete with other First Nation people for funding. They want to eliminate the competition between groups.

Coordination/Integration

Most participants agreed that better communication and coordination is required among the three levels of government and the three departments. They also agree that there should be integration of administration, streamlined reporting, and information gathering/sharing.

Gaps

Some gaps in the ECD programs were identified during the dialogue process. Many participants identified the gap in services for children between the ages of 6 and 12. They noted that youth centres in some areas start at age 10 and The Urban Multi-purpose Aboriginal Youth Centre Initiative is for children aged 12 to 19.

Participants also agreed that a comparative level of services is required both on and off reserve. They highlighted the need for more money to be allocated to Métis and other Aboriginal people living off reserve. At one workshop, a participant mentioned that 250 Native communities in B.C. do not have childcare funding. Many participants noted that programs are needed to help improve parenting skills.

Most participants were concerned about issues of inclusion: programs only have so many spaces available and therefore do not meet the needs of the community. Some participants mentioned that many programs are for “at risk” children (e.g., academically challenged, speech/language disability) and not for others. For example, there is no help for gifted children.

Other

Many participants requested respect for autonomy and decision-making of Inuit/First Nations/Métis government. They stated that not enough Aboriginal people are involved in the program planning processes.

Participants identified the lack of resources in terms of trained staff. They emphasized that childcare workers should be recognized as professionals and paid more to reduce the high turnover rate. Some participants want more monitoring of program quality indicators.

Participants from one community wanted it noted that they receive referrals from off reserve but no additional funding. Others stated that First Nations Child and Family Services should focus on families rather than funding.

2) What best practices in your or other communities demonstrate effective coordination and integration of ECD programs?

The following are the best practices identified by participants in the National Dialogue. They are very specific in their description and therefore have been listed in point form. (Entries have been recorded as filed—some examples cited did not include place names, and as such are most useful as suggestions of promising practices.) The majority of participants agree that partnerships between programs produce positive results, many times resulting in the increased availability of funds.

Following are examples provided by participants where multiple programs work out of one building or have partnered with others. The benefits identified are cost sharing of administration, maintenance, janitorial, cooking, reception, and executive staff:

- Healing and Wellness Centre, Winnipeg hosts AHS, FASD and Elders' visits.
- Opaskwayak Cree Nation (OCN), Manitoba hosts daycare, nursery, and infant labs.
- Brandon Friendship Centre, Manitoba hosts AHS, CPNP, and CAPC. Nelson House hosts the daycare, nursery, and AHS
- Cross Lake, Manitoba hosts a daycare and AHS.
- Ebb and Flow First Nation, Manitoba hosts nursery and daycare and is trying to get AHS in the building.
- Mi'kmaq Child Development Centre, Halifax hosts AHS, FASD training workshops, parenting support groups, and many other programs.
- Meadow Lake, Saskatchewan hosts daycare, AHS, and ECIP.
- Some Aboriginal Head Starts in Toronto are located in schools.
- Igloolik hosts AHS, CPNP, CAPC, and Brighter Futures in one building (best practice video available).
- Ashea AHS program on Kwanlin Dun First Nation works with Child Development Centre (housed in daycare building). Programming is coordinated with other agencies; e.g. there is a health centre where the nurse offers programs and mini workshops with children. The RCMP offers programs on safety, and there is a support group for parents.

Other best practices identified by participants are listed below.

AHS–BFI collaborated for a parent workshop.

- Linkages between AHS and daycares; joint strategic planning; share training and resources. First Nations Early Childhood Circle integrates AHS and daycare policies and regulations.
- Control of budget for four communities; one program active in all four First Nations
- A Memorandum of Understanding was used to relate licensing across sectors so that licensing models developed by the intergovernmental agencies in Saskatchewan are good.
- One individual sits on many committees, all tied to Head Start, and disseminates information to all the committees and ultimately to the community as a whole.
- Agencies sharing information on what works and what does not work, e.g., Saskatchewan Lunch Box Learning; Integrated Conferencing.
- National video-conferencing is a cost-effective way of meeting.

- Conne River Health and Social Services Centre, Newfoundland and Labrador pools funding sources, uses provincial licensing, and adds cultural components to its programs. It operates with comprehensive agreement and has a central administration for proposal submissions.
- In Hopedale, Newfoundland and Labrador, the same sponsoring agent is responsible for administering all programs.
- In Membertou, Nova Scotia, AHS and BFI work together to deliver parenting workshops.
- Big Cove, New Brunswick does joint strategic planning sessions for daycare and AHS and they share training resources.
- Some communities and tribal councils in Saskatchewan pooled resources to deliver better programs.
- Both First Nations and Métis participate in Regional Intersectoral Committee meetings.
- First Nation Early Childhood Network is a good model.
- “Kids First” holistic approach is a good model.
- There is effective coordination by Infant Development Program, Project Child, and FASD.
- Skwah community of Chilliwack, B.C. has had a successful preschool and K4 program for 30 years. Many teachers have been committed for more than 20 years. Much time is spent involving the parents. Activities are engaged within the whole community. Long-term strategic planning for capacity development is found to be a major key in success and sustainability.
- Liaison with the kindergarten program: children with development delays attend AHS and kindergarten.
- Special Education sub-committee compares tools and assessments.
- Yellowhead Tribal Council, Edmonton, Alberta integrates AHS with health programs, school, and preschool, FASD for five bands, and rehabilitation services.
- Integration of Elder’s indigenous knowledge results in success.
- Funding should range to meet the uniqueness of communities and provide more flexibility with salary caps.
- New Beginnings—the connection for Aboriginal children in Thompson, Wabowden, and Thicket Portage, Manitoba include parents and caregivers in programming with excellent results.

3) What would be the characteristics of improved federal ECD programming and delivery?

Children

Many participants identified shorter waiting lists as well as a continuum for programming beyond age six as improvements they would like to see. Some noted that earlier intervention is critical for special needs children.

Parents

Most participants agree that there is a need for more parental support and an improved family focus.

Community

Participants agreed that flexibility for program design and delivery that recognizes the diversity of communities would be an improvement. Many emphasized that the communities want to be involved in program planning and in determining who is eligible. This would allow communities to drive the process, particularly prior to design stages of new programming.

A number of participants suggested that communities should be provided with training in the application process, with access to tools and templates that can assist them with their programming, report writing, and evaluation.

Some participants stated that the government should be able to understand the language of the communities. According to a number of participants, eliminating competition between the communities would also be an improvement.

Administration/Reporting

Participants agreed that an improved reporting program would include reporting requirements suited to multiple stakeholders, not just a top-down design; a single reporting method/template; and a streamlined reporting system with input from communities. Most participants also agreed that questions need to be adapted to the reality of the Inuit/First Nations/Métis. Many indicated that an improved application process would be a simplified one with a standard proposal form or template.

Most participants stated that they would like to see less stringent reporting timelines and standardized reporting periods. Some participants mentioned that the government wants measurable results, but noted that it is not always possible to give quantitative results where children are concerned.

Funding

Nearly all participants agreed that an improved ECD program would include long-term, sustainable funding, i.e., 3 to 5 years, in order to reduce staff turnover and achieve the desired results. Most participants advocated more time to establish programs, increased funding levels that reflect the cost of living and meet community needs, and more direct funding to the community, not to an administrative body. Participants also focused on the need to change the per capita and proposal approaches for funding; proposing that community needs would be better met in a process based on workplans.

Dialogue participants also suggested that an improved ECD program would include the following:

- Increased staffing and training dollars to keep staff up-to-date with ECD initiatives on an on-going basis
- The flexibility to carry funds over year-to-year for strategic planning
- A reserve fund (good business practices)
- Capital dollars for safe buildings, renovations, transportation etc.
- More funding for parental involvement
- Equitable funding for on and off reserve as well as for Métis people.

Many of the participants indicated that they would also like to see less red tape/bureaucracy and more money channelled to community programs. Some suggested that funding for all children's programs go to one place, and that a community representative administer programs on reserve.

Coordination/Integration

Many participants agreed that coordination between the provinces and the federal government—including dissemination of project knowledge, better coordination with the education sector, and increased staff training programs—would result in improved program delivery. Some participants indicated that developing awareness between funding agencies would help to eliminate duplication and fill gaps where needed.

Participants suggested the need for an ECD website versus separate departmental websites that deal with ECD. Many agreed that one department for ECD, with one set of criteria (e.g., eligibility, reporting, distribution of funds), would improve ECD programs and services. Many participants noted that there is a need for accessible and centralized services.

Other

The following improvements were widely agreed upon by most of the participants: a consistent definition of target population, clarity in roles of departments, the need for transparency by the federal departments, and standards for facilities, services and reporting.

Some participants suggested that it would be helpful to have a resource book—an inventory and evaluation of programs and criteria with funding options. Others suggested that each First Nation should have a daycare and Head Start, and receive access to feedback and program statistics.

Some participants indicated that Québec First Nations on reserve want recognition of the fact that they get funding from the federal government and not from the province. Others suggested that the federal government retain control of funding and not transfer it to the provinces.⁶

⁶ HRSDC clarifies that mainstream funding under the ECD Agreement is transferred to the provinces, whereas funding for Aboriginal-specific programs are *not* transferred to the provinces.

4) Would an integrated coordinated or single window approach to these programs be helpful or not? Why?

Arguments in favour of a single window approach

A number of participants who indicated that an integrated or single window approach would be helpful believe that this might promote a holistic approach to programming. These participants said that if community, province, and federal levels could cooperatively build comprehensive programs, program gaps could be bridged. They suggested that an integrated or single window approach would standardize the following:

- The quality of services and programming offered in child development offices
- Consistent use of evaluation tools
- Community programs with the same goals and objectives
- Reporting and proposals (reducing duplication).

Some participants noted that there are financial savings when two or more programs operate under one roof. Submitting one proposal and one report would simplify funding access and decrease administrative costs. Many participants stated their hope that a single window approach could decrease bureaucracy. Some also noted that they would benefit from a single source for information where they could learn about best practices, find centralized data, and join a support network.

Some participants noted that an integrated or single window approach would be helpful for infrastructures issues, could achieve more with less, and could provide seamless transfer through programs for children and families.

Many participants provided some suggestions and/or requirements if an integrated or single window approach is adopted. One caveat was for an equitable funding formula with no loss of current funding. Some participants noted that an integrated or single window approach would require creative flexibility to achieve, and suggested that if such an approach is adopted, funding go through an HRSDC AHRDA-like model.

The following are comments provided by only a few participants:

- “Single window” might be better at the community level, administering programs.
- From the urban setting, single window would be ideal, because we lack coordinated services.
- If money were to be provided in a large lump sum, let the communities manage it.
- Smaller communities might not struggle so much for resources [under a single window approach], such as for speech pathologists, psychologists, etc.

Arguments against a single window approach

The following reasons were provided by participants who indicated that an integrated or single window approach would NOT be helpful. Many participants suggested that it would be difficult to

have a coordinated approach, assuming all three departments are dealing with the same stakeholders:

- Some First Nations & Chiefs contribution agreements differ. Some have the Aboriginal Human Resource Development Agreements.
- First Nation, Métis, Inuit, and urban populations need to be accommodated.
- Different regulatory requirements, (i.e., AHS) do not share the same daycare standards. There should be common standards.
- There is a need to recognize diversity.
- Existing programs have different mandates.

Participants' main concern about an integrated or single window approach was its potential to reduce funds. Without alternative sources of funding, they feared that communities would be forced to cut programs and lay off staff. Many participants stated a strong concern that the proposed approach is about the government wanting to cut costs. They worried that the government could perceive the partnerships in programming as duplication of services, and, as a result, cut programs and/or funding.

Many of the participants were also concerned that the approach might be rigid or inflexible, that they could lose control of programming, or that there could be a reduction in the number of jobs in communities. Some participants lack trust in the funders; one cautioned, "We shouldn't put all our eggs in one basket."

Many participants suggested that equitable access to funding would have to be addressed before a single window approach makes sense. They identified a number of issues of concern:

- Programs are integrated already. All we need is a common application and reporting system.
- Single policies and a single structure will not work. The approach needs to be based on collaboration and coordination that works.
- Preventative programs will suffer.
- The political voice would be weakened—if there are cutbacks, the least vocal will lose.
- Each program is distinct in its strengths; some clients prefer one program to another. A single window approach would leave all programs looking the same and mediocre.

Other comments

Some participants indicated that they wanted to know what "single window" really means and how programs would be delivered. They noted that communities want integrity, honesty, and a transparent process.

Many of the participants stated that the government would have to be sensitive to the autonomy of communities in an integrated or single window approach. These participants noted that where service delivery is addressed separately, communities may not adapt to a single window approach.

The need to be sensitive to community and cultural differences in an integrated or single window approach was also highlighted.

Some participants stated that jurisdictional issues would be a challenge, since each department (HRSDC, Health Canada and INAC) has its own bureaucracy, and there is no model for sharing. Others noted that there would need to be agreements on co-funding of broader initiatives.

5 a) Currently several federal departments offer their own separate programs for Aboriginal children, each with their own separate administrative requirements. What are the benefits to this arrangement?

The main benefit identified by most participants is that of diversity—in perspectives, in the expertise of each department, in the services within a community to meet different needs, and in the sources for funding. Many participants indicated that with a variety of leaders and approaches, there is a greater likelihood of finding out what works best.

Many participants agreed that having four Ministers to lobby increases the likelihood of receiving funds. A rejection from one department is not necessarily a closed door. In addition, the current approach forces Ministers to share announcements, potentially keeping ECD on the front burner.

b) What are the challenges?

Participants identified the main challenge with the current ECD system as the lack of capacity for reporting and proposal writing, along with the amount and duplication of reporting. Many participants expressed frustration with the different funding formulas, guidelines, and arrangements with different departments. Some noted that communities know their needs but given the current structure, cannot always write them in proposal form. Many found the criteria involved in accessing funding to be challenging.

Participants agreed that funding has never been adequate to meet needs in the communities. Many agree that there is no flexibility to develop programs and services based on communities' needs, to transfer agreements, or to carry over funds. Communities cannot plan because they may not receive funding the next time. Participants commented that this is not a good way to run a program.

The overlap of mandates and “perceived overlap of mandates” also present challenges. Communities know their mandate but do not have resources to deliver needed services at the required level.

One issue raised during this consultation process was instances in which funders misplace reports and then withhold funds. The ensuing funding delays create many challenges, leading to substandard facilities, difficulties covering Operating and Maintenance expenditures, etc. Some participants also

noted that ramifications for lateness apply only to communities; communities have no recourse if a federal department is late.

Participants identified a number of other challenges:

- Isolated towns and communities receive an inequitable amount of funds and programs.
- Non-status and status communities are funded differently.
- The lack of information sharing leads to inequities.
- Reporting in multiple languages is expensive and requires extra capacity.
- There is no definition for a well-developed cultural component.

c) What would you do to improve things?

Many of the comments provided by participants in response to Question 3 are repeated here.

Participants agreed they would prefer to submit proposals generated by community needs. They want the government to streamline reporting, coordinate reporting cycles, reduce administration costs, extend reporting cycles, and provide long-term funding. Participants indicated that they would also like to receive training for administration.

Many of the participants stated that they would like to be provided more flexibility in program design, delivery, and financial arrangements. Examples include allowing the carry-over of funds from year to year and allowing for culturally appropriate services and independent planning by Aboriginal groups.

Participants would like to see a breakdown of barriers at federal, provincial/territorial, tribal council, and community levels, increased communications and greater information exchange within the federal government. Some participants suggested a website for service providers that would describe where to get funding, detail the available programs, and provide contact- information.

Many participants would like to see a review of funding agencies to identify gaps and overlap, including a review of best practices. Some participants stated that there are many misconceptions. Many advocated that eligibility for ECD programming be made available universally, i.e., to Métis, to urban people, to all children. Program outcomes should be measures that are qualitative, and have a child focus. Priority should be given to areas where there is no access to current services.

Some participants commented that they would like Inuit/First Nations/Métis treated as equal partners. This would enhance the role of Inuit/First Nations/Métis in negotiations. Other suggestions were to hold dialogues before making recommendations to Cabinet; consult Inuit/First Nations/Métis people on defining policies; and re-examine Inuit/First Nations and Métis policies.

Many participants requested that staff working in ECD be recognized (i.e., rewarded) and paid more fairly to reduce high turnover. Another suggestion was to hold mandatory training meetings for ECD workers twice annually.

A number of participants asked for more government accountability: government should be able to show that funds are going to communities that really need them. Some participants stated that they would like more communication with the federal government. For example, they would like a response when issues are brought to the government, and, when a proposal is rejected, they need to know why, and what the grievance process is. A service contact at the federal government also needs to be familiar with the range of services available to a child. Many of the participants support holistic, culturally relevant programming, with full parental and caregiver involvement.

CHAPTER 6: Conclusions and Recommendations

Fundamental Principle for Aboriginal Early Childhood Development

Recommendation #1:

THAT federal departments embrace a child-centred approach to their programming that will ensure that the Early Childhood Development needs of Aboriginal children remain at the forefront of all programs, policies, administrative decisions, and actions.

This child-centred approach should include the equitable principle of making ECD programs widely available to all Aboriginal children including but not limited to off reserve, Inuit, Métis, Northern, and remote communities.

Vision

A consultative process is essential to developing the vision for Aboriginal Early Childhood Development. It is suggested that the first step should be that the parties come together to define a common understanding of consultation and design a process to achieve it.

Recommendation #2:

THAT the federal government, in partnership with representation from all National Aboriginal Organizations, develop and articulate a vision for Aboriginal Early Childhood Development. The vision should be child-centred and developed among government agencies.

This vision should address a continuum of care for the child's development from preconception to school age. This vision should integrate the Aboriginal perspective on raising children. The vision should integrate key principles of community ownership and control.

Recommendation #3:

THAT any integrated or single window approach be incorporated into the visioning process.

It is suggested that the federal government work together with Aboriginal stakeholders to further define coordination, collaboration, integration, and single window approaches.

Funding

Although the participants in the National Dialogue are not sure what direction the government is heading with this process, they were clear that they were willing to participate in the process because there is a great deal at stake—the future of Aboriginal children.

Recommendation #4:

THAT any reorganization or changes to the ECD program not result in a reduction of funding to either the program or the Aboriginal components of programming.

Recommendation #5:

THAT the funding process, criteria, and timing be revised to better meet the needs of communities.

More specifically the participants mention the following items as illustrative of the principles contained in Recommendation #5.

- Funding notices and deadlines should be structured to allow adequate time for service providers to plan for programming, arrange for supplies, and hire staff.
- Funding timeframes should be for 3- to 5-year intervals for effective planning of programs.
- Communities should be allowed to carry over funding from one year to the next.
- The funding application process needs to be reviewed. Many communities, especially smaller communities, are at a disadvantage in not having the capacity to write proposals. Alternatives to the proposal-based system should be investigated.
- The level of funding needs to be increased, especially for children with special needs, training and retention of staff, building maintenance and equipment, Northern communities, and those with special language translation needs (e.g. Québec).

Reporting

The reporting requirements need to be simplified.

- Streamline the reporting requirements to make the reporting less onerous, more relevant for assessments of children, and less time-consuming.
- Involve the communities in discussions on program assessment.

Recommendation #6:

THAT an integrated reporting system for all Aboriginal ECD programs be developed by Health Canada, HRSDC, and INAC.

Communications

Communications should be improved between the federal government and communities:

- Communities need more access to information about available programs, eligibility criteria, and the application process. This could be done by having one federal government contact person who can provide the information and dialogue with service providers by telephone, perhaps in conjunction with a website that provides the information for people with access to the Internet.
- The government should develop a means for networking among service providers to share best practices and discuss potential solutions to program delivery challenges.
- Direct two-way dialogue with communities is needed to ensure that the programs meet and continue to meet their needs. This communication could be via an organization set up for this purpose (e.g., a National Working Group), or through direct dialogue with government departments.

Recommendation #7:

THAT Health Canada, HRSDC, and INAC undertake a review of existing lines of communications and develop a plan that will facilitate a more equitable and transparent exchange of information.

Interdepartmental Collaboration

Improved collaboration among federal departments is required for more awareness of other programs and funding requirements, and to eliminate inconsistencies and gaps.

Recommendation #8:

THAT Health Canada, HRSDC, and INAC develop a policy mandating cross-departmental coordination and collaboration.

ECD Program And Service Planning

The planning of ECD programs and services should actively involve discussions with the communities. Ideally, communities should be able to propose changes or comment on proposed changes, criteria, new programs under consideration etc. Ultimately, when any changes are developed, they should be clearly communicated along with their anticipated effect on service

planning and delivery. Government changes to program and service delivery should be flexible enough to accommodate the particular needs of individual communities.

Recommendation #9:

THAT Health Canada consult with Aboriginal stakeholders in an advisory capacity for program planning and revisions to program delivery.

References

- (1) Health Canada. “Federal Strategy on Early Childhood Development for First Nations and Other Aboriginal Children,” October 2002, Health Canada website, <http://www.hc-sc.gc.ca/english/media/releases/2002>.
- (2) Government of Canada. “Early Childhood Development Activities and Expenditures: Government of Canada Report 2001–2002,” Published in 2002.
- (3) Government of Canada. “Early Childhood Development Activities and Expenditures: Government of Canada Report 2002–2003,” Published in 2003.
- (4) Martin Spigelman Research Associates.[Draft] “Putting the Children First: An Environmental Scan of Interdepartmental Cooperation within the Aboriginal Early Childhood Development Strategy,” Draft version released September 2003.

Appendix 1: Availability Of National Aboriginal Organizations' Reports

The National Aboriginal Organization's Dialogue Reports are the property of those organizations. They can be contacted at the following locations and websites:

Assembly of First Nations:

Address: Assembly of First Nations
1 Nicholas Street, Suite 1002
Ottawa, Ontario
K1N 7B7
(613) 241-6789
(613) 241-5806

Website: <http://www.afn.ca/>

Congress of Aboriginal People:

Address: Congress of Aboriginal Peoples
867 St. Laurent Blvd.,
Ottawa, ON
K1K 3B1
Phone:(613) 747-6022
Fax: (613) 747-8834

Website: <http://www.abo-peoples.org/>

Inuit Tapiriit Kanatami

Address: Inuit Tapiriit Kanatami
170 Laurier Ave West, Suite 510
Ottawa , ON
K1N 7B7
Phone: 613-238-8181
Fax: 613-234-1991

Website: <http://www.itk.ca/>

Métis National Council:

Address: Métis National Council
350 Sparks St., Suite 201
Delta Hotel Office Tower
Ottawa, ON
K1R 7S8
Phone: (613) 232-3216
Fax: (613) 232-4262

Website: <http://www.metisnation.ca/>

Pauktuutit Inuit Women's Association:

Address: Pauktuutit - Inuit Women's Association
131 Bank St., 3rd Floor,
Ottawa, Ontario
K1P 5N7
Phone: (613) 238-3977
Fax: (613) 238-1787

Website: <http://www.pauktuutit.ca/>

Appendix II: Acronyms

AFN	Assembly of First Nations
AHRDA	Aboriginal Human Resources Development Agreements
AHS	Aboriginal Head Start
AHSOR	Aboriginal Head Start On Reserve
AHSUN	Aboriginal Head Start Urban and Northern
ARI	The Aboriginal Research Institute
BFI	Brighter Futures Initiative
CAP	Congress of Aboriginal Peoples
CAPC	Community Action Program for Children
CFS	Child and Family Services
CPE	Centre de la Petite Enfance (Québec)
CPNP	Canadian Prenatal Nutrition Program
ECD	Early Childhood Development
ECIP	Early Childhood Intervention Programs
FASD	Fetal alcohol spectrum disorder
FNCFS	First Nations Child and Family Services
FNECC	First Nations Early Childhood Circle (Saskatchewan)
FNICCI	First Nations Inuit Child Care Initiative
FNIHB	First Nations and Inuit Health Branch (Health Canada)
HC	Health Canada
HRSDC	Human Resources and Skills Development Canada
ITK	Inuit Tapiriit Kanatami
MNC	Métis National Council
NAOs	National Aboriginal Organizations
NCBR	National Child Benefit Reinvestment
NLSCY	National Longitudinal Study of Children and Youth
NWAC	Native Women's Association of Canada
OCN	Opaskwayak Cree Nation
PHAC	Public Health Agency of Canada
PPHB	Population and Public Health Branch (Health Canada)
RCAP	Royal Commission on Aboriginal Peoples
SDC	Social Development Canada
SIDS	Sudden infant death syndrome