Indigenous Child Project Summary


- Developmental monitoring is done to keep track of what a child can do at different ages.

- Developmental screening is done to see if a child is meeting expectations for typical development at their age, based on research studies of other children the same age.

- Developmental assessment is done to see if a child shows patterns of development that are typical of children with known developmental difficulties or delays, such as a learning disability, a speech-language disorder, a hearing impairment, or a problem with motor coordination.

Why

Many Aboriginal parents and early childhood practitioners believe that formal tools and approaches to support non-Aboriginal children and families are not either culturally appropriate or the most helpful for Aboriginal children (Royal Commission on Aboriginal Peoples, 1996). Many find the very concept of “testing” and scoring or comparing the developmental levels of children, as is often done in developmental assessment, offensive (Stairs & Bernhard, 2002). Some see assessment as conflicting with cultural values that affirm the “gifts” of each child, with accepting children’s differences, or with the wisdom of waiting until children are older before making categorical attributions about them (Greenwood, n.d.).

Aboriginal leaders and agencies across Canada have argued that culturally inappropriate assessment and intervention practices, as well as lack of services, frequently result in serious negative consequences for Aboriginal children (Assembly of First Nations, 1988; B.C. Aboriginal Network for Disabilities Society 1996; Canadian Centre for Justice 2001).

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Negative consequences of inappropriate assessment and intervention practices include:

- over- and under-recognition of children with developmental challenges
- interpretations focusing on challenges in the child rather than in the environment
- services directed at a misinterpretation of the primary problem
- services introduced too late
- undermining Indigenous language and cultural goals for development through an over-valuing the dominant culture (European-heritage) and language (English)
- cultural alienation, and
- high rates of placement in non-Aboriginal foster care.

The Indigenous Child Project – which was part of a larger study of child development called the CHILD (Child Health, Intervention, Learning and Development) Project, funded by the Social Sciences and Research Council of Canada – partnered with Aboriginal communities in British Columbia to find out:

- which developmental monitoring, screening and assessment approaches had been used recently in early child care programs
- which approaches worked and which didn’t, and
- what can be done to improve these approaches.

Who/how

The project was led by Jessica Ball and Pauline Janyst based at the University of Victoria, working with collaborators from each of four participating Aboriginal communities: Lil’wat Nation, Sliammon First Nation, the Laichwiltach Family Life Society and the Kermode Friendship Centre. The research team conducted individual interviews with 63 First Nations parents; they also held group forums and used questionnaires to collect data from 42 practitioners working in community-based early childhood programs.

Key Findings and Observations

Community similarities

Across all four communities:

- Most participants did not distinguish between monitoring, screening or assessment methods: they viewed them as one system.

- Participants told stories about how formal tools had worked well to identify the source of a problem that had been mystifying a parent, or to establish a child’s eligibility for a therapy program that a parent saw as desperately needed. They also told stories about how formal tools had been misused (for example, as “ammunition against the parent to prove that their child has a delay”) or taken out of context (for example, where a child’s home language is not English and he or she is seen as having a language delay based on an English vocabulary test).
• Parents and practitioners want early intervention services for their children when they are needed, but are not convinced that formal monitoring, screening or assessment is congruent with their priorities for family development or parent support (most Aboriginal community-based programs use a family-centred approach, which takes into account what will best support parents’ development as well as children’s development).

• Participants believe professionals should engage in conversations with primary caregivers (whether that is a mother, father, grand-parent, auntie), listen to their perspectives and reinforce their skills in observing, discerning and supporting their child’s development.

• Participants dislike the idea of having prescribed developmental monitoring systems imposed upon them by funders or carried out by mostly non-Aboriginal teachers using non-Aboriginal tools at school entry; they also dislike the idea of having visiting specialists, rather than local program staff, conducting screening and assessment.

• Both parents and practitioners are dismayed by media reports of health or development surveys that negatively compare Aboriginal to non-Aboriginal children in the same region or community, without historical or political analyses that could help to explain the results. They are concerned that the results of developmental monitoring could add to negative stereotypes of Aboriginal children and families in Canada.

• All communities noted that referrals for services often set parents up with a false expectation that services will be delivered to their child, when in fact long wait lists and geographic inaccessibility of services can mean that there is no follow-up. Participants also noted that some services, such as speech-language therapy, are not covered or accessible to registered Indian children living on reserves.

• Practitioners everywhere pointed out that, just as decisions about a child should not be based on a single source of information, neither should the effectiveness of a program or the adequacy of community provisions for children be based on a single outcome measure. In both group forums and interviews, practitioners reiterated the need for policies, programs, and practices to support children within the context of their families and cultures as they rebuild after centuries of deleterious government policies.

• Some participants called for an approach customized for Aboriginal children – an Aboriginal-specific tool or method or parent-involving process.

• Some participants voiced concerns about privacy, confidentiality and social exclusion. They raised questions about the potential for formal assessment to focus excessively on school readiness – overlooking common Aboriginal values and concepts of development that encompass a child’s spirituality, cultural knowledge, Indigenous language, skills for living on the land, and relationships with Elders and other members of their communities.

• Some program managers cited examples of developmental monitoring tools being mistaken for program evaluation tools. They see current demands to introduce routine developmental monitoring as being driven more by funders looking for “evidence” of program effectiveness than by a true desire to respond to and support children and families in holistic, culturally sensitive ways.
Community differences

Distinctions in viewpoints among the four communities depended more on how much parents in the communities knew about and were involved in their community-based programs than on whether they were on- or off-reserve communities.

- One land-based (on reserve) First Nation and one town-based (off reserve) community had been using both informal and formal developmental monitoring, screening and assessment tools.

  Practitioners in both these two communities – who feel they are quite far along in supporting children in their communities through well-established programs guided by cultural values and involving Elders – are somewhat positive about the possible benefits of using formal monitoring tools, as long as they are adapted to specific cultural goals and involve parents. Parents, however, are generally quite skeptical. Many are negative about government surveillance and worry about having children apprehended or being required to take children to specialists, regardless of whether they understood or agreed with the purpose.

- In the two other communities – one land-based First Nations and one town-based community organization – many (parents and practitioners) expressed doubts about the possible benefits of using formal monitoring tools. They have had little experience with them, and are unsure about whether adopting “outside, formal” tools will fit with the strongly cultural focus or family-centred approach in their programs. (In fact, few parents in these communities agreed to participate in the project; those who did participate had little exposure to formal developmental monitoring and were not receptive to the idea.)

  Practitioners in these two communities feel that parents are just beginning to develop trusting relationships with program staff and to feel confident that they will be treated with respect and as people who “know” their own children. Staff stated that their first priority is to strengthen parents’ confidence and skills: it is too soon to introduce a standardized tool. These practitioners also believe that they have the capacity to identify children who need extra supports or referrals, without introducing a formal tool or creating new dependencies on specialists from outside the community.

Conclusions

The difficult histories of Aboriginal children, families and communities call for caution and respectful dialogue.

- Decisions about whether and when to introduce formal developmental monitoring systems must be community-based: these tools must be seen as furthering community-identified goals for child and family development.

- Introduction of formal systems to monitor, screen and assess children must also be community-paced, building upon a foundation of programs in which both practitioners and parents feel that their role is valued and they have established mutual trust.
• Developmental screening and assessment must be tied to the timely provision of early intervention services as needed.

• Parent involvement in developmental monitoring, screening and assessment is essential.

**Before** using a formal developmental tool, early childhood practitioners should:
  o obtain informed consent from parents, and
  o ask for their input.

**After** using any formal developmental tool, early childhood practitioners should:
  o explain the results
  o encourage questions/answer questions
  o give plain language reports for parents to keep, and
  o provide guidance on how to address a developmental difficulty.

• To help reduce the social exclusion and negative stigma experienced by many Aboriginal children and families, publication and reporting from research or surveys about children’s health, education, and development should be guided by ethical principles articulated by national, regional or community-level Aboriginal authorities, and informed by consultations with groups implicated in reports.

References


For updates and related reports please visit:
[www.ecdip.org](http://www.ecdip.org) & [www.earlylearning.ubc.ca/CHILD/about_child.htm](http://www.earlylearning.ubc.ca/CHILD/about_child.htm)