

**REALIZING ‘QUALITY’ IN INDIGENOUS EARLY CHILDHOOD
DEVELOPMENT**

by

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Abstract

This study used the BC Aboriginal Child Care Society's (BCACCS) *Draft Quality Statement on Aboriginal Child Care* (quality statement) as a starting point to identify Indigenous values for early childhood programming and describe how Aboriginal early childhood practitioners implement these values in Indigenous early childhood practice. Building on the view that in early childhood education, we must move 'beyond quality to meaning-making,' (Dahlberg, Moss & Pence, 1999), this study explored a working definition of 'Indigenous quality care,' comprised of five values reflected in the quality statement and supported by Indigenous early childhood education literature: Indigenous knowledge, self-determination, a holistic view of child development, family and community involvement, and Indigenous language. Using an Indigenous research methodology, I conducted audio-recorded telephone interviews with ten Aboriginal early childhood practitioners in British Columbia to identify how they operationalize the five values in practice. Findings from this study describe the successes and challenges Aboriginal early childhood practitioners face implementing programs that reflect Indigenous values for early childhood development. This study contributes to the 'reconceptualist movement for quality care' (Pence & Pacini-Ketchabaw, 2008) by further identifying how Indigenous notions of 'quality' differ from their mainstream counterparts, and sharing how mainstream notions of quality care continue to pervade the field and create challenges for Indigenous early childhood practice. Findings from this study also contribute to Indigenous early childhood education literature by sharing concrete strategies the Aboriginal early childhood practitioners in this study used to implement Indigenous values for early childhood education and care.

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Dedication

For Lenora, who continues to guide us from the spirit world

1 Introduction

As Indigenous¹ people, our teachings tell us that children are a gift from the Creator (Greenwood, 2006). The Creator has given us the responsibility to raise our children strong and proud of their identity, and as Indigenous communities we accept collective responsibility for our children, as they are the heart of our community (Greenwood & Shawana, 1999). Colonial governments and policies have tried to extinguish our ways of life with the forced removal of our children from our communities, yet, our distinct worldview and traditional systems of child rearing continue. As innovative people, we adapt to changing environments by creating new tools that build from the strengths of our traditions without compromising the integrity of our spiritual and cultural values. Indigenous early childhood programs are one example of how we are taking the gifts and teachings of our ancestors and working with Western approaches to education to innovate new ways to embrace our collective responsibility for our children. The purpose of this master's thesis study is to explore Indigenous-specific values for early childhood education, and apply an Indigenous lens to 'quality care,' with the understanding that quality care as it is typically framed does not attend to the unique cultural and linguistic identities of our people, and the social, political, and economic needs of our Indigenous communities. This thesis reports on a joint community-university research study that used the BC Aboriginal Child Care Society's (BCACCS) (2005) *Draft Quality Statement on Aboriginal Child Care* as a starting point to identify Indigenous-specific values for early childhood education and care, and describe how Aboriginal practitioners implement these values in program practice. Through audio-recorded telephone interviews with ten Aboriginal early childhood practitioners working in Indigenous early childhood programs in British Columbia, I explored how practitioners implement five Indigenous-specific values for early childhood education with the goal of challenging traditional notions of 'quality care,' and supporting the movement 'beyond quality to meaning making' (Dahlberg, Moss, &

¹ I use the term 'Indigenous' in global reference to people who identify themselves as Indigenous to a specific territory of land. I use the term 'Aboriginal' in national reference to Canadian Indigenous people who identify as First Nations (status and non-status), Métis, or Inuit.

Pence, 1999). The following introductory chapter provides a background and rationale for the study.

1.1 Background

‘Quality care’ is a specific concept that builds from developmental psychology and the view that ‘quality’ early childhood² programs contribute to positive developmental outcomes for children’s growth (Doherty, 1991; National Association for the Education of Young Children, 1991). Notions of quality care emerged from the position statement, *Developmentally Appropriate Practice* (DAP) (Bredekamp, 1987) and the evaluation tool *Early Childhood Environment Rating Scale* (ECERS) (Harms & Clifford, 1980), which articulated specific practices and environments that contribute to positive cognitive, social-behavioural, physical and emotional developmental outcomes for children (Whitebook, Howes, & Phillips, 1987). Quality care became such a prominent issue in North American early childhood contexts that the National Association for the Education of Young Children (NAEYC) and the Canadian Child Care Federation (CCCCF) developed position statements on quality care to bring attention to the topic as a critical policy and practice issue (NAEYC, 1991; CCCC, 1991). These position statements - respectively *Quality, Compensation, Affordability* (NAEYC, 1991) and the *National Statement on Quality Child Care* (CCCCF, 1991), articulated specific practices and environments that contribute to quality care, and promoted quality as a topic of importance and concern for policy makers and early childhood practitioners. As quality care increasingly became the early childhood ‘buzz word,’ some educators and theorists began to critique notions of quality care – particularly it’s emphasis on DAP, for its limitations for children from diverse socio-linguistic backgrounds and children with special needs (Lubeck, 1994; Mallory & New, 1994). By the end of twentieth century, some people urged for the application of a post-modern lens to discourses on quality care in acknowledgment that quality is a relative and values based term; therefore multiple, community-based perspectives exist as to what denotes ‘quality care’ (Dahlberg, et. al, 1999; Woodhead, 1996). Now referred to as the reconceptualist movement for quality (Pacini-Ketchabaw & Pence, 2006), theorists argue that research, policy and practice

² The period of early childhood referred to in this study ranges from birth to six years.

must move ‘beyond quality to meaning making’ (Dahlberg et. al, 1999), whereby, early childhood institutions identify and respond to localized or community based values for early childhood education and care.

In 2005, BCACCS³ developed a *Draft Quality Statement on Aboriginal Child Care* (quality statement) that identified sixteen elements of quality care relative to Aboriginal early childhood settings. Building both from the CCCF *National Statement on Quality Child Care* (1991) and the reconceptualist movement for quality, BCACCS’ (2005) quality statement was a significant first step in articulating Aboriginal values for early childhood practice and creating an Indigenous vision for early childhood development. However, early review and feedback from Aboriginal early childhood practitioners, and BCACCS’ board of directors, revealed that the quality statement included notions of quality care represented in mainstream quality care literature, and that further examples of practice from Indigenous early childhood programs would strengthen the statement’s claims. To move the quality statement from a vision for Aboriginal early childhood development to one that articulates global Indigenous values for early childhood education, and is supported by evidence from Aboriginal early childhood education practice, BCACCS identified need for the research study *Realizing Quality in Aboriginal Early Childhood Development* (Realizing Quality). BCACCS partnered with the University of British Columbia to develop the Realizing Quality study, a large, provincial wide study to refine the quality statement and identify and describe Indigenous values for early childhood education and care. This research would further challenge mainstream notions of quality care, contribute to the dearth of literature in the relatively new field of Indigenous early childhood education, and enhance BCACCS’ capacity to influence policy and program development in Aboriginal early childhood education and care. This master’s thesis research drew from the larger Realizing Quality community-partnership study. A portion of study data from the Realizing Quality study was used for

³ BCACCS is an Aboriginal, provincial-scope, non-profit organization in British Columbia (BC) funded in part by the BC Ministry of Children and Family Development and in part by the Public Health Agency of Canada. The organization is member-based, however, provides no-cost training and resources to anyone vested in Aboriginal early childhood in BC. As an organization committed to the development of relevant early childhood curriculum materials and resources, as well as a being voice for Aboriginal practitioners at provincial and national policy, BCACCS identifies research as key components in helping to support their community members. For detailed information about BCACCS, visit www.acc-society.bc.ca

this thesis; however, details of the partnership, as well as where this master's thesis research differs from the larger Realizing Quality study, will be described in depth in the methodology chapter of this thesis.

1.2 Thesis overview

This thesis unfolds in the five following chapters: Literature review; methodology; findings; discussion; and conclusion and recommendations. The literature review chapter will demonstrate in detail why the exploration of Indigenous values for early childhood education and care fits postmodern arguments for moving 'beyond quality to meaning-making' (Dahlberg et. al, 1999). It will also review the recent evolution of Aboriginal early childhood services in Canada and Indigenous education scholarship to identify significant goals, priorities, and practices emerging in the field. Reviewing the literature will lead us to the BCACCS' (2005) quality statement, and how the research partnership group - comprised of BCACCS, my academic supervisor and I, collapsed the quality statement into five themes identified as critical values for Indigenous early childhood programs. These five themes comprised a working definition of 'Indigenous quality care,' which was used in this study to discuss Indigenous early childhood practice with participants. The methodology chapter will detail how and why this study engaged an Indigenous research methodology (Smith, 1999) to explore Indigenous values for early childhood programs. It will detail how I conducted audio-recorded telephone interviews with ten early childhood practitioners of Aboriginal ancestry working in Aboriginal early childhood programs to discuss Indigenous quality care. In the chapter of study findings, I will share how Aboriginal early childhood practitioners implement the five notions of Indigenous quality care in service delivery. I will share examples and descriptions of practice, reveal key resources and assets that support practitioners, as well as barriers that have an impact on practitioner capacity to implement Indigenous notions of quality care. The discussion chapter will examine how study findings support and contribute to literature in Indigenous early childhood education, as well as consider what capacity and/or programming issues arose from this study that affect practitioners' ability to implement the five values for Indigenous early childhood education. Further, this chapter will consider the five Indigenous values for

early childhood education in light of the post-modern lens through which to view early childhood development, to demonstrate why this study makes a valuable contribution to the reconceptualist movement for quality care. This master's thesis will close with recommendations that consider how the Indigenous values for early childhood education and care may be used to guide and inform additional research, policy and programming in Indigenous early childhood contexts.

By identifying Indigenous values for early childhood education and care, and exploring how Aboriginal early childhood practitioners implement such values, this master's thesis research builds on reconceptualist approaches to early childhood development and moves 'beyond quality to meaning making' (Dahlberg, et. al, 1999). Accepting that neither institutional settings and/or structured program models reflect traditional Indigenous settings for child rearing, nor do traditional notions of 'quality care' imbued with a linear, developmentalist perspective of early childhood reflect an Indigenous worldview, this study explores in the context of early childhood education, how Indigenous communities innovate and adapt to the changing landscapes of our communities, while ensuring the authority and integrity of our cultural values and languages are maintained. Although this is a small study, representing only a handful of voices from Aboriginal communities in British Columbia, it contributes to the conversation as to how Indigenous early childhood practices and personnel potentially support the continuity of Indigenous cultural and linguistic knowledge, promote and exercise Indigenous self-governance, and contribute to the social and economic prosperity of Indigenous communities.

2 Literature review

Discourse on quality care largely predates Aboriginal early childhood development programs; therefore, the union of quality care and Aboriginal early childhood development is a relatively new and unexplored area of research. As such, this chapter will review relevant literature on quality care and Indigenous early childhood programs to bring us to the five values of Indigenous early childhood education that comprised the working definition of Indigenous quality care used for this study. This review will share the evolution of the concept of quality care to demonstrate the influence and impact of *Developmentally Appropriate Practice* (Bredekamp, 1987) and the *Early Childhood Environment Rating Scale* (Harms & Clifford, 1980) on definitions, research, and practitioner beliefs regarding quality care. Particular attention will be paid to the reconceptualist movement for quality care, which argues existing quality care descriptors are limited in that they do not attend to socio-cultural contexts for early childhood (Woodhead, 1996). This movement urges the application of a post-modern theoretical lens to discourses on quality care to argue that ‘quality’ is a values-based exercise of defining and evaluating meaningful community-based practices in early childhood education and care. Building from the position of ‘meaning making’ (Dahlberg, et. al, 1999), this review examines the recent emergence of Indigenous early childhood field to reveal recurring themes and meaningful practices in Indigenous early childhood education. Finally, this review will lead to the BCACCS (2005) ‘*Draft Quality Statement on Aboriginal Child Care*’ (quality statement), which identifies sixteen elements of quality care from an Aboriginal perspective. To this end, this literature review will reveal how this study fits within quality care discourses – particularly the reconceptualist movement, as well as Indigenous early childhood literature, to identify five values that contribute to meaningful Indigenous early childhood programs and the working definition of ‘Indigenous quality care’ used in this study.

2.1 ‘Quality’ in early childhood education and care

The notion of quality care may be traced back to the National Association for the Education of Young Children [NAEYC] accreditation standards document, *Criteria for*

High Quality Early Childhood Programs (1991) and the Canadian Child Care Federation [CCCCF] position statement, the *National Statement on Quality Child Care* (1991). As the largest membership-based organization of early childhood professionals in the United States, the NAEYC asserts itself as having been a leader in the development of early childhood standards and practice since its conception in 1929 (NAEYC, 2009). Similarly, as the largest non-profit, bilingual organization on early learning and child care in Canada, the CCCC credits itself as the national leader in advocacy and promotion of high quality, universally accessible child care (CCCCF, 2009). The close alignment between the NAEYC and CCCC will become relevant to discussion later in this review, as the two documents significantly influenced early childhood practitioners. Particularly relevant is the *National Statement on Quality Child Care* (1991), as it influenced the BC Aboriginal Child Care Society to produce their *Draft Quality Statement on Aboriginal Child Care* (2005), from which this research study builds.

Notions of quality care can be traced back to the NAEYC adoption of the position statement *Developmentally Appropriate Practice for Early Childhood Programs Serving Children Birth through 8* [DAP] (Bredekamp, 1987) and the *Early Childhood Environment Rating Scale* [ECERS] (Harms & Clifford, 1980). Collectively, the two documents became positions of standard for early childhood education and care and inspired two decades of theory, research, and practice on quality care. DAP emerged in response to increased pressure on early childhood practitioners to prepare children for school entry with respect to academic achievement and positive behavioural outcomes. Inclusive of all early childhood settings serving children birth to eight years, DAP urged early childhood practitioners to deliver educational experiences based on a child's predictable age dependent stages of development. With roots in Piagetian theory and developmental psychology, two of the most prominent arguments of DAP was that programs must recognize and support the interconnectedness of children's four domains of development (physical, cognitive, social and emotional); and that educators must consider the learning needs of both the individual child and the group in programming (Bredekamp, 1987). Significantly, DAP drew heavily on the learning environments articulated in the ECERS as indicative of optimal learning environments for children's development. The ECERS is an American evaluation tool that educators may use to

‘objectively’ self assess program levels of quality care. It requires educators to rate program environment features on a scale from 1 – 7: a rating of one indicating poor quality, and seven indicating high quality. Environmental features that are evaluated include: adequate physical space, appropriate learning opportunities, health and safety requirements, and positive and supportive adult work environments (Harms & Clifford, 1980). As DAP inherently supported the ECERS, and was adopted by the NAEYC as the standard for quality care (NAEYC, 1991), collectively the position statement and assessment tool began the movement in research and practice for quality care in early childhood education and care.

Using the principles of DAP as indicators of quality practice, and the ECERS as an evaluation tool of quality environments, early research on quality care solidified notions of what quality means and what contributes to quality in centre based settings. To highlight, researchers in developmental psychology concurred that quality care impacts children’s social and cognitive developmental outcomes and their readiness for Kindergarten (Phillips & Howes, 1987; Phillips, McCartney & Scarr, 1987). Researchers from the United States identified several key contributors to quality environments: qualified educators, supportive working environments for adults, low staff turn over, satisfactory wages for caregivers and staff, and low adult: child ratios (Scarr and Eisenberg, 1994; Whitebook, Howes & Phillips, 1989). Furthermore, although most studies to date on quality care were conducted in Canada and the United States, there was a general global consensus on what denotes quality care. In a meta-study of over one hundred Canadian, American, Western European and New Zealand studies to identify global characteristics of quality, Doherty (1991) found that universally, quality care supports and facilitate the child’s physical, emotional, social, and intellectual well-being and development; supports the family in it’s child rearing role; and utilizes the ECERS as its evaluation tool (p. 9). Again, the influence of DAP and the ECERS cannot be understated in early literature on quality care. Both documents became the standard from which to define and evaluate quality care.

Early research on quality care synthesized notions of quality care, which in turn, informed the development of the NAEYC *Criteria for High Quality Early Childhood Programs* (1991). Criteria to obtain NAEYC accreditation included: frequent, positive

and warm caregiver-child interaction; varied age appropriate learning materials; specially trained educators, and low staff: child ratios. Upon receiving accreditation, programs could promote themselves as delivering ‘high quality’ care, which placed them in the desirable and advantageous position to access government funding, program licenses, and attract qualified staff (NAEYC, 1995). With funding and program capacity development opportunities tied to NAEYC accreditation, the influence of DAP and the ECERS in shaping practitioner perspectives on quality care and program delivery is undoubtedly significant; not to mention, the profound influence the documents already had on research on quality care.

In the Canadian context, quality became a topic of relevance to Canadian families, policy makers and early childhood professionals through the advocacy of the Canadian Child Care Federation [CCCCF], the Canadian counterpart to the NAEYC. The CCCC produced the *National Statement on Quality Child Care* (national statement) (1991) to promote standards of excellence for early childhood programs, and to urge Canadian policy-makers, educators, parents, and families to demand high-quality, universally available child care. Built from quantitative research (to date) on quality in both American and Canadian contexts, Canada’s national statement recommended seven provisions for quality programming: 1) Suitability and training of care providers; 2) Child development and learning environments; 3) Group size and ratio; 4) Adult relationships; 5) Health and nutrition; 6) Safety; and 7) Partnerships. The national statement supported many of the quality care requirements of the NAEYC accreditation process, which highlights both the close relationship between the two nationally representative organizations, and the influence of large organizational bodies on the early childhood community. Furthermore, given the similarity of both the NAEYC accreditation standards document and the CCCC national statement, the documents further affirmed DAP and the ECERS as central tenets of quality care.

Within ten years of the release of DAP, it was widely believed in North America that quality child care promotes children’s development and learning, whereas poor-quality child care places children at risk of developmental delay (NAEYC, 1995; Helburn, 1995). However, with so much attention given to quality care, researchers and educators began to critique DAP and its roots in developmental psychology for its

limitations for children from diverse backgrounds and children requiring extra supports, and its inherent privileging of middle-class North American views of child development (Lubeck, 1994; Mallory & New, 1994). For example, Bernhard (1995) argued that the views of early childhood development modeled through DAP, and reinforced through teacher training programs, (as they school pre-service teachers in developmental psychology) marginalize children from diverse cultural and linguistic backgrounds because differences in social behaviour are assessed as signs of (cultural) deprivation, or attributed to a lack in the home environment to stimulate growth and development. Additionally, in an article critiquing DAP for its limitations in terms of children with special needs, Carta, Schwartz, Atwater, and McConnell (1994) asserted that “programs serving young children with special needs must offer a range of services that vary in intensity based on the needs of the children they service. The result is a curriculum that is much broader-based than a curriculum suggested by DAP guidelines” (p. 2). Responding to the growing criticisms of the limitations of DAP, the NAEYC released *Developmentally Appropriate Practice in Early Childhood Programs Revised Edition* [DAP-R] (Bredekamp & Copple, 1996) and the *Early Childhood Environment Rating Scale Revised* [ECERS-R] (Harms, Clifford, & Cryer, 1998), which attempted to address children’s needs relating to cultural and linguistic diversity, and children requiring extra supports. For example, DAP-R claimed that “a high-quality early childhood program is one that provides a safe, nurturing environment that promotes the physical, social, emotional, aesthetical, intellectual, and language development of each child, while being sensitive to the needs and preferences of families” (Bredekamp & Copple, 1996, p. 4). The revised versions of DAP-R and the ECERS-R encouraged educators to create environments that support children in the context of their community or family, which includes differing cultural values and languages than the ‘white middle class’ norm; however, developmental psychology researchers have since concluded that additional forms of assessment would be necessary to consider a program’s cultural sensitivity (Sakai, Whitebook, Wishard, and Howes, 2003). Thus, even with growing acknowledgment of the diverse socio-cultural backgrounds of children and families, and the need to broaden interpretations of what practices may be considered developmentally appropriate (Mallory & New, 1994), DAP-R and the ECERS-R continued to project a

‘one size fits all’ approach for early childhood development programs. Notably, by formally adopting the DAP-R position statement, and heralding the ECERS-R as standard for program environment evaluation, the NAEYC prevailed as the authority on early childhood standards and practices, and DAP-R and the ECERS-R remained central to their purporting of quality care.

Following the release of the revised versions of DAP and the ECERS, there was a resurgence of research on quality care. This second wave of research focused on the levels of quality care North American children experience in centre-based settings, and the outcomes of both poor and high quality care experiences on a child’s development and preparation for school settings (National Institute of Child Health and Development, 1994; Peisner-Feinburg, Burchinal, Clifford, Culkin, Howes, Kaga, Yazejian, Rustici, & Zelazo, 1999). For example, in the largest, most comprehensive study on quality in the United States, *Cost, Quality & Outcomes*, (Helburn, 1995) researchers examined 400 child care centres across four states to assess the relationship between the costs of child care and the nature and effects of child care experiences. Helburn (1995) used three summary measures of cognitive skills, one measure of attitudes on children, as well as practitioner surveys and classroom observations to reveal:

The positive impact of quality care on the development of at-risk children has been substantially demonstrated with the undocumented assumption that children from middle-class families were buffered from the negative impact of poor quality child care. Contrary to this belief, this study found the impact of quality care was similar for children despite differences in maternal education, gender, ethnic background, state or centre sector (p. 310).

With its comprehensive and thorough examination of the impact of centre based settings on child development across variable socio-economic contexts, the *Cost, Quality and Outcomes* study brought quality care to the forefront of the early childhood sector. With the vast quantity of data, Helburn (1995) solidified notions of quality care advocated through the NAEYC as the standard, and fostered the belief that quality care should be an urgent priority and concern for policy-makers, families, and the early childhood sector.

With the growing momentum behind the second wave of research on quality care in the United States, Canadian researchers began to explore levels of quality in centre

based settings and its relationship to child development, with the same purpose of drawing attention to the importance of quality for early childhood development. To clarify what quality means and what it looks like in practice, Doherty (1997) conducted another meta-study to identify three categories of quality evident in early childhood programs:

- 1) Structural: structural levels of quality include the physical setting, adult-child ratio, group size, and care provider pre-service education;
- 2) Contextual: contextual levels of quality include administrative style, wages, working conditions, and government funding; and
- 3) Process: process levels of quality include the level of interaction between care provider and child, caregiver sensitivity, staff turnover, and levels of parental involvement.

Doherty made a valuable contribution to quality discourse by synthesizing underlying assumptions about quality care, and clarifying the ways researchers understand and articulate the construct of quality care. By categorizing and highlighting the key contributors to quality care environments and publishing them in a practitioner-oriented series (i.e., *Research Connections Canada*, published by the CCCF), Doherty (1997) brought discussions of quality care directly to Canadian early childhood practitioners. However, more significantly, Doherty's three categories of quality were used to shape the largest study in Canada on quality to date, *You Bet I Care!* (YBIC!) (Goelman, Doherty, Lero, LeGrange, & Tougas, 2000). Researchers in that study used Doherty's categories to isolate and examine different types of quality in programs and measure their impact on children's developmental outcomes. To highlight, YBIC! used the ECERS-R to examine 227 preschool rooms across six provinces and one territory for the levels of quality care delivered. The study found that children's physical and emotional health, and their safety are protected but that few opportunities for learning are provided. Therefore, the researchers argued that the volume of centres providing low or poor quality care "should be a concern and focus of remediation for politicians, policy analysts, parents and the whole society" (p. x). As with the American *Cost, Quality, and Outcomes* study, the YBIC! study placed quality at the forefront of the early childhood community, and raised

concerns regarding the low levels of quality evident in early childhood care settings. Evidently, with nation-wide studies in both the United States and Canada, the second movement of research on quality care continued to reinforce the definitions of quality articulated by DAP and the ECERS and inherently support the objectives and positions of the CCCF and NAEYC.

With substantial research to show the relationship between quality care environments and positive developmental outcomes, as well as the continued endorsement of quality standards through CCCF and NAEYC, notions of quality care inherent in DAP, the ECERS, and their respective revised versions, clearly influenced early childhood practice. However, research on quality care, and specifically the 'poor levels' of quality in both Canadian and American early childhood programs began to be challenged by some researchers, theorists, and educators. When statements of quality care such as the national statement (CCCF, 1991) and the accreditation standards criteria (NAEYC, 1991) reflect a unilateral, developmentalist approach to early childhood, and significantly influence practitioner beliefs for child care (Mallory & New, 1994; Bernhard, 1995), some people began to question the appropriateness, relevancy, and validity of a universal approach to quality care. So long as research on quality care builds from the developmentalist theories inherent in DAP/DAP-R, utilizes the ECERS/ECERS-R as the primary assessment tool, and supports the minimum standards for quality care promoted by the NAEYC (1991) and CCCF (1991), quality care discourse reflected the mainstream, middle-class, North American perspective for early childhood education and care.

Literature reviewed thus far has demonstrated the profound influence the NAEYC and the CCCF had on the early childhood community, and for establishing quality care as a topic of relevance and importance to North American families. However, as the following section of literature will reveal, a socio-cultural perspective to quality care identifies some limitations to the developmentalist perspective to early childhood education and care, and calls for broader, community-based interpretations of quality care.

2.2 Socio-cultural approaches to quality care

With a body of literature in support of, as well as affirming, the importance of quality care, the field of early childhood education began to problematize discourses on quality care for its limitations for children from diverse social and cultural backgrounds. Scholars, researchers, and educators from what is now referred to as the ‘reconceptualist movement’ in early childhood education and care (Kessler & Swadener, 1992; Pacini-Ketchabaw & Pence, 2006), argued that discourses on quality care have largely ignored the important role children’s social and cultural backgrounds play in children’s early childhood education and care experiences, and that ‘quality care’ is more appropriately understood from a local perspective (Moss & Pence, 1994; Woodhead, 1996). This section of the literature review reveals how the reconceptualist movement, and its core argument that in the early childhood field we must move ‘beyond quality to meaning making’ (Dahlberg et. al, 1999), created space for socially and culturally relevant notions of quality care. It is within this socio-cultural approach to understanding notions ‘quality care’ that BCACCS situated its (2005) quality statement and I contextualized this study.

Arguments for a socio-cultural approach to quality began with the recognition that practices promoted as developmentally appropriate and their roots in Piagetian theory, which identifies specific age-dependent stages of development, did not meet the increasingly diverse cultural, linguistic and additional support needs of children and families. A series of critical texts emerged from scholars around the world that identified the limitations of DAP to support and serve families outside of a middle-class, North American context (Burman, 1994; Carta et. al, 1994; and Fler, 1995). For example, in a study of an American preschool program that incorporated direct instruction as its core teaching methodology, researchers found the program scored high on ‘practice considered inappropriate’ (as indicated by DAP) (Fowell & Lawton, 1992). Researchers found that although the program was valued by parents and educators, and considered appropriate for the group of children, it did not provide enough time for ‘play-based learning.’ As such, the program was considered ‘inappropriate’ for children’s development. However, by examining learning environments evidently considered low in developmental appropriateness, the study demonstrated that different world views exist regarding how young children learn and what is valued for early childhood practice

(Fowell & Lawton, 1992). This study revealed that practices recommended by DAP (Bredekamp, 1987) were not necessarily appropriate for all children. However, it was not until the groundbreaking text *Diversity and Developmentally Appropriate Practice* (Mallory & New, 1994) that scholars began to critique the ethnocentrism of the empirically based child development canon, and render the concept of developmentally appropriate practice problematic. To highlight, researchers argued that assumptions of ‘common goals, individual learning, and standardized assessment’ as most effective practice are not supportive for educators working with special needs children because they concurrently create a deficit model (i.e. abnormal) view of child development (Carta et. al, 1994). Furthermore, Lubeck (1994) challenged DAP for its inherent assumption that ‘diversity is deprivation.’ She believed the practices within DAP assumed that for children not from mainstream or middle-class backgrounds, it is their language and/or cultural background that does not adequately prepare them for success in developmentally appropriate programs. With evidence from research as well as critical essays, Mallory and New (1994) affirmed that the early childhood field was no longer willing to accept developmentally appropriate practice as appropriate for all children. This shift in thinking was critical to set the tone and support diverse perspectives in early childhood, and specifically, notions of quality care.

Appreciating that local community and socio-cultural contexts inform perspectives to early childhood education, researchers began to challenge narrow North American definitions of quality. In a New Zealand study examining early childhood programs in different contexts and in different philosophies - Kindergarten, child care, and Kohanga Reo (Maori ‘language nest’ immersion programs), Farquhar (1993) sought to identify multiple perspectives of quality. Contrary to North American examinations of quality that utilized DAP and the ECERS as indicators of quality, Farquhar interviewed family and community members, as well as educators to obtain opinion-based perspectives of what denotes quality in early childhood. Farquhar found that programs garnered differing meanings of quality based on their varying philosophies. To highlight, whereas family and community members identified caregiver sensitivity as essential to quality, educators emphasized the organizational and social features of their working environments as essential to quality. By drawing from multiple perspectives, Farquhar

revealed that traditional notions of quality, emphasizing staff: child ratios and caregiver levels of education, do not speak to the perspectives of all child care stakeholders. Furthermore, Farquhar affirmed the pervasive influence of DAP and the ECERS on early childhood practitioners' understandings and beliefs around quality, as more educators spoke to North American notions of quality than their family and community member counterparts. Farquhar's work is significant as it was a first step to acknowledge that differing views exist regarding what denotes quality child care, and that scholars were beginning to challenge North American notions of quality as the pinnacle of child care programs.

Building from the literature that critiqued the view of DAP as universally appropriate and the view that North American perspectives towards quality were somewhat narrow (Farquhar, 1993; Fleer, 1995; Lubeck, 1994; Moss & Pence, 1994), Woodhead (1996) conducted the largest study to date examining notions of quality in early childhood programs from culturally, linguistically and socio-economically diverse communities. With the purpose of identifying what quality means through a socio-cultural lens, Woodhead (1996) conducted case study research of nationally-funded early childhood programs aimed at socio-economically disadvantaged children in Kenya, France, and Venezuela. He found that universal notions of quality expressed through DAP and the ECERS do not represent the Majority⁴ of children who participate in early childhood services. Similar to Farquhar (1993), Woodhead found that staff attitudes, nutrition, and affectionate interaction bear weight in a quality program. He concluded that, "we must reject unquestioned replication of particular programme models, quality indicators, and concepts of basic standards in favour of locally relevant models, indicators and standards" (p. 63). Woodhead (1996) argued that socio-cultural contexts are relevant and meaningful to child care programs, and most significantly, research affirmed that notions of quality rooted in mainstream, North American values for early childhood do not universally apply to children.

Researchers and theorists calling for broader interpretations of appropriate care, and wider acknowledgment that various perspectives exist as to what constitutes 'quality

⁴ Woodhead uses capitalized Majority to describe non-Western world children who make up the majority of the world's childhood population to emphasize that North American-Western notations for early childhood represent a Minority of the world's child population.

care,' recognized that it was unreasonable to abandon mainstream notions of quality and DAP without an alternative approach (Bloch, 1992; Lubeck, 1994; Moss & Pence, 1994; Woodhead, 1996; and Woodhead, 1998). However, all is not lost, because as Woodhead asserts, "quality is relative, but not arbitrary" (1996, p. 15). Scholars critiquing DAP and narrow interpretations of quality care laid the necessary groundwork for the 'reconceptualist movement' (Kessler & Swadener, 1992; Pacini-Ketchabaw & Pence, 2006) and the critical theoretical shift to embrace the co-existence of multiple perspectives of quality in early childhood education and care.

In the watershed text demanding the application of a post-modern theoretical lens to discourses on quality, *Beyond Quality in Early Childhood Education and Care: Postmodern Perspectives* (Dahlberg, et. al, 1999), scholars problematized Western notions of developmentally appropriate practice and quality care for their roots in Modernist ideology. The authors contended that the very desire for quality programs, the application of an 'objective' lens to evaluate program levels of quality, and the desire to obtain scientific truths for early childhood, align with the Modernist search for order. The languages of 'quality assurance' and 'quality control' reflect the values of a market-based economy and capitalist ideology, which notably Woodhead (1996) had also alluded to, and do not support or reflect the lived realities and experiences of the Majority of the world's children. Dahlberg et. al (1999) drew from work in early childhood contexts outside of the North American mainstream – specifically Reggio Emilia communities in Italy and Indigenous communities in Canada, to challenge Western perspectives of quality care as an object to be obtained or achieved. The authors argued that the application of a post-modern theoretical framework to early childhood would move beyond notions of quality to notions of 'meaning-making.' As they explain:

There are continuities between the discourse of quality and the discourse of meaning making...Each discourse involves the making of choices, or judgments. But whereas the discourse of quality speaks of value-free technical choices, the discourse of meaning making calls for explicitly ethical and philosophical choices, judgments of value, made in relation to the wider questions of what we [as community members and stakeholders in early childhood] want for our children here and now and in the future – questions which must be posed over and over again (pp. 106-7).

The notion of meaning-making creates space for local communities and stakeholders in early childhood to self-reflect, problematize, and continuously re-define their goals for early childhood. This process based approach to negotiate and understand quality care from diverse perspectives is in congruence with many of the arguments made in the literature for a socio-culturally responsive approach to early childhood education and care (Lubeck, 1994; Kessler & Swadener, 1992). A closer examination of the alternative approaches to early childhood education and care highlighted in Dahlberg et. al (1999) will shed light on the how meaning-making differs from traditional notions of quality, and the role meaning making plays in Indigenous perspectives on quality care.

Dahlberg et. al (1999) cite early childhood programs in the district of Reggio Emilia in Italy as exemplary models of a process oriented approach to quality. In a descriptive research study of early childhood programs in six communities across the district of Reggio Emilia, New (1999) and a partnering research team from the University of Milan, sought to identify what philosophies and views guide practice in Reggio Emilia and what lessons North American early childhood professionals could learn from an alternative model for early childhood education. The researchers conducted 225 hour-long interviews with families, staff, and community members, and collected 2400 parent-teacher questionnaires. Comparative analysis of data revealed that contrary to the North American developmentalist approach to quality, whereby adults are viewed as superior to children and early childhood programs fill the gap in their development (Lubeck, 1996), Reggio Emilia programs honour children as agents in their education. Further, rather than adopting an educator as expert philosophy, programs adopt a community-as-stakeholder approach to service delivery (New, 1999). From this perspective, all community members, regardless of whether they have children enrolled in the program, are valued contributors and determiners of early childhood program development and service delivery. It is beyond the scope of this paper to explore the ‘Reggio Emilia Approach’ in detail, as much has already been written on the topic (e.g., Edwards, Gandini, & Forman, 1998; Rinaldi, 2006); however, the program philosophies and ‘views of the child’ inspired educators from North American contexts to examine their own practices, and evoked the question, “What should children learn?” (New, 1999). The Reggio Emilia Approach, which engages multiple voices in ongoing evaluation of the appropriateness of

early childhood programs to the children, families, and communities they serve (Dahlberg et. al, 1999), challenges North American views of teachers as experts, and narrow definitions of quality. Citing the strengths of The Reggio Emilia Approach was one of two leading examples Dahlberg et. al (1999) used to support their movement beyond quality to meaning-making.

Additionally Dahlberg et. al, (1999) drew from the University of Victoria First Nations Partnership Program (FNPP) and experiences working with Indigenous communities in Canada developing community-based and culturally appropriate early childhood practitioner training programs to further support the notion of beyond quality to meaning making. Responding to the question, “What of us – our Cree and Dene culture is in here?” (Ball & Pence, 1999, p. 1) the Meadow Lake Tribal Council in Saskatchewan partnered with the University of Victoria School of Child and Youth Care (UVic SCYC) on a project to co-construct a relevant early childhood practitioner training program. Now known as the ‘Generative Curriculum Model’ within the FNPP (Ball & Pence, 2006), the project adopted a both/and approach to developing early childhood professional training curriculum, whereby Indigenous values for early childhood were infused with Western understandings of child development. As Dahlberg et. al (1999) reveal,

The Generative Curriculum approach embraces diversity and with it a large measure of indeterminacy. Unlike most curricula, which are based on a singular construction of pre-established content and outcomes, the Generative Curriculum is a *co-construction* (italics mine) eliciting the generation of new ideas and possibilities not fully foreseeable in advance (p. 167).

The Generative Curriculum Model took an unprecedented step in Canada to build community-based early childhood practitioner training programs from an Indigenous world view. The co-constructive approach to developing community based training demonstrated in practice what others argued for regarding quality care: Evaluating quality is more appropriately understood as a process to define community goals and values for early childhood development, and assesses to what extent programs achieve such values (Lubeck, 1996; Moss & Pence, 1994; Woodhead, 1996; Woodhead, 1998). Significant to the program development and research in the FNPP is that unlike the rigid

practices embedded in the ECERS and DAP that take a universal approach to define and shape program outcomes, the generative curriculum model embraced flexibility, and the challenges that emerge from developing community-based programs.

The literature arguing for socio-cultural approaches to early childhood education reviewed here demonstrated that tensions existed with the overarching claim that DAP/DAP-R (Bredekamp, 1987; Bredekamp & Copple, 1996) is universally appropriate, and that the ECERS/ECERS-R (Harms & Clifford, 1980; Harms, Clifford & Cryer, 1998) is indicative of optimal learning environments for children. The literature served to challenge and deconstruct many North American assumptions of early childhood education and care. It is evident that dominant approaches to quality care limit and devalue alternative approaches to early childhood development. The shift to ‘reconceptualize early childhood’ (Canella & Grieshaber, 2001; Canella & Viruru, 2004) invites the question, what implications does the notion of ‘meaning making’ have for Indigenous early childhood development? As Indigenous early childhood contexts served to shape and support the movement ‘beyond quality to meaning making’ (Dahlberg et. al, 1999), it is not surprising that this research study appropriately fits within a post-modern theoretical framework, and takes a socio-cultural approach to defining quality care. The remaining review of literature on Indigenous early childhood education and care and BCACCS’ quality statement will reveal that Indigenous notions of quality care fit snugly within the paradigm of meaning making.

2.3 Indigenous early childhood education and care

Early childhood programs are central to Indigenous people’s reclamation of their identities and traditional systems of child rearing (Assembly of First Nations, 1989; Native Council of Canada, 1990; Prochner, 2004; RCAP, 1996). Within the literature, there are repeated arguments for early childhood programs that reflect Indigenous communities’ distinctive knowledge and values for children in order to foster secure, positive Indigenous identities in children (Ball, 2004; BC ACCS, 2003; RCAP, 1996). However, centre-based early childhood programs for Aboriginal children in Canada are a relatively new phenomenon (Greenwood, 2006), and therefore notions of quality care reflective of Indigenous goals and values for child development represent a new area for

research in early childhood care and education. A review of Indigenous early childhood education literature from both Canadian and international contexts will reveal how Indigenous early childhood development is central to Indigenous cultural, linguistic, and community revitalization, and what themes and practices consistently emerge as relevant and meaningful to Indigenous early childhood contexts. This literature will serve to contextualize BCACCS' (2005) quality statement and frame discussion of Indigenous values for early childhood education and care.

Canadian historical policies regarding the 'care and education' of Aboriginal peoples has been the most direct contributor to the loss of language, culture and identities among Aboriginal people (RCAP, 1996). The Assembly of First Nations (AFN) (1989) highlights the devastating effects of these policies on Aboriginal children in their policy recommendation paper: "Non-Indian jurisdiction over child care has been a complete failure. Every past decision, from residential schools to mass apprehension, has had to be discarded – usually after catastrophic effects on the children involved" (p. 43). It is beyond the scope of this paper to thoroughly review the historical devastation of Aboriginal people's way of life through child 'care and protection' policies, as much has already been written on the topic (see: AFN, 1989; Blackstock, Bruyere & Moreau, 2005; Greenwood, de Leeuw, & Fraser, 2007; and RCAP, 1996). However, the linkage between historic policies and the inter-generational trauma, poverty, and poor quality of life suffered by Aboriginal people is critical to the discussion and rationale for culturally-based, community controlled early childhood services (Ball, 2007; Greenwood & Shawana, 1999). As Greenwood et. al (2007) highlight, "Aboriginal children in Canada cannot be extricated from Canada's colonial and colonizing history, nor can they be disentangled from the current socio-economic conditions that dictate the every day lives of Aboriginal people" (p. 5). Therefore, Aboriginal early childhood services reflect not only the inherent right of Indigenous peoples to articulate and deliver early childhood programs in support of their own goals for early childhood, but also a critical strategy to rectify inter-generational losses of identity resulting from historic and present-day colonization.

In a comprehensive discussion of the relationship between policy and Aboriginal early childhood programming, Greenwood (2001; 2003; and 2006) traces the conception

of Aboriginal-specific early childhood services in Canada to policy recommendations made by national Aboriginal leadership organizations. In a plea to the House of Commons, the Native Women's Association of Canada (NWAC) (1988) urged for early childhood programs, in which Aboriginal children learn from Elders in the context of their own culture and language. The NWAC (1988) insisted that early childhood programs specific to Aboriginal children and families' needs would help to break intergenerational cycles of poverty, substance misuse and abuse, and identity loss. Furthermore, with the aim of directing and informing policy and program development, the AFN (1989) recommended five components necessary for Aboriginal early childhood programs: 1) preservation of language and culture; 2) parental and community participation; 3) local jurisdiction and control; 4) quality management and human resources; and 5) adequate fiscal resources. In the early days of Indigenous early childhood development programs in Canada, it was the voice and leadership of national Aboriginal organizations that represented a first step in support of Aboriginal early childhood programs. However, it was not for another five years that the Canadian government responded to leadership calls for funding commitment to establish early childhood programs that would contribute the restoration of Aboriginal traditional cultural, language and family systems.

Aboriginal-specific early childhood programming became a reality with the federally funded First Nations Inuit Child Care Initiative (FNICCI) in 1994, and the Aboriginal Head Start (AHS) initiative in 1995. In a series of articles drawing from policy papers, government documents and her own research on Aboriginal 'quality care,' Greenwood (1999, 2001, 2003, and 2006) reveals that although the approach was fragmented, the Canadian federal government finally took the first step to meet the need for Aboriginal-specific early childhood programs by financially supporting the FNICCI and the AHS initiative. The FNICCI provided child care spaces to family members accessing employment and educational opportunities (Human Resource Social Development Canada, 2009), whereas the AHS initiative was an early interventionist model of child care available to urban and northern dwelling children to prepare them for Kindergarten entry (Public Health Agency, Health Canada, 2009). Furthermore, whereas the FNICCI developed programs based on AFN (1995) recommendations that early

childhood programs be “community-directed and controlled, holistic and focused on child development, inclusive, comprehensive, flexible and accessible” (Greenwood, 2006, p. 16), the AHS initiative (development committee) conducted national consultations with Aboriginal people and organizations to develop six mandatory components of service delivery: 1) Culture and language; 2) Education and school readiness; 3) Health promotion; 4) Nutrition; 5) Social support; and 6) Parental and family involvement (PHAC, 2009). The Aboriginal Head Start initiative was expanded in 1997 to include an on-reserve provision (AHSOR) (First Nations Inuit Health Branch, Health Canada, 2009) that incorporated the same six components. However, AHSOR differed from its ‘Urban and Northern’ counterpart because it was funded by another federal branch of Health Canada. Multiple funding branches and jurisdictional boundaries for service delivery (e.g., on- versus off-reserve), reflect age-old ‘Indian policies’ that displaced Aboriginal people from their traditional territorial boundaries, created reserve systems, and created disputes of responsibility between federal and provincial governments regarding the welfare and education of Aboriginal children (AFN, 1989; Blackstock et. al, 2005; National Indian Brotherhood, 1972). These fragmented funding bodies have been identified in the literature as problematic for effective service delivery for Aboriginal children (Blackstock et. al, 2005; Greenwood, 1999). Nonetheless, the creation of the FNICCI, and the AHS Urban and Northern and AHS On-Reserve initiatives demonstrated that the Canadian government was responding to the demands of Aboriginal people for early childhood services. Furthermore, the inclusion of flexibility in programming to attend to local community needs for culture, language, health and socio-economic development (Ball & Pence, 2006) demonstrated that in practice, Indigenous values for early childhood education and care were becoming a reality in Canada.

With Indigenous early childhood program models to draw from as examples, the first studies on Aboriginal child care and specifically ‘quality care’ began to emerge. Researchers began to articulate the values and goals for early childhood development from a Canadian Indigenous perspective. The Royal Commission on Aboriginal Peoples (RCAP) (1996) seminal research document argued that with the adoption of holistic approaches to child development (i.e., supportive of the emotional, physical, intellectual

and spiritual growth of the child), in concert with traditional child rearing practices – where children are raised in extended family settings, connected to the land, and learn skills to prepare them for community roles, early childhood programs are more than a support for parents seeking employment and/or education, they are vehicles to create and restore positive, secure Aboriginal identities. In the only national study specifically addressing quality care from an Aboriginal perspective, Greenwood and Shawana (1999) compiled data from British Columbia, Saskatchewan, and Ontario to identify what quality care means in First Nations early childhood development settings. The researchers conducted twenty-six key informant interviews - eight in British Columbia, ten in Ontario and eight in Saskatchewan; held six focus group sessions at provincial wide Aboriginal early childhood conferences – three in British Columbia, one in Saskatchewan, and two in Ontario; and made three site visits – one in each province, to glean a variety of perspectives on First Nations child care from those involved in the field. Study participants included early childhood educators, Elders, Chiefs and/or band councillors, parents, and community members. Echoing recommendations from the AFN (1989, 1995) and research findings from the RCAP (1996), Greenwood and Shawana (1999) found that centre-based child care, with care and education services outside of the home and in an institutional setting, do not represent traditional child care settings. As such, careful attention must be made in the development and delivery of centre-based early childhood programs to ensure they do replicate residential school experiences. Significantly, Greenwood and Shawana (1999) were the first to identify five key components to Aboriginal quality care, contextualized by the historical, social, and political realities of Aboriginal communities. The following highlights the study’s conclusions on quality care:

- 1) Context and intent: quality programs engage traditional family roles where the child is viewed as the ‘heart of the community’ and extended family members participate in child rearing;
- 2) Community and parent involvement: quality programs involve not just parents, but communities and extended family members;

- 3) Environment: quality programs provide safe learning environments, which include natural outdoor spaces ‘on the land’ as well as adequate indoor classroom space;
- 4) Caregivers: quality programs will employ trained early childhood personnel who are of Aboriginal ancestry, and ideally from the local community; and
- 5) Program curriculum: quality programs will include traditional teachings from Elders and community members, appropriately compensate Elders both through gifts and honouraria, and will prepare children for school.

Greenwood and Shawana’s (1999) study on First Nations quality care solidified the notion that Aboriginal communities hold unique perspectives for early childhood program development and service delivery. With Aboriginal early childhood programs well under way in Canada, it became clear that the early years – as the critical formative years of one’s development, are also a critical period for culture, language, and identity development.

Early program development in Canada responded to the need for improved educational outcomes for children, the need for early access to culture and language in community based settings, and the need for opportunities for parents and extended family members to pursue employment and educational opportunities (Ball & Pence, 2006; Greenwood, 2001). Therefore, the question remains, after just over a decade of culturally-responsive Aboriginal early childhood programming in Canada, what are the common threads that weave throughout and across Indigenous early childhood programs that may lead to understanding Indigenous-specific values for early childhood education and care? A review of literature from the innovative First Nations Partnership Program (Ball & Pence, 1999; 2006), international and Canadian models of Indigenous early childhood programming, as well as the BCACCS’ (2005) draft quality statement, will lead to the five values identified as meaningful for Indigenous early childhood education and care programs, and the working definition of Indigenous quality care used in this study.

The First Nations Partnership Program (FNPP) inspired and supported the shift in thinking about quality care from (largely) developmentally appropriate practice, to a place where quality care is understood in relation to, and in the context of, children’s social and cultural communities (Dahlberg et. al 1999). In the two decades that have

passed since the Meadow Lake Tribal Council first proceeded in partnership with University of Victoria School of Child and Youth Care to develop a community-based early childhood practitioner training program (Ball & Pence, 1999), scholars of the FNPP have contributed significantly to understandings of Indigenous early childhood program practice, and why it differs from its mainstream counterparts (Ball, 2001; Ball & Pence, 1999; Ball & Pence, 2006; Pence, 1999). We may look to the literature from the FNPP as reliable resources of information on Indigenous early childhood program development and delivery for a few reasons. Firstly, the FNPP demonstrated its ingenuity and success by expanding to a total of ten partnership programs in nine communities across British Columbia and Saskatchewan (Ball & Pence, 2006). Secondly, the program has had unprecedented achievement respecting Indigenous post-secondary completion rates, securing early childhood practitioner employment in the local community, and supporting “personal transformations that reach far beyond the classroom” (Ball & Pence, 2006, p. 96). As Ball and Pence (2006) explain in detail:

From 1998 to 2000, we undertook a comprehensive evaluation of the first seven partnership programs...In the first seven partnerships 102 of the 118 students (86.4 percent) who enrolled in a child care training program completed one year of full-time study. For students in British Columbia, this resulted in eligibility for basic certification in ECE by the Ministry of Health. Students completing the full two years (77.3 percent) were eligible for a university diploma as well...Over 80 percent of program graduates reported that their parenting and grandparenting skills and their confidence had improved significantly (pp. 97-98).

Ball and Pence (2006) report that the positive results described (above) have not been documented with respect to Indigenous graduation rates and/or program satisfaction in mainstream post-secondary institutions. In addition, research from the FNPP reports that graduates who return to work for their respective communities become essential resources for broader health and social services (Ball, 2005; Ball & Pence, 2006). The research on the FNPP, which has been complimented by anecdotal stories, is an important resource for understanding Indigenous early childhood education in a Canadian context.

Pence (1999) and Ball (2004) attribute the success of the FNPP to the fact that first and foremost Indigenous early childhood programs come from Indigenous people

(Pence, 1999; Ball, 2004). Effective programs must be located within Indigenous communities, must build from the knowledge and values inherent to each community, and be flexible to attend to individual community needs (Ball, 2004; Ball & Pence, 2006). Taking the position that ‘whom we learn from, how we teach, and what we teach’ (i.e., curriculum) in early childhood program is reflective of knowledge within the community, the FNPP supported from an early childhood perspective, the consistent argument made by Indigenous scholars that Indigenous education must be grounded in Indigenous knowledge (Agbo, 2004; Battiste 1998; Barnhardt & Kawagley, 2005; Battiste & Barman, 1995; and Cajete, 2000). A central tenet of Indigenous knowledge in education is that it lives within Indigenous people, and particularly, Indigenous Elders (Battiste, 2002). The role of Elders in education programs cannot be understated, as Dallin, Rosborough and Underwood (2008) contend:

Elders are the symbol as well as the repository of Indigenous culture, that is, cumulatively they are the physical representation of the continuity of accumulated knowledge between generations. As well as being individually the carriers and communicators of practical knowledge about what to do and how to do it (p. 87).

With the belief that Indigenous knowledge must ground early childhood programming, Ball and Simpkins (2004) conducted a descriptive study to reveal how Indigenous knowledge emerges in early childhood practice. The researchers visited three diverse FNPP participating communities to conduct conversational interviews with twenty-seven First Nations early childhood program graduates, and thirty-one child care administrators, parents, and community Elders. The study revealed that culturally situated learning is more than visible cultural activities – for example storytelling, traditional food preparation/feasting, drumming and song. Culturally situated learning reflects Indigenous methods of teaching and learning (Ball and Simpkins, 2004). To highlight how Indigenous knowledge emerges in practice, Ball (2004) offers the following lesson from the FNPP experience:

It started out that the Elders sat at the front of the class and all the students were at their tables...[taking] notes like a classroom situation. Then the Elders said: ‘This isn’t the way we do this. We don’t talk this way, as us and them. And it’s

disrespectful while we're speaking for peoples' heads to be down like this and writing. We talk in a circle. There's all these tables between us and there's no interaction, there's no real connection happening there' (p. 469).

In this way, Indigenous knowledge in early childhood programming is much deeper and more meaningful than the token acknowledgement of Indigenous culture through celebratory days, foods or dances. Authenticity in Indigenous early childhood programs is the demonstration of Indigenous knowledge in both what is taught and how it is taught.

The literature reviewed thus far repeatedly argues for the inclusion of culture and language in Indigenous early childhood programming, recognizing that language and culture are mutually dependent. As Agbo (2004) argued, "one of the most important traditions is the social bond that ties every community member to a common ancestry, and the Ojibway language conveys [that] traditional knowledge to people" (p. 26). Therefore, critical to the discussion of both the 'how' and 'what' of Indigenous knowledge in early childhood education (Ball & Simpkins, 2004), is the inter-generational transfer of Indigenous knowledge through Indigenous language.

It is widely advised in Indigenous scholarship that language is a core component to Indigenous early childhood programs due to the relationship between early language acquisition and the opportunity for restoration and revitalization of Indigenous languages (Ignace, 1998; McCarty, 2003; Reyhner, Trujillo, Carrasco & Lockard, 2003). Indigenous language extinction is a reality around the world (McCarty, 2003) and Indigenous languages are "more likely to disappear as a result of the destruction of the cultural habitat of their speakers than the direct attack [through colonial policies] on their use" (Cantoni, 2007, p. vii). Therefore, the need for early childhood programs that contribute to the prevention of further language loss is unquestionable. However, more important to the discussion is that the teachings and values of Indigenous knowledge and identity cannot be expressed in any other language than those of the community and/or culture. As Okanagan scholar Armstrong highlights, "...the uniqueness of our tribal identity is contained in our languages. Our language makes clear who we are. Everything you need to know is in the language" (Benham & Cooper, 2000, p. 51). From this perspective, teaching Indigenous language in early childhood settings is critical to developing positive, secure Indigenous identity.

The view that language is vital to linking Indigenous teachings from generations past to generations forward is strongly supported in international Indigenous early childhood literature (Aguilera & LeCompte, 2007; Te Kohanga Reo National Trust, 2009). Early childhood language immersion programs, or the ‘language nest model,’ consistently emerge as promising practice for intergenerational transfer of Indigenous knowledge (Johnston & Johnson, 2002; May, 1999; Reyhner et. al, 2003). The language nest model developed by Māori communities in Aotearoa/New Zealand is the enactment of traditional care giving roles and transmission of oral history in a language immersion setting (May, 1999; TKR National Trust, 2009). Evidence of its success is its role in Māori language revitalization (Reyhner et. al, 2003) and its influence on government policy in support of bi-cultural education [see: Te Whariki] (Carr, May & Podmore, 1998). Essential to its success is its family-based philosophy, whereby programs assume traditional whanau (family) settings for learning with active extended family and community involvement in programming (May, 1999). Research on the successes and limitations of the language nest model in both Canadian and international Indigenous contexts, upholds and reinforces the argument that early childhood programs contribute positively to Indigenous language revitalization, and that Indigenous language acquisition is central to Indigenous identity formation (McIvor, 2005; Reyhner, 2003).

Critical components of Indigenous early childhood programs identified in some of the research literature include: Indigenous knowledge, Indigenous language, and adherence to community contexts. To highlight, core components of the Aboriginal Head Start initiatives, the First Nations Partnership Program, and language nest programs included: community administration; flexibility in programming to respond to localized language, culture, and socio-economic needs; and ensuring that Indigenous people and Elders comprise core program staff (Ball & Pence, 2006; Greenwood & Terbasket, 2007; McIvor, 2005). In this way, programs rooted in community contexts reflect the principle that Indigenous people and nations are political and cultural entities of their own accord, not solely racial groups (AFN, 2005; Carr et. al, 1998). Further, by supporting community needs, Indigenous early childhood programs reinforce the inherent right and responsibility of Indigenous people to educate their own children (Ministers National Working Group on Education, 2002; National Indian Brotherhood, 1972). As Greenwood

(2001) argues, “the greatest violation of Aboriginal children’s rights would be to develop and implement early childhood programs that would serve to assimilate them into a society other than that which is their birth right” (19). Further examination of the literature on community controlled education will reveal that Indigenous governance of programs is essential to support Indigenous values for child rearing and child development.

The research on innovations in community-controlled education is limited in that it largely reflects programs delivered on-reserve and/or in remote communities, and programs ranging from Kindergarten to grade 12 (Agbo, 2005; First Nations Education Steering Committee, 2003; Manuelito, 2005). However, the models have implications for Indigenous early childhood program development because of their insight into community governance of program delivery. In a study to identify key contributors to local authority in seven British Columbia community-controlled schools, varying in service from pre-Kindergarten to grade 12, Kavanagh (1999) found that parental and community involvement, as well as governing structures inclusive of community membership (e.g., board of directors), effectively supports community control. The study also identified how community-controlled education supported Indigenous cultural values. For example, communities in the study considered challenging the provincially mandated school calendar (September to June) to support and facilitate child and family participation in traditional land-based practices. Instead of a two-month break in the summer, programs considered taking longer, more frequent breaks throughout the year to respond to seasonally dependent activities. Although details of the final curriculum decisions were not discussed, the example illustrates how community controlled education influences communities’ capacity to implement programming that reflects the cultural rhythm of the community.

National and international literature on the successes and challenges of community-controlled education reveal the following specific elements that contribute positively to Indigenous governance in education: sufficient federally provided capital resources (Agbo, 2002); clearly outlined policies, mandates, goals, and/or visions for education (Barnhardt & Kawagley, 2005; Assembly of Alaska Native Educators, 1998); governance structures comprised of Indigenous community members – for example,

boards of directors and/or provincial steering committees (Agbo, 2005; Kavanagh, 1999); Indigenous educators from the community (Ball & Pence, 2006; Orr, Paul & Paul, 2002); evaluation measures responsive to community goals for child development (Stairs & Bernhard, 2002); and community participation in programs (Fasoli & Johns, 2007; Kavanagh, 1999). Although much of the literature draws on service delivery outside of the early childhood realm (birth to six), the literature is applicable to early childhood programs because it provides concrete strategies for effective community governance over education. Furthermore, the application of *Indian Control of Indian Education* (National Indian Brotherhood, 1972) to all Indigenous educational contexts promotes a holistic view of Indigenous education (RCAP, 1996). As the Minister's National Working group on Education (2002) highlights, "A First Nations education system that meets the needs of First Nations peoples and communities on a lifelong learning continuum includes early childhood development, K-12, post-secondary, all forms of skill and development [training] and adult learning" (p. 3). In this way, community controlled early childhood programs enhance the viability of seamless educational transitions, acknowledge the "circular relationship between schools and healthy nations," (Kavanagh, 2006, p. 1) and support the principle that Indigenous people have the right to determine what is best for Indigenous children.

Another common thread across Indigenous early childhood education models is the meaningful engagement of community to ensure cultural continuity between home and school (Ball & Pence, 2006; Flear, 2004; Greenwood & Terbasket, 2007). In addition to contributing to seamless educational transitions, community involvement in programming more appropriately reflects the extended family systems inherent in Indigenous communities (Flear, 2004). These family systems include blood relations, but often times denote kinship relations (Glynn & Berryman, 2003). As Anderson (2002) reveals,

Traditionally, before they could walk, our children were raised by extended family, carried about the community on a cradleboard. From infancy, children were taught the 'big story' and the abstract messages of our being. They learned to listen and observe. They watched how the whole community worked as a group to ensure the survival of all (p. 296).

In this way, involving community in program development and delivery demonstrates commitment to traditional child rearing approaches, and suggests a community-based philosophy of parental involvement (Fleer, 2004; Fleer, 2006). The relevance of community involvement in programs extends beyond that of program governance, to one that supports the extended family nature of Indigenous communities.

The notion of community involvement for effective Indigenous educational practice has been explored and supported in both early childhood and primary (K-6) educational settings (Fleer, 2004; Friedel, 1999; Glynn & Berryman, 2003), with the belief that community involvement develops trust between institutions and Indigenous families (Fasoli & Johns, 2007; Friedel, 1999; Goulet, 2001). In a case study of two Canadian Aboriginal, primary level educators known to be effective in their own communities, Goulet (2001) found that critical to community involvement is the development of equitable relationships between teacher/institution and families. A relational approach to engage communities in programs is critical to honour Indigenous people's historical assimilative and traumatic relationships with educational institutions. As Debbie Moore revealed in her plenary address at the First Nations Education Steering Committee conference, (2003) "our parents don't tend to join PAC committees. Too often, they are fundraising focused. That's not relevant for us" (p. 2). Research from the FNPP upholds the importance of relationship building, as Indigenous early childhood sites became essential community outreach service points (i.e., 'hooks') for families to access information and resources for additional health and social services (Ball, 2004). For Indigenous early childhood programs, the notion of community involvement in programming reaches beyond governance and administration; it supports Indigenous extended family systems, promotes congruency between home and school culture, and dismantles inequitable power relationships between home and school.

The literature reviewed thus far argues that early childhood programs give expression to Indigenous knowledge through a holistic view of education, whereby program philosophy, pedagogy, curriculum and evaluation uphold the inextricable link between the cognitive, emotional, physical and spiritual domains of development (Cajete, 1994; RCAP, 1996; Stairs & Bernhard, 2002). Indicative of a holistic approach is the view that "the land is the first teacher" (Haig-Brown & Dannenmann, 2008, p. 248).

Contrary to mainstream and the Reggio Emilia Approach that consider the (outdoor) environment the third teacher, “to come from a place of Indigenous knowledge, you must include traditional teachings, which means bringing children back to the roots of the land” (Goulet & McLeod, 2002, p. 362). In an essay revealing the constructs of their ‘Indigenous Knowledge Instructors Program,’ which supports Aboriginal people with traditional knowledge to pass their knowledge on to others through land-based pedagogy, Haig-Brown and Dannenmann (2008) explain in detail how Indigenous peoples’ relationship to land is the crux of Indigenous knowledge and thus Indigenous pedagogy:

Indigenous peoples have lived for generations in good relation with the land in all its complexity...The concept of land, in relation to which such learning takes place, goes beyond a simple material understanding to the spiritual where lines between animate and inanimate, animal and human, and spirit and material are consciously and deliberately blurred...This elaborate notion of land encompasses an understanding of the interrelationships and subjectivities beyond the human: for example, a river or lake may rejoice or suffer with the actions of those around it...Traditional knowledge is all about relationships. It moves beyond a merely physical relation to a spirituality that draws on those innumerable generations of thinking with and through the relation (pp. 249-50).

Indigenous peoples’ deep rooted relationships with the land is the core resource from which Indigenous knowledge derives, and the spiritual component of Indigenous knowledge is what distinguishes holistic approaches to education. Literature from an innovative teacher education program in Saskatchewan further upholds that traditional teachings of and from the land are essential to holistic approaches to education (Goulet & McLeod, 2002). In this program, Indigenous ceremony is practiced daily and students garner traditional teachings from Elders in land based settings. As Goulet and McLeod (2002) describe:

Before taking plants, Elder Clara performs a quiet ceremony, modeling prayer, offerings and thankfulness. She will then explain to students that they may now gather sage, which can be used both as a medicine and smudge. You will hear her explain how and why to show respect for the land and life of the plant by giving back to the earth when something is taken (p. 362).

By including teachings of traditional medicinal and spiritual practice from Elders in land-based settings, both Indigenous knowledge instructors' programs described here, as well as the FNPP (Ball & Pence, 2006), support the principle that the core of holistic education is the inclusion of spiritual development in land based contexts. Although these innovative programs describe practitioner training and professional development programs, they have implications for Indigenous early childhood programs. First, they explain the notion of land-based pedagogy and its relationship to holistic education models. Second, the evidence of high post-secondary completion rates in culturally relevant programs due to their foundations in Indigenous knowledge, lend support to the claim that culturally relevant educational experiences contribute to successful educational outcomes (Ball & Pence, 2006). Finally, these examples suggest that by investing in culturally based training for pre-service educators, the teachings of Indigenous knowledge and the values of Indigenous cultures will be passed down to Indigenous children through early childhood programs.

The literature on Indigenous early childhood education reviewed suggests that to nurture Indigenous children from an Indigenous place, (Greenwood, 2006) Indigenous early childhood programs need to: include Indigenous people, accept Indigenous knowledge as the core resource from which to build programs, promote the use of Indigenous language, engage extended family members and community in the governance of programs, build long term relationships with families to establish trust between educational institutions and Indigenous people, and recognize that early childhood is one step along the life-long learning cycle, "that begins from and returns to the spirit world" (AFN, 1989; Anderson, 2002; Cajete, 2000). As we draw conclusions from the concepts and structures identified in the literature as meaningful to Indigenous early childhood programs, our review as well, returns to where it started. Literature on Indigenous early childhood education supports the argument first posed by the Assembly of First Nations (1989) in their effort to demand government funded early childhood services for Canadian Aboriginal people:

First Nations see the child care centre as the community core. Before Indians became a colonized people, children were at the heart of the community. First

Nations must restore them to that place, and in doing so, restore themselves. Indians will have come full circle, as the Creator desires (p. 50).

The following discussion summarizes the BC Aboriginal Child Care Society's (2005) *Draft Quality Statement on Aboriginal Child Care* and reveals the working definition of Indigenous quality care used for this study.

2.4 BC Aboriginal Child Care Society 'draft quality statement on Aboriginal child care' and Indigenous values for early childhood education and care

This review of the literature thus far has served to situate BCACCS' (2005) *Draft Quality Statement on Aboriginal Child Care* (quality statement) in the contexts of both mainstream literature on quality care and literature on Indigenous early childhood education and care. Recall that the reconceptualist movement in early childhood education drew from the experiences of the First Nations Partnership Program and the Reggio Emilia Approach as examples of alternative models for early childhood education, which support the notion that quality care is more appropriately understood as a process of exploring community-based values for early childhood development (Dahlberg et. al., 1999). BCACCS agreed with arguments in the reconceptualist movement in that practices promoted through DAP/DAP-R (Bredekamp, 1987; Bredekamp & Copple, 1996) were not necessarily universally appropriate, and believed that notions of quality care promoted through the Canadian Child Care Federation's (1991) national statement were limited in their application to Aboriginal early childhood contexts in British Columbia (Isaac, personal communication, 2006). With the view that mainstream notions of quality care did not speak to the socio-economic, historical, and political realities, as well as the cultural and linguistic backgrounds of Aboriginal communities in British Columbia, BCACCS determined that an Aboriginal vision for quality documented in statement form, would address the limitations of CCCF (1991) national statement, and contribute to the literature within the reconceptualist movement for quality. More importantly, the statement would urge policy development and enhance program funding based on common indicators of Indigenous early childhood practice (Isaac, personal communication, 2006). Thus BCACCS began the process to identify and describe Indigenous-specific notions of quality care.

BCACCS collected opinion from surveys online (data regarding number of participant responses not available) and held several consultations with BCACCS' board of directors – which notably included prominent Indigenous early childhood scholar Margo Greenwood, to identify sixteen elements of Aboriginal quality care (BCACCS, personal communication, 2006). The following summarizes and describes the sixteen elements that comprise the BCACCS (2005) quality statement.

- 1) **Aboriginal World View:** Quality Aboriginal child care programs reflect a shared world view and child care personnel pass our values on to our children.
- 2) **Relationship with Environment:** Quality Aboriginal child care programs teach children how to respectfully use and care for the earth's gifts.
- 3) **Cooperative Relationships:** Quality Aboriginal child care programs teach children a non-competitive approach to life. Child care personnel model cooperation, respect, consideration for others and sharing.
- 4) **Elder Involvement:** Quality Aboriginal child care programs teach children to respect our Elders. Quality Aboriginal child care programs ask for guidance from Elders. The views of Elders are invited, heard, valued and acted upon. Elders are an essential part of the curriculum.
- 5) **Holistic View of Development:** Quality Aboriginal child care programs support the development of culturally appropriate, holistically-based curricula and assessment instruments.
- 6) **Aboriginal Languages:** Quality Aboriginal child care programs endeavour to ensure that children's rights to enjoy and become literate in their own languages are honoured to the extent possible.
- 7) **Relationships with Families:** Quality Aboriginal child care programs build positive, respectful relationships with children's families and work in partnership with them.
- 8) **Preparation for Future Responsibilities:** Quality Aboriginal child care programs prepare children to eventually assume a wide range of responsibilities as members of thriving self-governing communities.
- 9) **Inclusion:** Quality Aboriginal child care programs are inclusive.
- 10) **Multi-age Groupings:** Quality Aboriginal child care programs recognize the advantages of multi-age groupings.

11) Respect and Recognition for Child Care Personnel: Quality Aboriginal child care programs are exemplary employers, providing all personnel and volunteers with training, support, respect, and recognition for the important work they do.

12) Research: Quality Aboriginal child care programs conduct and participate in research to answer their own questions and increase their understanding of issues that are important to them and to their communities.

13) Delivery Models: The descriptions of quality Aboriginal child care are applicable in all settings in which children receive care and education.

14) Collaboration and Network Building: Quality Aboriginal child care programs provide personnel with opportunities to establish and maintain connections with other Aboriginal child care providers.

15) Accountability: Quality Aboriginal child care services are governed by and accountable to Aboriginal parents and communities.

16) Local Authority: Quality Aboriginal child care programs comply with the regulations developed by Aboriginal child care administrative bodies.

The sixteen elements of the quality statement support and reinforce many of the concepts emphasized in literature as relevant and meaningful for Indigenous early childhood programs. To highlight, fostering respectful relationships with environment, promoting a non-competitive approach to life, including Indigenous language to the extent possible, and including Elders as instructors and role-models, all reflect the need of grounding programs in an Indigenous worldview and developing curricula based upon Indigenous knowledge (AFN, 1989; Ball & Pence, 2006; Greenwood & Shawana, 1999; RCAP, 1996). Preparing children for community roles and responsibilities, remaining accountable to Aboriginal communities, and ensuring local authority over programs, all support arguments for Indigenous governance over programming (AFN, 1989; AFN, 1995; National Indian Brotherhood, 1972). Further, the emphasis on building relationships with families supports repeated arguments in the literature to view involvement as inclusive of extended family and community members (Fleer, 2004; Goulet, 2001; Greenwood, 2006). Finally, the quality statement also supported some of the ideas for quality represented in non-Indigenous early childhood literature. For example, networking, training and support for caregivers, and fostering inclusive classrooms are elements of quality promoted by the National Association for the

Education of Young Children (2005) and the Canadian Child Care Federation (1991). By documenting notions of care reflected in both Indigenous and non-Indigenous early childhood education literature, the statement was a strong first step to defining quality in early childhood education and care from an Indigenous perspective.

After visiting early childhood programs in the district of Reggio Emilia, Italy, in 2006 BCACCS' executive director and early childhood colleagues identified parallels between the 'Reggio Emilia Approach' and Aboriginal early childhood programs in BC (Pacini-Ketchabaw, V., Kocher, L., Berger, I., Isaac, K., & Mort, J., 2007). The trip resurged BCACCS' interest in the quality statement and its relevance and potential for the early childhood sector. To increase its contribution to the reconceptualist movement, as well as its ability to affect policy and/or program development in the Aboriginal early childhood field, BCACCS determined additional research would move the statement from its draft form to one that could articulate the values inherent to Indigenous early childhood programs (Isaac, personal communication, 2006). This desire to refine the draft version of the quality statement informed this research project.

This review examined discourses on quality care from its theoretical foundations in developmental psychology and its promotion by North American early childhood leadership organizations to the reconceptualist movement for quality care that urged for socio-cultural approaches to discourses on early childhood. Further, with the emergence Canadian Indigenous early childhood programs, and literature on Indigenous early childhood education, this review led to BCACCS' (2005) quality statement and the need to explore 'meaning making' in early childhood programs from an Indigenous perspective.

To identify Indigenous values of early childhood education and to explore Indigenous quality care in a manageable way, the research team (comprised of my academic supervisor, the executive director of BCACCS and myself) determined a working definition of Indigenous quality care would be needed to facilitate this research project. As such, the research team collapsed the quality statement and identified the following five values as critical to Indigenous approaches to early childhood education and care:

- 1) Indigenous Knowledge/Ways of Being: Indigenous early childhood programs foster Indigenous ways of being by employing Indigenous personnel, promote intergenerational transfer of Indigenous knowledge through Elders, and include traditional teachings as part of culturally-based curriculum materials.
- 2) Self Determination: Indigenous early childhood programs ensure Indigenous governance/authority over program development and service delivery.
- 3) Holistic View of Child Development: Indigenous early childhood programs support the interconnectedness of all domains of development (cognitive, social-emotional, physical and spiritual) and particularly attend to Indigenous children's spiritual development needs.
- 4) Family and Community Involvement: Indigenous early childhood programs adopt a community-based philosophy of parental involvement, and engage extended family and community members in program delivery and decision making.
- 5) Aboriginal Languages: Indigenous early childhood programs recognize Indigenous language as holding the intricacies of Indigenous ways of being; and thus include Indigenous language to the extent possible.

It is from these five values of Indigenous early childhood education and care that this study examined Indigenous quality care in Indigenous early childhood program practice. The remaining chapters of this thesis will demonstrate how this study explored how Aboriginal practitioners take up these five elements in practice to reveal how Aboriginal early childhood practitioners realize Indigenous quality care.

3 Methodology

Recently, Indigenous scholars have identified research to be a Western institution that served to ‘Other’ and victimize Indigenous people, as well as construct romanticized and disparaging views of Indigenous cultures and languages (Smith, 1999; Castellano, 2004). In the watershed text on Indigenous research methodology, Smith (1999) argues that research “continued to privilege Western ways of knowing, while denying validity for Indigenous people, Indigenous knowledge, and Indigenous languages and cultures” (p. 183). In an article urging the implementation of ethical guidelines for research with Aboriginal people in Canada, Castellano (2004) argues, “just as colonial policies have denied Aboriginal people access to their traditional lands, so also colonial definitions of truth and value have denied Aboriginal peoples the tools to assert and implement their knowledge” (p. 102). From this perspective, research has been a highly strategic method from which to silence Indigenous people. In addition, research *on* Indigenous people has typically been self-serving for the non-Indigenous researcher and/or academy, with little attention paid to the research needs of the Indigenous community (Ball, 2005b; First Nations Centre, 2005; Piquemal, 2000). As such, it is no longer acceptable to assume Indigenous people as silent subjects or to engage in research practices motivated more by the curiosity of the researcher than the research objectives of the Indigenous community. The historical ‘relationship’ between research and Indigenous people has not been one of relationship at all; therefore literature has begun to articulate the premises of ethical, relational, and meaningful research with Indigenous people. The shift from research *on* to research *with* Indigenous people has begun to construct an Indigenous research methodology.

Indigenous research methodology is grounded in the view that research is a tool for de-colonization (Smith, 1999) and an enactment of self-determination (First Nations Centre, 2005). Indigenous research methodology validates Indigenous knowledge and the research priorities of Indigenous people (Ball, 2005b; First Nations Centre, 2005). To give credence to Indigenous research methodology, Indigenous scholars and organizations have recommended various principles to guide research with and within Indigenous communities. Piquemal (2000) shares four ethical guidelines for research

with Aboriginal communities: 1) partnership; 2) approval from community-based governing authority; 3) ongoing consent; and 4) submission of data to community prior to final reporting. The National Aboriginal Health Organization (2005) also stands behind four principles for research with Aboriginal people: 1) ownership; 2) control; 3) access; and 4) possession (OCAP). Kirkness and Barnhardt (1991) first argued for the four 'R's' of meaningful engagement with Indigenous students, which have relevancy for Indigenous research methodology: 1) respect; 2) relevance; 3) reciprocity; and 4) responsibility. Finally, building from Indigenous methodology scholarship and twenty years of research experience in Indigenous early childhood development, Ball (2005b) recommends that close attention be paid to the introduction and dissemination of research projects with Indigenous people. Specifically, she suggests sharing project details with community members in a variety of settings and using a number of approaches; that is, newsletters, community dinners, informal gatherings, and community bulletins. Further, Ball (2005b) argues that interpretation and dissemination of data must operate from a strengths-based approach, documenting the strengths of the culture, language, and spirituality capacities of the community. Collectively, the OCAP principles, the four R's for engaging community, and the experiences of the FNPP in Indigenous early childhood research provide solid direction to guide ethical research practices with and within Indigenous communities. With this direction, this study was developed and conducted utilizing an Indigenous research methodology framework.

3.1 The partnership and study development

In 2005, BCACCS invited feedback on their draft quality statement from participants at their 2005 annual training conference and from BCACCS' board of directors. This early feedback revealed that the statement needed refining to reflect broader notions of Indigenous care, as well as additional evidence from program practice to support its claims (Isaac, personal communication, 2006). BCACCS decided that evidence was needed to demonstrate how Indigenous notions of quality care emerge in Aboriginal early childhood settings in BC, in order to strengthen the organization's ability to influence and affect policy and program development. My academic supervisor, representing UBC, and the executive director of BCACCS had previous experience

working together and decided to engage in a community-university research partnership to proceed with the study. My academic supervisor and the executive director of BCACCS developed the terms of partnership, study goals, objectives, methods of data collection and dissemination activities, and as an Aboriginal graduate student at UBC with a research interest in Indigenous early childhood education, I was invited to participate in the study. The larger 'Realizing Quality in Aboriginal Early Childhood Development' study was a substantial research endeavour; however, my academic supervisor and the executive director of BCACCS invited me to utilize a portion of the study for my master's thesis research, which would fit in to the goals and priorities of the larger study proposed. Although the partnership and development of the study were larger in scope, in the data collection and analysis sections of this methodology chapter, I report only on the portion conducted for my master's thesis.

The terms of partnership developed for this study outlined the responsibilities of both the university and BCACCS, how BCACCS would maintain ownership over findings, and how both groups would disseminate findings collectively. These agreements were important to the Indigenous methodology used in this study. It is also important to reveal that my academic supervisor and I both identify as Aboriginal ancestry, giving further strength to the Indigenous methodology framework of this study as it contributes to building Indigenous capacity in research. Smith (1999) argues that Indigenous research must validate Indigenous knowledge, and support Indigenous community priorities for research; therefore, the collaboration of Indigenous university researchers and an Indigenous community organization, upholds the Indigenous research methodology framework.

3.2 Participation

There is great diversity of service delivery models in Aboriginal early childhood in British Columbia (BC). Jurisdictional boundaries for service provision, children's age and/or service needs, funding sources as well as administrative capacity all affect Aboriginal early childhood program service delivery. To highlight, program models include institutional settings – such as child care, preschool, family child care and Aboriginal Head Start programs; home visiting/outreach models – such as the Aboriginal

Infant Development Program (an early intervention program for children with developmental delays) and Aboriginal Supported Child Development Program (a birth to five years support program for Aboriginal children with special needs) and community governed (band operated) Kindergarten 4/5 programs. As a provincial organization, BCACCS has a mandate to support stakeholders in Aboriginal early childhood development regardless of program model or geographic setting in BC. Given these factors, my academic supervisor, the executive director of BCACCS, and I (we) collectively agreed on two limited criteria to target participant recruitment for the larger study:

- 1) Participants must work in an Aboriginal early childhood program in BC, and represent a range of geographic, linguistic and cultural, and program model backgrounds; and
- 2) Participants must be affiliated with BCACCS, whether as members or as service delivery recipients.

For this study, we defined an Aboriginal early childhood program as the following: any program serving mostly Aboriginal children under the age of six years; any program that adopts, adapts, or incorporates Aboriginal culture and language content; or any program that identifies itself as Aboriginal (e.g., Aboriginal Infant Development Program).

Notably, although BCACCS is guided by the five jurisdictional boundaries of the BC Ministries of Children and Family Development and Health⁵, we decided that Aboriginal early childhood services in BC are more affected by on- and off-reserve geographic settings than the provincial government service provision boundaries. As such, seeking representation from across the five Ministry geographic boundaries was not an objective for sampling.

To recruit participation, we developed a recruitment letter, poster, and display board on UBC letterhead with BCACCS clearly identified as project partner. Recruitment

⁵ BC Ministries of Children and Family Development and Health support provisions of service delivery based on a program's geographic location in five jurisdictions: Vancouver Island, Vancouver-Coastal, Fraser Valley, Interior, and Northern authorities.

materials invited participants to take part in an audio-recorded telephone call at their convenience to discuss Indigenous notions of quality care. To recruit participants, my supervisor and I attended a Northern Region Aboriginal Infant Development Program conference, the BC Aboriginal Head Start (off-reserve) provincial training conference, and BCACCS' annual training conference in Fall 2007, to share information about the larger research project. At these conferences, we had the opportunity to discuss the study in depth and in person with prospective participants. In addition, through Winter 2007-08 we utilized BCACCS' communication networks (i.e., weekly electronic list-serve, bi-monthly print newsletter, and website) to distribute recruitment materials. These initial recruitment efforts did not elicit a sufficient number of responses to begin data collection; therefore, I conducted follow-up phone calls to all forty-five registered member-organizations of BCACCS, (for whom telephone information was publicly available) and further invited their participation. Member organizations included early childhood programs in on- and off-reserve geographic settings, as well as a variety of program models (e.g., Aboriginal Infant Development Program and Aboriginal Head Start Urban and Northern Program). Upon verbal confirmation of interest to participate in the study, all prospective participants were post-mailed recruitment packages. Each recruitment package included one letter describing the study, two copies of the participant agreement letter, and a stamped return address envelope so the participant could return one signed agreement form to me, as co-investigator of the larger project. With this second round of recruitment efforts, we confirmed eighteen participants for the study who met targeted sample criteria. My academic supervisor and I agreed that since ten of the eighteen participants of the larger study identified as Aboriginal ancestry, for the purposes of my master's thesis research, the ten interviews with Aboriginal participants would be suitable and manageable to analyze. By working with ten participants who identified as Aboriginal ancestry, my master's thesis research would reflect exclusively Indigenous perspectives of Indigenous early childhood education. Further, consistent with recruitment terms, diverse program models were represented in the participant sample. The following table (Table 1) identifies the ten participants' jurisdictional setting, program model, and position in the program.

Table 1

Program Location	(N = 10)
Off-reserve	N = 6
On-reserve	N = 4
Program Model	(N = 10)
Aboriginal Head Start Urban/Northern (off-reserve)	N = 3
First Nations Head Start (on-reserve)	N = 1
Drop-in centre	N = 1
Daycare	N = 2
Early intervention program	N = 3
Participant Position in Program	(N = 10)
Administration/management	N = 5
Early intervention specialist	N = 3
Language and culture teacher	N = 1
Early childhood educator assistant teacher	N = 1

3.3 Interview questionnaire design

The quality statement developed by BCACCS contained sixteen elements of quality care relevant to Aboriginal early childhood settings; however, due to financial and time constraints, we were unable to investigate how all sixteen elements of the quality statement were 'realized' in practice. Furthermore, some examples in the quality statement reflected notions of quality evident in mainstream literature. As such, we collapsed the statement into Indigenous-specific themes supported in the Indigenous early childhood education literature, to arrive at five values of Indigenous early childhood education and care. These five elements (following) comprised the working definition of Indigenous quality care in early childhood development:

- 1) Indigenous Knowledge/Ways of Being
- 2) Self Determination
- 3) Holistic View of Child Development
- 4) Family and Community Involvement
- 5) Indigenous Languages

With a working definition in place, and under the direction of my academic supervisor and the executive director of BCACCS, we developed an interview questionnaire that would explore each element of Indigenous quality care as well as notions of quality care more broadly from the perspective of practitioners working in Aboriginal early childhood settings. To support the larger study's goals and objectives, we decided we would need to explore not only how programs implement the elements but also issues of capacity, given the variable stages of development that Aboriginal early child care programs find themselves. As such, the following four topics shaped interview questions within each of the five values of Indigenous early childhood:

- 1) Capacity: What is the program's current capacity to implement the element of quality? What resources and strengths do programs draw from to implement the element in practice?
- 2) Implementation: What strategies, tools and/or practices does the program employ to implement the element? What examples from program practice highlight the element in service delivery?
- 3) Challenges: What barriers and/or challenges exist to implementing the element in program practice?
- 4) Resource needs: What additional resources would enhance the program's capacity to implement the element?

In designing the interview questionnaire, we remained cognizant that the elements of quality selected for exploration may be abstract for our participants. To avoid participant intimidation/alienation we used lay language throughout the interview questionnaire (e.g. tell me how Aboriginal people make decisions about your program? Does your program employ Aboriginal personnel?). Further, to promote conversational interviews, we used both closed and open-ended questions. It was believed that a variety of question types would allow for pointed answers on program operations, (e.g., what method of language instruction does the program use?) as well as more opinion-based answers (e.g., describe what family and community involvement means to you). The final question was left open ended to give participants an opportunity to expand on an earlier response, speak to the five elements holistically, and/or share freely additional comments and opinions regarding notions of quality care in Indigenous early childhood programs (e.g., is there anything else you would like to tell me about delivering high quality Aboriginal early childhood programs that I haven't asked about?). In addition to exploring the five elements of Indigenous quality care, the interview questionnaire inquired regarding the number of staff employed, the number of children served, and if the program was licensed by the BC Ministry of Children and Family Development Licensing Branch (MCFD Licensing Branch hold specific requirements in order for centres to obtain provincial licensure). BCACCS sought this additional program information to capture statistical information of their membership audience and contribute to their own service delivery.

To estimate the duration of interviews and to ensure questions were appropriate for our participants, I conducted a practice interview with a staff member at BCACCS. As an Aboriginal early childhood educator with certification in special needs education and infant toddler education, as well as over twenty years of experience in practitioner, administration, and program development capacities, the staff member at BCACCS met this study's recruitment criteria. This practice interview helped me to think carefully about the language and terminology I would use in the interviews. For example, interviewing the BCACCS staff member confirmed my supervisor's early assumptions that the notion of self-determination in early childhood may be vague for practitioners.

She asked for clarification on what self-determination means in education because she had only heard the term used in reference to ‘band politics’ and ‘land claims.’

With the direction of my supervisor and the staff member at BCACCS, I added examples of practice to clarify what we meant by Indigenous quality care. Frequent check-ins between the Aboriginal organization and the university researchers, as well as the help of my supervisor and co-worker to develop and fine-tune the questions all contributed to the Indigenous lens applied to this study.

3.4 Data collection

For this study, I conducted audio-recorded telephone interviews as it was the only economically viable method of data collection to reach participants across the province. After receiving signed participant consent forms in the mail, I contacted participants by telephone to schedule interviews at dates and times convenient to them. Interviews varied in length from thirty minutes to one hour, depending on the conversational flow of each interview. If participants required clarification of Indigenous quality care or had a specific question about any or all of the Indigenous values for early childhood education, I shared the examples of practice I prepared from the practice run-through with the BCACCS staff member. When appropriate, I probed for deeper explanations and details. For example, when a participant revealed that ‘Elders are our program’s most valued resource,’ I would ask for details of why they are most valued, or what their participation ‘looks like’ to add-value to the program. After I conducted all eighteen interviews, I purchased computer software to transfer audio recordings onto writable-CD and to facilitate transcription of interviews. In compliance with ethical and privacy agreements for this study, I transcribed interviews in a private office. Completed transcriptions were returned to participants for verification and approval, with no revisions, deletions, or additions required. Obtaining participant verification of transcripts is an important component of the Indigenous methodology used for this study, as ongoing consent is one of the four pillars of Piquemal’s (2000) recommendations for research with Indigenous people.

3.5 Analysis

After interview data were collected and transcribed, the research partners coded the eighteen Aboriginal participants with pseudonyms. I then selected the ten practitioners who identified as Aboriginal to begin the analysis process for my master's thesis research. As indicated earlier, data were collected on each of the proposed five values of Indigenous early childhood education across four areas of inquiry (program capacity and strengths, implementation and examples from practice, challenges or barriers to practice, and additional resource needs). In addition, participants were invited to share thoughts on Indigenous notions of quality care more broadly. As such, data for this master's research study were coded and analyzed in two stages: first to identify how each value emerges in practice, and second to identify common practices that emerge across all five values of Indigenous early childhood.

To facilitate the data analysis process, I created two tables, which I used to sort and categorize data into themes. The first table had five columns, one column representing each of the five values for Indigenous early childhood education explored in the study. The second table was left open to sort and categorize themes emerging across the five values. That is, the table was created as themes emerged from the data. As I read through the data, I looked for themes and placed them into the tables accordingly. For example, when I was looking for themes respecting 'Indigenous knowledge,' I noticed participants were describing how Elders contribute to programming. Therefore, in my table under 'Indigenous knowledge,' I placed 'Elders,' and an example of how they contribute to practice: 'prayer before meals.' For the second stage of analysis, I looked for themes of resources and barriers, and descriptions of Indigenous quality care, across the five values: Indigenous knowledge, self determination, holistic view of child development, supporting family and community involvement, and Indigenous language. To highlight, as I read through participants' descriptions of practice, I noticed participants were frequently sharing how they work with families and community members to build and maintain trust. For example, participants invite parents to come for lunch and welcome them to bring their other children, or emphasize that their door is always open for family and community members to drop-in and visit. Therefore, in my second table, I placed that building and maintaining trust with family and community members is critical

to implementing the five values of Indigenous quality care. Finally, to ensure reliability and that my findings were consistent and accurate, I shared the interview data with my supervisor. I asked her to review participants' responses and code the data for themes she found emerging. At times there were disagreements of how to categorize or code participant descriptions of practice, particularly the second stage of analysis, which looked for themes across the five values. However, my academic supervisor provided critical coaching in the data analysis process, and reminded me to look at the data for themes emerging from the data itself, rather than my own understandings of Indigenous early childhood practice. It took me time to absorb this direction, and then we began to read the data in the same way and come to agreement on the study's findings.

Additionally, it is important to acknowledge that Smith (1999) refers to Indigenous people partaking in Indigenous community research as 'insiders.' An 'insider' to a research study is valuable to an Indigenous research methodology as they bring an Indigenous lens to the overall study. As an Indigenous person and 'insider' to this study, I was able to recognize humour and/or vernacular used by Indigenous participants to describe events, feelings, experiences and behaviours. These modes of speech and sharing information are relevant to data analysis as they may contain culturally embedded meanings. As such, I analyzed the ten participant responses through an Indigenous lens, and gave weight to this study's Indigenous research methodology.

3.6 Final comments on methodology

This chapter revealed that this master's study materialized from the 'Realizing Quality in Aboriginal Early Childhood Development' study; a study conducted in partnership between BCACCS and UBC. This chapter clarified my involvement in the study and how I came to the project as an opportunity to conduct my master's thesis research. I shared how my master's thesis research draws from the larger study sample, and that I conducted analysis of data from ten Aboriginal ancestry participants. I also revealed how this study employed an Indigenous research methodology from project development, recruitment, data collection, and analysis. To this end, I have demonstrated how this master's thesis research supports Indigenous community priorities for research

through its collaboration with BCACCS, validates Indigenous knowledge through the participation of Aboriginal personnel, and gives weight to Indigenous perspectives by viewing data through an Indigenous lens. The following chapter shares this study's findings on how Aboriginal early childhood practitioners in British Columbia implement the five proposed elements of Indigenous quality care explored in this study.

4 Findings

This study used a working definition of Indigenous quality care to examine how Indigenous values for early childhood education and care emerge in Aboriginal early childhood program practice across British Columbia. For this study, I interviewed ten Aboriginal early childhood practitioners to identify how each of the five elements that comprised the working definition of Indigenous quality care are realized in practice as well as the resource strengths and/or assets, and barriers and/or challenges that Aboriginal early childhood practitioners face implementing Indigenous values for early childhood education and care. This chapter reveals study findings within each of the five identified values, as well as themes emerging across all five values, to demonstrate how Indigenous quality care is realized in practice. In addition, this chapter will identify key practitioner resources and barriers that affect service delivery. To protect their anonymity, all participants have been identified numerically. As this chapter unfolds, it will become clear how participants in this study support and implement the five elements of Indigenous quality care explored in this study.

4.1 Findings within the five values of Indigenous quality care

4.1.1 Indigenous knowledge

The first element of quality care for Indigenous early childhood programs explored in this study was Indigenous knowledge. For this study, Indigenous knowledge was understood in practice as the inclusion of cultural and traditional teachings and traditional methods of transferring knowledge. For example, I explored to what extent do programs include traditional teachings from Elders, employ Indigenous personnel, and/or have opportunities to connect children to their identity through land-based pedagogy.

All ten participants indicated that they employ Aboriginal personnel in various capacities. For example, programs employ Aboriginal people as educators, early intervention consultants, bus drivers, family involvement workers, administrator/coordinators, and nutritionists. Elders are the most valuable to ground programs in Indigenous knowledge and are revered as carriers of traditional knowledge.

As such, programs provide both gifts and remunerate Elders to invite and thank them for participating. A few participants revealed that the presence of Elders supports positive behavioural development in children. As one participant highlighted, “Just learning from an Elder through language...[there’s] almost an expectation of cultural quietness. It’s a very quiet, calm, sort of feeling that is promoted in the child care centre - that people are doing things quietly” (#6). In this way, Elders’ presence in programs teaches cultural values of respect, patience, and discipline. As another participant described:

If we had a consistent Elder who was here every day, or an older person fluent in the language, or just that gentle spirit that comes with an Elder who could make that connection with the child. Because they’re so gentle, maybe they could pick up on something the teacher is overlooking. If we just had that gentle Elder who could say, ‘It looks like you’re really rambunctious. Let’s look at this plant over here. Do you think that plant liked it when you pulled it out of the ground?’ Just thinking back to my grandmother (#5).

Elders’ presence in programs is much deeper than curriculum and instruction. Elders are respected in programs for their gifts that enable them to engage with children and interpret children’s learning needs in ways that trained early childhood educators may miss. Further, the inclusion of Elders ensures that Western educational conventions (e.g., institutional settings, classroom transitions, and/or assessment requirements) do not negate children’s access to Indigenous knowledge through traditional learning means.

Although language was a specific element of quality care explored in this study, nine of ten participants spoke to language as essential to Indigenous knowledge in their programs. The only participant who did not include language as a core component of curriculum worked in a drop in centre. As this centre was located in an urban setting and in between two distinct language and culture communities, they struggled as to which language to teach. Instead of directly instructing language, the participant played CD’s in both languages so children and families could nonetheless hear language in the centre. This example highlights the fact that even when barriers exist to include language at the desired level, language remains central to Indigenous knowledge in programs. The remaining participants shared how language is both directly taught and integrated throughout curriculum. For example, one program administrator began a unit on bears by

teaching children the Gixtsan word for ‘bear.’ Using additional words in the language “without losing the kids” (9), the educator talked about how Gixtsan people use bear meat and hides; the class goes down to the river to study the fish bears eat before hibernating for winter; and children explore bears through art. In this case, Gixtsan was both the language of the territory and the heritage language of the majority of the children. As this example and other participant narratives reveal, language in Aboriginal early childhood programs connects children to the traditions of their culture and/or the territory on which they reside.

All participants described the cultural activities they include in their curriculum as indicative of Indigenous knowledge in programming. To highlight, culturally based curriculum included: drumming, song, art, dance, regalia-making, traditional food preparation, field trips (e.g., to harvest fruit, or visit ceremonial sites), community feasts, and following a seasonally based calendar. Most participants revealed that including culture in curriculum provided opportunities to engage families and community members in the program. One program invites a parent who is a pow-wow dancer to come in regularly and teach dancing. Another program invites different community members each week to teach bannock-making, wool weaving, beading, and run their “Tracks” program, which is a program where the guest speaker uses diagrams of animal tracks to teach children about the traditional animals of the territory. In this study, culturally based curriculum is considered central to the inclusion of Indigenous knowledge in programs, and community and family members are key resources from which programs draw to include Indigenous knowledge.

Elders, language, and traditional teachings in curriculum are the most prominent ways Indigenous knowledge emerges in participants’ programs. However, the same three components are the most critical resource needs to include Indigenous knowledge in programs. All participants sought curriculum materials and qualified Aboriginal personnel to develop and/or teach them. Even participants from well-resourced programs (notably Aboriginal Head Start) emphasized their need for curriculum resources to support the variety of cultures represented in their classrooms. A few participants reported they purchase curriculum materials from catalogues but found these supplies problematic because they were expensive, made of plastic, (rather than materials from the

natural environment) and did not accurately represent Indigenous people and culture. As one participant revealed,

We need books with more real pictures than cartoony pictures. A lot of those pictures in magazines you can order Aboriginal materials [from], some don't even look Aboriginal. If we want to promote being proud to be Aboriginal and you're showing a picture of something that doesn't look Aboriginal, it's like, uh-ok? (#15).

This example highlights the challenges Aboriginal practitioners face to obtain relevant curriculum resources. It also reinforces the perspective that it is Aboriginal people – Elders, community guest speakers, and language and culture teachers, who contribute Indigenous knowledge to programs in meaningful ways.

4.1.2 Self determination

This study explored self-determination in Aboriginal early childhood programs, with the view that quality Indigenous early childhood programs support Aboriginal community governance over programming. This study drew from the literature that acknowledged the role and relevance of formal advisory committees for Indigenous self-governance over early childhood development (Assembly of First Nations, 1989), as well as considered what additional resources, methods, and/or factors contribute to or impede Indigenous authority over early childhood program development and delivery.

Participant narratives reveal that formal input and direction into programs exists in program models with mandated advisory committees (e.g., Aboriginal Head Start) and programs located on-reserve with access to community administration bodies (e.g., band council⁶ or education authority). Participants representing Aboriginal Head Start revealed they take advantage of Parent Elder Advisory Committee (PEAC) meetings to go over curriculum plans with families and invite their ideas for programming. Four participants working in programs located on-reserve reported they receive support from their community educational department. One participant reported their community has a sub-committee on early childhood development, which emphasizes and supports the

⁶ First Nations people in Canada belong to Indian 'bands' located in their traditional territories, which are governed by the local Chief and Council. These governing bodies are known as 'band councils.'

importance of the early years for teaching culture and language to Indigenous children. These existing community governance bodies are advantageous as they are made of Aboriginal community members and ensure program direction comes from the community it serves.

Advisory committees and community authority bodies (i.e., band councils) represent one way to ensure community governance over early childhood development. However, participants indicated that building relationships and trust with families is a more prominent and effective means to obtain community input and direction into program development, as well as to identify specific service delivery needs. Participants emphasized how they build relationships with families first, and later move to identify and discuss their service delivery needs, suggesting that formal advisory committees are not the only effective method to achieve Indigenous self-determination over early childhood.

Participants said that relationship building is critical to Indigenous governance over programs because it addresses first and foremost, family and community mistrust of and disillusion with institutional programs. Understanding and breaking down parental and family reluctance to be involved in early childhood programs is the first step to encourage families and community members to make informed decisions about their children's program-based early childhood experiences. The following participant narrative highlights why building trust is the first step necessary to obtain family and community members input into service delivery:

There's always a fear that anybody involved with the Ministry, or community health nurse, or family involvement worker, whatever label you want to give it, that they are going to see or say something that will put them [the family] in jeopardy of having the child apprehended. That goes along with keeping parents informed of who's coming into the classroom and why...Initially they're apprehensive but after you build that connection with families, it's fine (#7).

Participants described maintaining an 'open door' as the most effective way to build trust with family and community members, encourage participation, and eventually move to identify and respond to their specific service delivery needs. The open door approach respects the extensive family structures within Aboriginal communities: practitioners

welcome known family and community members into the care setting to drop-in and observe the program without limiting participation to scheduled visits or parents of registered children in the program. After Aboriginal practitioners establish trusting relationships with families, they may begin to discuss individual children, family and/or the community's service delivery needs. The following participant narrative highlights how relationship building facilitates Aboriginal self-determination over programs:

I encourage the families to drop in. They'll drop in, we'll have coffee for them. The kids get excited when their grannies show up or whatever... We've got some who come in with a younger child [not registered in program] and we encourage them to play with their older sibling. It gives us a good chance to discuss with the parents what they'd like to see here. And, the older ones are so good with the little ones (#9).

Building trust with families to obtain community input over programming was of such critical importance to one participant, she elected not to obtain provincial program licensure as it would restrict attendance to those people who had registered seats only. The participant encourages drop-in attendance and then takes the opportunity to share parenting and breastfeeding resources with new parents. As she described,

A couple afternoons a week I get a lot of teenage parents here with their babies, just coming in and hanging out. For young parents, they get up at whatever time and just come down. Rather than being rigid with them, it's working. I think if we'd been [licensed] we wouldn't have anybody showing up (#3).

As both quotations highlight, to effectively support community and ensure Aboriginal authority over programs, Aboriginal early childhood practitioners focus first on building relationships with families and second on identifying and delivering program needs.

A barrier to Aboriginal authority over program delivery identified by three participants was the Ministry of Children and Family Development (MCFD) provincial licensing standards. One participant revealed that licensing standards prevents their program from serving some traditional foods because foods preserved traditionally do not undergo the health inspections or receive the same health certification as food purchased from a grocery store does. This particular challenge with licensing restricts children's access to cultural teachings in the program. Another barrier is the restrictions for program

licensing. As the above participant indicated (#3), she deliberately chose not to obtain program licensure to permit drop-in participation. One participant (#1) stated that as an Aboriginal Head Start coordinator, she is supposed to obtain program licensure; however, her community needs for service delivery conflict with the staff: child ratios and age separation requirements for licensure. As such, contrary to Aboriginal Head Start requirements, she chose not to obtain a license to operate. The following excerpt highlights the participant's struggle between licensing regulations and the needs of her community:

With licensing you're allowed more funding through Head Start, but you have to deal with separating children out. With a licensed facility in BC, you have up to two years old in one area, and three to five in another area, and after school age children in another area, and we can't let them out in the playground at the same time. Nobody down in my centre wants that at all. Some of these parents and grandparents that have spent their time in residential school – they don't like the idea of not having their kids play together. All the siblings and babies are together. They're [the licensing branch] reason to separate children is the big ones will hurt the little ones...I haven't had anybody get hurt in three years. There's no kids tromping on babies at my centre...I'd like to be licensed to get more funding and have more things, but rules won't work (#1).

This participant reported that as an on-reserve program, she receives financial support from the band to offset program costs not received through Aboriginal Head Start. As her narrative reveals, and as two additional participants indicated, provincial licensing standards pose challenges to deliver early childhood programs and services in ways that support the Indigenous community's values. Although only three participants spoke to their concerns related to provincial licensing standards, the issue is important to raise as it affects how a program reflects the community's values. Also, as shared in the above example, choosing community values over provincial licensing came at the expense of additional federal funding for program delivery. Challenges with British Columbia early childhood program licensing regulations was not a prominent theme in this study; however, the three participants who spoke to barriers related to licensing shared a firm position against Western assumptions and regulations for practice that competed with their community's needs.

In summary, participant responses regarding self-determination in Aboriginal early childhood revealed that written mandates, policies, and administrative bodies are available to guide and govern service delivery; however, ongoing dialogue with families and community to build relationships is a more effective way to obtain family and community input into programming and for Aboriginal early childhood programs to respond to the values and service delivery needs of the local community.

4.1.3 Holistic view of child development

This study explored how Aboriginal practitioners support a holistic view of child development with the understanding that quality Indigenous early childhood programs support the spiritual component of development along with the child's cognitive, emotional, social, and physical development. Recognizing that all components of child development are interrelated, this study examined the ways Aboriginal programs foster the spiritual dimension of development. As this section reveals, Aboriginal early childhood programs support the spiritual development of children by encouraging participation in community-based ceremonial events and including ceremony in classroom teachings, both of which have a spiritual dimension that contributes to children's overall development.

Most participants described ceremonial events occurring outside of the program as spaces where children and staff access spiritual and cultural teachings. For example, children and staff participate in potlatches, winter feasts, pow-wows, Hobiyyee (Nisga'a New Year), and community grief and healing ceremonies. While this study was under way, three participant interviews were rescheduled because programs closed to participate in community ceremony. Another participant, as coordinator of an urban centre, gives her staff leave time to participate in ceremony, recognizing that urban Aboriginal people may have to travel to their home territories to access cultural teachings. For her, staff healing is essential to bring renewal and spiritual grounding into the centre, which in turn, supports the spiritual development of the children.

The most identified ways ceremony is evident in programs is through daily prayer in the morning and before meals; weekly, monthly, and special event smudging with Elders; and daily drumming and song in an Aboriginal language. As one Aboriginal Head

Start coordinator describes, smudge ceremony is used to connect children to their Elders and cultural teachings: “We smudge with Elders and during that time we talk about respect and what that means for the ceremony. The different plants that are involved, and the ceremonial drum” (#5).

Discussions with participants revealed that spiritual development is a contentious issue for program practice because of the diversity of cultural beliefs among families. Some families align spiritual practice with religion, which participants fear will resurge feelings of residential school trauma or assimilation into religious and/or spiritual practices not congruent with their own cultural beliefs. For two participants in this study, this site of tension became an opportunity because it facilitated relationship building between educators and families. To highlight, one participant found that discussing cultural belief systems with foster parents contributed to foster parents’ knowledge of the child’s cultural values, and how to support the child outside of the early childhood classroom. Another participant shared how she reveals her own cultural teachings in order to create an opportunity to discuss the cultural beliefs of the families she supports. As she described:

A teaching I can share, and I share with parents, is that I’ve been taught when you go outside after dusk you are meant to have your child covered. If you have a carrier you are meant to have a blanket to cover them because the children can see the people who are gone. The moms I know, I’ll ask them ‘do you have any teachings around that?’ (#9).

Critical to this passage is the way the participant prefaced the discussion with, ‘a teaching I can share...’ With this introduction, the participant established respect for the sacredness of cultural teachings. By revealing she has permission to share and discuss the teaching, she demonstrates her knowledge and respect for Indigenous protocol. This decision and dialogue sends a message to the parent that she will show the same level of respect for the family’s cultural teachings. Her subtle, but important introduction, gives weight to Indigenous processes of relationship building. In this example, building a relationship was an important method to break down potential parental apprehensions or tensions regarding discussions of spirituality. In this way, similar to the section on self-determination, the participant established a relationship with the family first, and

proceeded to find ways to support the child's spiritual development through the relationship.

In this study, it was evident that a holistic view of child development does not necessarily require the deliberate inclusion of spiritual ceremony in curriculum. Rather, Aboriginal early childhood programs foster holistic child development by supporting children, families, and staff to participate in community based, contextually relevant ceremony outside of the program walls.

4.1.4 Family and community involvement

The fourth element of quality care from an Indigenous perspective explored in this study was family and community involvement. This study was informed by literature that acknowledged Indigenous children are part of large extended family and community systems; therefore Indigenous approaches to involvement must consider the roles of aunties, grandparents, and community members in programs (Fleer, 2004; Greenwood & Shawana, 1999). In this section, I report findings regarding whom from the family and community participates in programs, what participation looks like or entails, what strategies programs use to engage families and community, and what barriers seem to prevent participation.

Participants reported that moms are most likely to participate in programs; however, grannies, uncles, fathers, aunties, Elders and community members participate when available. Family and community involvement is most recognizable as people participating as guest speakers or guest instructors. For example, Elders come in to teach children how to prepare fish “from cleaning them right through to drying” (#8) and community members come in and “do traditional hides” (#8). As described earlier in this chapter, community members play a vital role to the inclusion of traditional knowledge in programs. In addition, participants said that they engage other community service delivery agents to support their programs. For example, they invite dental hygienists and prenatal nutritionists to conduct routine health checks, and developmental therapists (e.g. occupational and speech-language) to conduct screening and/or assessments on-site because families feel safe with the support of trusted Aboriginal early childhood practitioners. Some practitioners in urban settings direct families to community

Friendship Centres (a multi-service delivery organization for Aboriginal people living in urban communities) to receive additional resources and/or supports not available through the early childhood program. As such, networking and resource sharing with community agencies is a critical strategy for Aboriginal early childhood programs to provide more expansive services to families.

All participants in this study shared strategies they use to encourage family involvement in programs. They provide space for parent networking, hold breast-feeding and nutrition workshops for new mothers, provide hot lunches to extended family members and siblings not registered in the program, and offer rewards and incentives (e.g., food vouchers and gift certificates) for participation. Food is a culturally valued way of bringing people together; therefore, programs serve food and beverages at any event that invites participation. Participants indicated that the most effective strategy to encourage participation in programs is the ‘open door’ approach described earlier in this chapter under the self-determination section. Participants in this study invite families to drop-in at their convenience and welcome their participation to the extent they feel comfortable. As an early intervention worker emphasized, “It is important to meet families where they’re at and let them know we value what they have to contribute” (#15). Children and families are not penalized for absences or late arrivals, and Aboriginal practitioners do not shame or ask questions when families choose not to participate. By maintaining an open door, participants in this study respected the time it takes to build trust with families, and create non-threatening environments to encourage their involvement.

Misunderstanding of program advisory committee purpose and roles, lack of transportation, and responsibility for additional children at home (i.e., those not registered in the program) are factors identified as contributing to low family involvement in programs. However, Aboriginal people’s history of betrayal and assimilation in educational institutions was identified most prominently as the barrier to engaging Aboriginal families in programs. The following two participant responses are examples of families’ disillusionment with educational institutions and their resistance to participate in programs. As one participant shares:

Even young parents haven't had positive experiences with education. There's always a feeling that the school is a threat to the family. A judgmental thing. You're not being a good parent. That's been so much, where their only contact in school was when their kid is in trouble or when they were in trouble (#5).

And another participant revealed:

Families don't want to share a whole lot of themselves and are living on the edge of poverty. That educational knowledge, their levels, they're afraid and not always ready to take that next step to be involved (#15).

Both of these excerpts highlight the fact that inter-generational effects of residential school, such as poverty and the regard of educational institutions as unsafe spaces for Aboriginal people, continue to affect family and community members levels of involvement in programs.

When describing family and community involvement, over half of the participants referred to the involvement of mothers and grannies, implying that programs struggle to reach out to men. However, two participants openly discussed their struggle to include men in their programs. One participant suggested that acquiring male staff would potentially increase male involvement in the program by making men more visible in the early childhood sector. However, another participant believed programs themselves are not welcoming for men: "We have so many women who attend our groups that some of the men in our community feel intimidated. They identify our groups as being for moms" (#15).

To reiterate, participants revealed that family and community members contribute to program service delivery, primarily with the inclusion of Indigenous knowledge in programs. Although some participants struggle to engage families - particularly men in programs, it is through open communication and an open-door that Aboriginal early childhood programs encourage and gain family and community involvement in programming.

4.1.5 Indigenous language

This study explored Indigenous language as the fifth element of quality in Indigenous early childhood education and care, with the view that language is central to

connect children to culture and to develop their cultural identity. Although the research partners recognized language is interconnected with Indigenous knowledge (another value explored in this study), this study isolated language to glean specific information about program implementation of Indigenous language. For example, this study explored how many programs include Indigenous language, what methods of instruction programs employ, as well as how programs respond to language diversity in British Columbia.

All ten participants in this study reported that they include Indigenous language learning and teaching to some extent in their program, and recognize language is critical to Indigenous early childhood programs. Language is included in a variety of early childhood contexts, and is not limited to early childhood program models with a written mandate and/or financial support to include language (e.g., Aboriginal Head Start). All participants include the language of the traditional territory or the language of closest proximity to the program setting. Three participants employed in off-reserve settings shared that programs in their community offer both the language of the territory and one additional language based on the language knowledge of program personnel. For example, in Carrier territory, early childhood services are offered in both Carrier and Cree language, which reflects both the traditional language of the territory and the large Cree population in the community. Teaching the language of the territory reveals that early childhood programs in this study prioritize local culture and language maintenance or revitalization. In addition, programs in urban settings seek to provide additional languages where possible to respond to the growing diversity of Indigenous languages and cultures represented in urban settings.

One participant located on-reserve noted that her program does not include the traditional language of the territory as there are no remaining speakers of the language. The community bridges two communities within the same language family; however, it is a distinct Nation with its own dialect. Unfortunately, as the participant said, “it’s a lost language” (#1). Despite the significant loss, the program coordinator deeply values language revival in the community and includes one of the neighboring dialects in the program. The following excerpt describes how the Indigenous language component of her early childhood program is affecting language learning in her family:

My granddaughter says to her mom, ‘There’s an [Indigenous language word] which is an owl in our language. So my daughter asked me, ‘What’s a [Indigenous language word]?’ and I said, ‘Maybe you should come to class!’ My kids don’t have that culture as much as my grandkids do because my grandkids are attending the program (#1).

In this example, language acquisition in the early childhood program extends beyond the classroom setting into community settings, and fosters traditional inter-generational language learning. Further, this example highlights how the child is blending both English and her heritage language, indicating she is developing both languages simultaneously. Efforts to resolve language loss in this participant’s community by teaching neighboring dialects in the program and encouraging home use of language reveals that Indigenous early childhood programs can positively impact community language learning and revitalization efforts.

Discussions with participants revealed that seven programs teach language through direct instruction, two programs use an integrated model, and one participant was not sure. For the seven programs adopting a direct-instruction approach, participants reported it was not the most desirable method; however, it reflected staff language knowledge and/or program access to speakers and program capacity to appropriately remunerate language instructors and/or Elders. Some of the ways participants described direct instruction in their programs included using commands and short phrases for classroom transitions (e.g., ‘let’s eat’ or ‘sit down’), labeling items such as colours and foods, and counting numbers. The two programs that provided an integrated model to teach language both operated on-reserve, and had access to additional support from their respective language authority and educational administration bodies. Both participants felt that community investment into language revitalization enhanced language instruction in the program as they had access to curriculum resources, reference tools (e.g., CDs with pronunciation, dictionaries), adult language learning classes and language and culture teachers. This corroborates findings discussed earlier in this chapter whereby educational administrative bodies can play a key support role in program delivery.

Both direct instruction and integrated models increase children’s access to the language; however, three participants postulated how programs employ direct instruction to explicitly connect children to the teachings of the territory and their ancestral identity.

For example, one participant uses language to teach children the potlatch and clan systems of their territory, and specifically, the clan each child belongs to. Another participant felt that teaching the language in early childhood connects children to their friends and relations so that “the kids know from nursery school what they have in common” (#9). This participant believed that the language and cultural teachings learned in preschool give children a strong knowledge base of who they are, and in turn, they develop resiliency for when they attend public school and/or non-Indigenous learning settings. Although direct instruction was not the most desirable method to teach language, by using it to relate children to their territory and culture, language is seen as a critical strategy for practitioners to imbue cultural knowledge in programs.

When discussing language in programs, participants spoke more to their resource and support needs than their current capacity. The most commonly identified resource need was qualified early childhood educators with language proficiency. Most participants expressed the need for more early childhood educators with strong language knowledge; however, one language and culture teacher expressed the need for early childhood development training. As she said,

Before I came here I was teaching language to youth and adults. I’ve been observing and watching how the early childhood educators talk to the children, so I taught myself how to speak to the children properly. Being trained in that area [early childhood] would be great (#13).

The participant felt that a critical limitation to language in programming is the language proficiency of themselves as educators, and their community members. One participant shared her struggle with language development and acquisition in her community:

If you don’t have anybody to speak your language with, you can’t refine your language skills. That’s why I’m stuck here. I know how to say ‘coat’ and ‘door,’ but I don’t know how to say ‘go and get your coat’ (#1).

With limited access to language speakers, early childhood educators with language ability are the most critical resource assets for Indigenous early childhood programs. At the same time, they are the greatest resource need.

Participants also described need for curriculum resources. They seek translated songs, rhymes, books, games, and multi-media resources that would support language instruction. Some participants believed that although electronic resources do not reflect traditional language learning contexts, computers and Internet are integral to children's lives in the twenty-first century; therefore they wish to respond to children's lived realities. Further, participants representing programs in urban settings seek curriculum resources reflecting multiple Aboriginal languages to support the diverse cultures of their children. As one participant described:

I'd love to have pictures in the classroom with writing on the back, or flash cards with writing on the bottom in various ways, that whatever the picture is, you see it in the languages. So if you had a picture of a frog, you would have in Tsimshian we say 'this' and in Haida we say 'this.' So if the word is on the front and the phonetics are on the back, you can hold the picture and read it phonetically (#5).

With limited access to Elders and language and culture teachers, as well as limited language knowledge themselves, participants in this study indicated that they seek innovative ways to include language in programs. Early childhood practitioners are willing to add to traditional language learning with new methods and technology to ensure children have opportunities to hear and see their languages as much as possible.

4.2 Findings across the five values of Indigenous quality care

The methodology chapter of this study revealed that data were analyzed in two stages: first to identify how Aboriginal early childhood practitioners implement each of the five values of Indigenous quality care, and second, to identify what common practices, resources, and barriers emerge across all the five elements of Indigenous quality care. In addition, the second stage of review and analysis served to address the final question of the interview where participants were invited to share additional thoughts on quality care in Indigenous early childhood programs. Responses from the final open-ended question were reviewed in the second stage of analysis, with the view they may contribute to existing themes identified from each element of Indigenous quality care, or reveal new additional themes not previously identified. This section details two of the additional findings that emerged from the open-ended question on

quality care. Specifically, training requirements to become fully licensed early childhood educators create barriers to build program and practitioner capacity, and early intervention specialists are concerned about the access to and availability of supports for children with extra support needs. Finally, this section reveals the common thread that wove throughout and across all five values for Indigenous early childhood explored in this study: to realize quality, Aboriginal early childhood practitioners exercise flexibility in their service delivery to build and maintain relationships with family and community members.

The final open-ended question revealed that life commitments create barriers for practitioners to become fully licensed early childhood educators. The provincial Ministry of Children and Family Development (MCFD) requires practitioners to complete both post-secondary academic training and 500 hours of work experience in a licensed facility under the direction of a licensed early childhood educator to become licensed and autonomous early childhood educators. Some identified challenges that affect practitioner professional development include working full time, caring for children at home, single-parenting, and financial resources. The following narrative highlights a participant's concern regarding the opportunity for Aboriginal early childhood practitioners to obtain their license to practice:

I don't know how I'd do it if I didn't have the support of my band to pay my living allowance. I could've been able to get the education part but I wouldn't be able to do my practicum. They [MCFD licensing branch] say, 'Go out and get a paid job that counts too.' But they [licensed early childhood facilities] don't pay you because they know you have to do it, right. 'You need 500 hours? I'll let you work here for free.' 'Well, will you pay me?' 'No, you need your 500 hours' (#1).

This participant demonstrated the importance of financial support (in this case, from her band administration) to ensure she completed the required practicum component of her training. Interestingly, this participant also touched on the fact that early childhood programs may take advantage of pre-service early childhood educators, by under-employing them until they obtain their license to practice. By employing new educators at lower compensation rates, the early childhood program can address its own need for Aboriginal early childhood educators. The specific issue of supporting practitioners to

become fully licensed educators was not raised frequently throughout participant interviews; however, it sheds light on possible issues relating to early childhood educator capacity building in Indigenous programs.

Three participants in this study worked from outreach-based early intervention program models that support children who have either been identified as developmentally delayed, or are believed to have the potential for developmental delays. These participants expressed an urgent need for resources and supports – particularly for parents, to support children with special and/or extra support needs. The following challenges to support children with special needs (either undiagnosed or currently diagnosed and under-supported) were identified: parental fear of assessment by professionals and/or labels associated with special needs, lack of transportation, and lack of available early intervention program spaces. Participants shared that parents fear labeling their child as ‘special needs’ because they may be labeled as ‘poor parents.’ This fear of being labeled prevents parents from accessing necessary developmental screenings, which would secure the child’s eligibility for extra supports and/or access to early intervention programs. As one participant stated,

I have a number of children here I would like to have seen by a speech pathologist. I haven’t received input from parents in terms of getting things [screening approval documentation] back to us. They [parents] don’t know if they should be defensive or anything (#9).

Further, participants reported that transportation is a barrier for families to access developmental screenings or programs, particularly for geographically remote communities where professional services may not be regularly available. Participants also expressed their frustration with the number of children they see in their communities who would benefit from early intervention programs or developmental screenings, but their community and/or program does not have space available or regular access to screening professionals. One participant, who did not represent an early intervention program model, noted how developmental delays without appropriate supports affect the child’s ability to access cultural teachings: “The effect of drugs and alcohol on children is really prevalent. Reaching spirituality and spiritual development is a challenge for them to grasp... Children are going undiagnosed, or it is a long process” (#5). This raises concern

regarding the critical importance of resources and supports for children with special needs. Although issues related to children requiring extra supports was not prevalent among most participants in this study, those who spoke to it were deeply concerned by the barriers and challenges.

Throughout this study, participants continually described their practice as ‘It’s just being flexible.’ When discussing the implementation of any or all of the five values of Indigenous early childhood education, participants emphasized flexibility in service delivery and programming in order to respect the needs of each child, family and community member. Aboriginal early childhood programs open their program doors to all community members rather than just family members of registered children, demonstrating flexibility in who is welcome into the centre and at what times. As one participant stated, “We keep it [the classroom] as open as we can. Parents are always welcome to come in, they don’t have to phone or schedule a day to come in. They come in when they want to” (#5). Aboriginal early childhood programs rely on Elders and community members to share traditional teachings, language, and to conduct ceremony; therefore programs must be flexible in scheduling and programming to accommodate important guests. Flexibility in scheduling to accommodate traditional knowledge keepers demonstrates respect for the value of teachers other than ‘teachers’ (i.e. qualified early childhood personnel). One participant said their program welcomed two non-Indigenous students into the program; however, as the participant indicated, “their parents are fully aware of our situation and what we feel is important” (#9). The participant ensured that flexibility in registration did not threaten the Indigenous ways and values that construct the program.

At the core of practitioner and program flexibility is the value of relationship building. Quality care in Indigenous early childhood programs is realized through building relationships with family and community members. To access Elders and community members with traditional knowledge to share their teachings, programs must be flexible to accommodate knowledge keepers’ schedules. To engage community members in program governance, or to provide opportunities for staff and children to participate in ceremony, programs must work around the community’s schedule of events, and/or the availability of the community members involved in programming.

Finally, flexibility in programming facilitates relationship building, which is critical to gain the trust of community members, and to implement any or all of the five values of quality care from an Indigenous perspective.

4.3 Final comments on findings

In this chapter, I revealed how participants in this study implement the five Indigenous values for early childhood education and care, which comprised the working definition of quality care from an Indigenous perspective. This chapter shared examples of practice, as well as the resources and barriers that affect program capacity to implement Indigenous quality care. With an understanding of how the values of Indigenous early childhood education and care emerge in practice, we may begin to discuss the contribution this study makes to discourses on Indigenous early childhood education and the reconceptualist movement. In the following chapter I will discuss how findings from this study support that the five values explored in this study represent Indigenous notions of quality care, as well as how findings demonstrate ‘meaning-making’ in Indigenous early childhood education and care practice.

5 Discussion

The purpose of this study was to identify and describe Indigenous values for early childhood education and to bring an Indigenous lens to discourses on quality care. This study built from the reconceptualist literature that argues quality care is a more appropriately discussed within a ‘meaning making’ framework, in which quality care is understood as an exploration of values for early childhood care and education (Dahlberg et. al, 1999). Using the BCACCS’ (2005) quality statement as a starting point, the research partnership group (comprised of BCACCS, my academic supervisor and I) identified five values of Indigenous early childhood programs that comprised a working definition of quality care from an Indigenous perspective. For this study, I interviewed ten Aboriginal practitioners working in Aboriginal early childhood programs in British Columbia to identify and describe how the five values emerge in practice.

This chapter will discuss findings within each of the five values of Indigenous quality care explored in this study, and consider them with respect to the literature on both Indigenous early childhood education and the reconceptualist movement for quality care. As a preface to this discussion, I will report limitations to this study that must be considered in light of findings and final conclusions. To this end, I will share how the five values explored in this study represent a suitable interpretation of ‘meaning-making’ in Indigenous early childhood education and care. Discussion of some of the challenges and barriers to implement the five values will reveal where mainstream notions of quality care continue to pervade the field and were limiting for the Indigenous early childhood practitioners of this study. Additionally, I will discuss how attending to community-level service delivery needs, through resistance of non-Indigenous and/or non-relevant guidelines for practice, was a critical way in which participants of this study ‘make meaning’ in early childhood practice. Finally, this discussion will consider where Indigenous and traditional (i.e. mainstream) notions of quality care overlap, and where they remain unique and discrete, demonstrating that although ‘making meaning’ in Indigenous communities is distinctive, there is space where both Indigenous and mainstream notions of quality care may intersect. As this discussion closes, and I reveal study conclusions and recommendations, I will contend that the reconceptualist literature

for quality care created valuable space for discussion of Indigenous values for early childhood education in international, multi-cultural and multi-lingual discourses of early childhood, and that this study contributes important insight into these conversations.

5.1 Limitations

This study has limitations to be considered in light of the following discussion of study findings, conclusions, and recommendations. This study was conducted in partnership with BCACCS and used its (2005) quality statement as a starting point to explore Indigenous values for early childhood education. Although the research partnership group collapsed the quality statement into five broad themes that were supported by the Indigenous early childhood literature, the original quality statement comprised sixteen elements of quality care in Aboriginal early childhood settings. It was not manageable to explore all sixteen elements of the draft statement; therefore, collapsing the quality statement into themes was a pragmatic decision to facilitate the research study. This placed limitations on the community partnership, as it did not deeply explore the organization's quality statement. This study was also conducted as a telephone interview with practitioners; therefore, there were no observations of programs to add depth or supplement the participants' descriptions of practice. As such, this study's findings are limited to the perceptions of the practitioners, and does not have the depth and breadth needed to make generalizable claims about Indigenous early childhood practice, or the five values explored herein. Finally, this study is limited to ten Aboriginal practitioners. The perspectives of ten practitioners are not representative of the Aboriginal early childhood community in British Columbia. Furthermore, five participants were program administrators, as opposed to 'front line' educators, which may bring a particular leadership focus to discussion of the five values. Finally, this study did not include Elders, who bring a critical cultural perspective of values for Indigenous communities. As such, the values explored and practices described in this study cannot claim to represent 'meaning-making' across all Indigenous early childhood contexts. To this end, this study is only an introductory exploration of Indigenous values for early childhood education and care and the implications a meaning-making lens has for Indigenous early childhood programs.

5.2 Making-meaning: The five values of Indigenous early childhood education and care

This section will discuss findings regarding each of the five values of Indigenous early childhood education and care explored in this study in relation to Indigenous early childhood literature to demonstrate how they represent ‘meaning-making’ through an Indigenous lens. Where relevant, this section will discuss how Aboriginal practitioners challenge pervading mainstream notions of quality care to ensure that Indigenous values for early childhood education remain integral to program practice.

5.2.1 Indigenous knowledge

Theorists and educators argue that Indigenous knowledge is the impetus for culturally-rich, and relevant programming and pedagogy (Ball & Simpkins, 2004; Greenwood, 2006; Public Health Agency of Canada, 2009). Cultural knowledge, Indigenous language, and Elders have been identified as critical components to Indigenous early childhood programs (Greenwood, 2006; Greenwood & Shawana, 1999). This study’s findings were consistent with this perspective as cultural activities and language were identified as core components of curriculum; Elders were found to ground the program in cultural knowledge and brought a special lens to early childhood pedagogy; and programs employed Indigenous personnel in a variety of positions. Both the hiring of Indigenous personnel and inclusion of culture and language are in accord with the argument in literature that Indigenous knowledge in early childhood programs is much deeper than including drumming and traditional foods (Ball & Simpkins, 2004). In this study, Indigenous people were the crux of Indigenous knowledge in programming. Even when participants reported limited access to qualified Indigenous personnel (i.e., knowledgeable in both culture and language, and trained in early childhood education), participants recognized the critical role of Indigenous role models in Aboriginal early childhood education and care, and were willing to forgo the hiring of formally trained educators in favour of having uncertified educators of Indigenous ancestry. Also significant to this study’s findings is that the inclusion of culture, language, and Elders in programs is not isolated to program models with federal funding and a mandate to include Indigenous knowledge: all programs are committed to include Indigenous

knowledge. This demonstrates that among the participants in this study, the vision of Indigenous leadership over two decades ago, whereby Indigenous children learn their own language and culture from Indigenous role models (Native Council of Canada, 1990; Native Women's Association of Canada 1986), is beginning to take form. The commitment of participants in this study to build Indigenous human resource capacity, and to ensure the next generation of little ones learn from their own people, speaks to the ways they have been listening to Indigenous leadership organization's calls for Indigenous people to educate and care for their own children (Assembly of First Nations, 1989; Native Council of Canada, 1990). Again most importantly, findings from this study echo claims of researchers and educators in Indigenous early childhood education and care that the importance of Indigenous knowledge in programming cannot be understated.

5.2.2 Self determination

Indigenous early childhood education literature has long asserted that Indigenous people must have governing authority over programs (Agbo, 2002; National Indian Brotherhood, 1972). Some researchers and educators recommend that to facilitate Indigenous governance, Indigenous education programs develop advisory committees comprised of parent and community members (Agbo, 2005; Kavanagh, 1999), and establish program policies that include provisions for local delivery of language and culture (Barnhardt & Kawagley, 2005). This study revealed that while administrative bodies such as parent-Elder advisory committees play a role in Indigenous governance over programming, over half of the participants revealed Indigenous self-determination materializes at the program level by maintaining an open door philosophy of working with families and community. This flexible approach to programming, which welcomes family and community members into the programs without concern as to whether children are registered or if they exceed provincial licensing standards for permissible child to adult ratios, is a demonstration of support for Indigenous values of extended family, and a response to Aboriginal mistrust of educational institutions. Provincial policies and programming guidelines that restrained participants from delivering service in a way that appropriately responds to their (respective) community's needs were resisted. This means that it is more important for participants in this study to keep their

programs visible and open to the community than to conform to non-Indigenous ways of operating programs. Rather than restricting participation or turning away unregistered children and/or their parents, participants exercised self-determination at a programmatic level. Furthermore, this program-level demonstration of self-determination challenges the view that Indigenous governance of programs emerges solely through formal administrative bodies and/or advisory committees. This study's findings support the belief that self-determination is a critical component to meaningful Indigenous early childhood programs (RCAP, 1996) because exercising self-determination contributed to the level of which participants could meet the needs of Indigenous families from a place of cultural authority.

5.2.3 Holistic view of child development

Indigenous approaches to early childhood development are unique in that they are holistic; that is, they acknowledge that the spiritual development of children is integral to and inter-connected with the cognitive, emotional and physical development of children (Ball & Pence, 2006; RCAP, 1996). All study participants described how their programs support holistic approaches to education and foster the spiritual component of development in children. However, of significance is that this study raised questions about whether the early childhood program is an appropriate space to integrate spiritual teachings. When describing how to support children's spiritual growth, most participants discussed children's participation in ceremony in contexts outside of the early childhood program or centre. To highlight, one program administrator offered flexible working arrangements to permit staff participation in ceremony, and three programs closed their program doors so that staff and children could participate in community-wide grieving ceremony. In this way, the participants supported the development of Indigenous spirituality by creating space in their program for children, families, and staff to participate in ceremony in relevant contexts outside the early childhood classroom. In this study, the child care setting was not always considered the best space to deliver sacred teachings of Indigenous spirituality. Ceremony is critical to connect Indigenous people to the teachings of the land, and the ancestors and protectors of their territories; however, the early childhood program is not space from which ceremony derives. Findings from

this study support Hermes (2005), who contends that accessing culture in relevant contexts resists ‘institutionalizing culture,’ where culture is viewed as an add-on and appreciated, rather than lived. By creating space for staff and child participation in ceremony outside of program walls but in relevant contexts, Aboriginal participants in this study affirm the critical importance of fostering the spiritual domain of child development as part of holistic educational practices. Additionally, by closing the program to support children’s participation in community-based ceremony, participants in this study resist non-Indigenous regulations of service delivery, whereby programs must maintain regular operating hours. This study upheld that spiritual development is an integral component to child development and holistic educational models; however, the role early childhood practitioners and programs play in fostering the spiritual development of children is still not clear.

In addition, this study drew attention to the importance of spiritual development for program personnel, and the contribution spiritually connected practitioners make to quality Indigenous early childhood programs. A few participants representing administrative roles recognized the need for early childhood staff and community members to collectively heal from the inter-generational effects of residential school and child welfare policies. By encouraging and creating space for staff participation in ceremony, Aboriginal administrators in this study demonstrated support for Indigenous healing. These findings support residential school survivor Hodgson (2008) who argues, “individuals who have a spiritual foundation or who live the values and principles of the ceremonies we participate in have been most successful in reconciling the effects of social policies [e.g. residential school or illegal practice of ceremony]” (p. 364), and “ceremony and treatment [are] integral to community change and addressing the inter-generational impacts of family violence” (p. 373). By creating space for staff, children, and families to collectively participate in ceremony, Aboriginal administrators in this study demonstrated deep value for ceremony and its role in healing inter-generational trauma. Furthermore, supporting the spiritual development of personnel suggests that spiritually connects adults will benefit the spiritual development of children. Although spirituality and discussions thereof were a contentious issue, supporting the spiritual development of children was strongly valued by the Aboriginal early childhood

practitioners in this study and remained an important component to meaningful Indigenous early childhood programs.

5.2.4 Family and community involvement

Indigenous early childhood education literature argues that family and community involvement is essential to programs (Ball & Pence, 2006; Greenwood & Shawana, 1999), and that a family and community perspective of involvement is more appropriate to Indigenous settings than parental involvement because of Indigenous values of extended family systems (Anderson, 2002; Fler, 2004). This study's findings support arguments in the literature because participants described how family and community members are involved in programs, and the essential contribution family and community members make in the delivery of language and culture in curriculum. Significant to this study is that when describing family and community involvement, participants did not refer to typical involvement strategies such as parent-advisory committees and family nights as methods to engage families in programs. As such, findings challenge typical notions of parental involvement. A more relevant approach to engage family and community members described by participants was the 'open-door' method, which creates a fluid relationship between the centre and/or program and family and community members. For example, participants representing centre-based service delivery models discussed involvement in relation to family and community members 'dropping-by' to visit and share food, and did not penalize parents for absences or late-arrivals for scheduled appointments. By creating a fluid relationship between the program and family and community members, participants in this study reduced power structures between program and families and promoted a view of program and family inter-dependence. These decisions in practice are consistent with recommendations in the Indigenous education literature on family and community involvement (Fasoli & Johns, 2007; Goulet, 2001). Furthermore, this fluid approach to involvement challenges the view that the purpose of family involvement in programs is to provide administrative direction into programming and/or discuss children's development needs. Instead, the purpose of involvement becomes about building trust with Indigenous families and repairing historical betrayal of Indigenous families by educational institutions. The critical

importance of fostering a fluid relationship between program and community and working to build trust between educational institution and families is best featured in the example where professional and para-professional health and screening services were conducted at the child care centre in the safety of Aboriginal early childhood practitioners. Without the safe environment established through the open-door approach, and by maintaining a fluid relationship between the program and families, parents may not have agreed to have their children assessed for developmental delays.

Participants in this study uphold the view that a family and community philosophy of involvement is more appropriate to Indigenous contexts, and suggested that a fluid relationship between the program and family and community members is an effective method to engage families in programming. By challenging traditional notions of involvement, and creating space in programs for family and community members to visit at their convenience, Indigenous practitioners in this study create meaningful Indigenous early childhood programs.

5.2.5 Indigenous language

Findings from this study support recommendations in the literature that Indigenous language plays a pivotal role in Indigenous early childhood programs (AFN, 1989; RCAP, 1996) as all participants described language as a key component of cultural programming. Further, all participants revealed that their respective programs include the language of territory, which supports the belief that including Indigenous language in early childhood programs contributes positively to local community, linguistic, and cultural capacity building (Wilson & Kamana, 2001). These are promising strides in the ongoing dialogue of the critical importance of early childhood programs to support cultural identity formation through language. However, despite recommendations in the literature that immersion settings represent promising sites for Indigenous heritage language acquisition (McIvor, 2009; Reyhner et. al, 2003) and bilingual settings are good opportunities for maintaining Indigenous language capacity (Hinton, 2001a), no participants in this study reported working in either immersion or bilingual language settings. Contrary to the philosophies of immersion and bilingual programming, in which language is integrated into the operations and curriculum of the program, the majority of

participants described how language was included as a component of cultural curriculum and taught through direct instruction. That is to say, in this study, language is included in programming for a certain period of time, taught by either program personnel or guest speakers (e.g., Elders). In this way, the language learning environment and method of instruction did not reflect environments considered optimal for the revitalization or maintenance of Indigenous languages. However, some of the decisions made by participants to include language regardless of whether or not it is taught through the ‘most promising’ methods for revitalization and maintenance, language is nonetheless a critical component of programs. For example, some participants even revealed their willingness to explore non-traditional strategies to teach and preserve language. That is, participants were willing to use computer technology to develop curriculum, and to record and/or document Elders speaking in order to preserve the language. [Technology as a tool for Indigenous heritage language acquisition is also debated in literature. See Reyhner & Lockard (2009) for an up to date discussion]. This means that practitioners in this study were committed to including language in programs, and worked to ensure Aboriginal children have ongoing and repeated exposure to their heritage languages. However, the pressing need for pragmatic teaching resources and the lack of available speakers and language instructors were significant barriers for participants of this study, and echo the despairing cries for resources made in the Indigenous language revitalization literature (Hinton, 2001a; Galla, 2009).

The efforts of participants in this study to include language in programming, regardless of the language capacity of educators, or the availability of both language teachers and teaching resources, demonstrate that language revitalization is a priority. Participants in this study support Kipp (2000) who urges, “teach the children the language...Don’t ask permission. Go ahead and get started, don’t wait even five minutes. Don’t wait for a grant. Don’t wait, even if you can’t speak the language” (p. 8). Even though language programming and resources in this study may not have been at the level as desired by participants, the success of Indigenous language revitalization in international Indigenous early childhood contexts provide evidence that each step contributes positively to language revitalization efforts (Te Kohanga Reo National Trust, 2009). For example, in one generation, the Hawaiian language shifted from one at risk of

extinction to one taught in programs from infancy through post-secondary (Galla, 2009). Participants' salient efforts to ensure children learn their culture through language tells us that in the programs represented in this study, Indigenous language is an important contributor to early childhood programming. Finally, regarding the loss of Indigenous languages and the resulting loss of culture in their communities, participants of this study do not wish to risk another generation of language and culture disconnect.

5.3 Making-meaning: Resisting traditional notions of quality care

Hawaiian scholar Meyer (2008) contends that for Indigenous people, “existing in relationship triggers *everything* (italics original): with people, with ideas, and with the natural world” (p. 218). Indigenous scholars have long contended that for Indigenous people, the view that ‘we are all related’ forms the foundation of Indigenous epistemology (Cajete, 1994; Ermine, 1999). Early childhood practitioners in this study revealed that at the forefront of their practice, is building and maintaining trusting relationships with family and community members. Therefore, just as relationships form the crux of Indigenous epistemology, relationships form the crux of meaningful Indigenous early childhood practice. Ensuring that Indigenous children learn from Indigenous role models, including language in programming regardless of teacher and/or speaker capacity, maintaining an open-door for families to drop-by and visit, and gently raising discussions of Indigenous spirituality with family members, are all demonstrations of Indigenous practitioners keeping in ‘good relation’ (Cajete, 1994) with others. Across each of the five values for Indigenous early childhood programs, participants exercised a level of fluidity in their practice to uphold Indigenous values of relationship building and maintenance. However, in keeping true to Indigenous epistemology, participants in this study also raised concern about where mainstream notions of quality care continue to affect the implementation of meaningful Indigenous early childhood practice. To highlight, structural levels of quality care – that is, strict child: staff ratios, licensing regulations for food service, and age separation requirements, created barriers for participants to deliver culturally congruent programming. Rather than accepting mainstream policies for service delivery rooted in beliefs of ‘optimal environments for child development’ (Bredekamp, 1987; Doherty, 1991), participants

demonstrated resistance against practices and policies not in accordance with Indigenous values of relationship building and maintenance. To highlight, practitioners' decisions to support multi-age group settings, permit drop-in attendance, hire personnel who may be neither fully trained in early childhood nor have completed their license to practice, and closing program doors to permit participation in community-based ceremony, all demonstrate how participants value and foster relationship building and maintenance. Participants in this study reveal where Western beliefs and guidelines for early childhood education and child development at times limit Indigenous perspectives for early childhood education and care.

5.4 Making-meaning: Indigenous values for early childhood education and care and the reconceptualist movement

This study built from the reconceptualist movement for quality care, which argued that 'quality' is a values-based notion for early childhood education and care (Moss & Pence, 1994; Woodhead, 1996); thus multiple values-based interpretations of quality care exist. From this perspective, it is believed that locally relevant, community-based descriptions of quality care contribute meaningfully to international, multi-lingual discussions of early childhood education and care. Recall that the reconceptualist thinkers first drew from the First Nations Partnership Program at the University of Victoria School of Child and Youth Care, and lessons learned from practices in Indigenous and international early childhood contexts, to support the movement 'beyond quality to meaning making' (Dahlberg, et. al, 1999; Dahlberg, et. al, 2007). By starting with the BCACCS' (2005) quality statement and synthesizing it with relevant literature in Indigenous early childhood education and care to identify and explore five values for Indigenous early childhood programs, this study contributed to the reconceptualist movement, and expanded earlier descriptions of Indigenous early childhood program practices. Further, by considering different conceptualizations of Indigenous early childhood programs (e.g., the philosophy and components of the Aboriginal Head Start program model versus early immersion language nests), and exploring some ways that Aboriginal practitioners 'make meaning' at the front-line level (e.g., fostering a fluid relationship between program and community), this study answered from the

perspectives of ten Aboriginal early childhood practitioners, an ethical and political question posed by reconceptualist scholars: ‘What do we want for our children?’ (Dahlberg & Moss, 2005).

An overarching goal of the reconceptualist movement is to challenge the view that traditional (i.e. mainstream) notions of quality care, rooted largely in North American held beliefs for child development, are universally applicable and definitive for children. By showcasing a diversity of community-based early childhood practices, reflective of the values for early childhood development held by the community the program serves, reconceptualist thinkers argue that stakeholders in early childhood education may begin to ‘broaden and deepen’ understandings of the early childhood institution (Pence & Pacini-Ketchabaw, 2008). This study contributed to this dialogue by providing some examples of where mainstream notions of quality care influence, and at times impede, Indigenous early childhood practice. To highlight, provincial program licensing regulations prevented some participants from serving traditional foods because they do not undergo the same health inspections as food purchased from a grocery store. Further, licensing regulations require practitioners to deliver programs in age-segregated settings, and with strict staff: child ratios. These provincial program licensing regulations, which reflect structural indicators quality care do not support or facilitate Indigenous values for early childhood programming. This signifies that despite continued efforts among the reconceptualist camp to argue for broader, ‘multi-lingual’ approaches to discourses on quality (Dahlberg et. al, 2007; Pence & Pacini-Ketchabaw, 2008), the view that children require specific environments for optimal learning continue to prevail, and at times create challenges for the participants of this study to deliver culturally-based programming.

Finally, in keeping with the reconceptualist argument that a ‘multi-lingual’ view to critically discuss early childhood education and care is more open to appreciating the range of perspectives that exist regarding what is ‘appropriate’ early childhood programming (Dahlberg et. al, 2007), it is important to consider where traditional and Indigenous notions of quality care intersect, and where they remain discrete categories. This thesis revealed that mainstream notions of quality care emerged from the National Association for the Education of Young Children (NAEYC) position statement on developmentally appropriate practice in early childhood programs (Bredekamp, 1987;

Bredekamp & Copple, 1996) and environments considered 'high quality' on the ECERS (Harms & Clifford, 1980; Harms, Clifford & Cryer, 1998). With strong support from the NAEYC and the Canadian Child Care Federation (CCCCF) through recommended minimum standards documents (NAEYC, 1991; CCCC, 1991), mainstream notions of quality care maintain that rigid regulations for program group size, adult: child ratios, health and safety standards, as well as play-based curriculum and empirically based research, contribute to optimal learning and development opportunities for children. Furthermore, mainstream notions of quality care place heavy emphasis on individual child development. On the contrary, as this thesis has shown, Indigenous notions of quality care are distinct from their mainstream counterparts, in that they support multi-age group settings, require flexibility in adult: child ratios and food safety standards, develop curriculum based on local language and culture, and adopt a family and community orientation to parental involvement. In addition, unlike mainstream perspectives of quality care, which are guided by recommendations made from the NAEYC and CCCC and encourage pedagogy based on DAP (Bredekamp, 1987; Bredekamp & Copple, 1996), quality Indigenous early childhood programs follow recommendations and guidance from Indigenous Elders, Indigenous governing bodies, and view a child's spiritual development to be a critical and essential component of their development. However, despite the sharp distinctions of what constitutes quality care, there are notions of quality care that transcend the perspectives of traditional/mainstream and Indigenous early childhood education. To highlight, both Indigenous and mainstream programs share the view that quality care includes the following: qualified early childhood personnel, ongoing access to and participation in professional development, low staff turnover in programs, the recognition of and appropriate response to the varying gifts and abilities of children, and a responsibility of early childhood programs to prepare children for school entry. This identification of where traditional and Indigenous notions of quality care intersect is an important contribution to the reconceptualist movement because it acknowledges the 'co-existence' of perspectives of 'quality' in early childhood education and care (Pence & Pacini-Ketchabaw, 2008).

The extent to which this study may impact international dialogue regarding quality care may be minimal as this is a small-scale study limited to ten practitioners in

British Columbia. Nonetheless, this study lends support to the reconceptualist movement in a few distinct ways, and makes a small contribution to ‘broadening and deepening’ (Pence & Pacini-Ketchabaw, 2008) understandings of the roles and the functions of early childhood programs in our communities.

6 Conclusion and recommendations

6.1 Conclusion

The reconceptualist movement created invaluable space for and raised the profile of Indigenous practices in international discussions of quality care. The movement ‘beyond quality to meaning-making’ (Dahlberg et. al, 1999) inspired BCACCS to develop their own quality statement, and provided the rationale for this study’s exploration of Indigenous notions of quality care. By identifying Indigenous values for early childhood education and describing some examples of their emergence in program practice, this study extended the work of the reconceptualist movement in two important ways. First, this study supports the notion that a meaning-making orientation to early childhood education and care is useful to ‘broaden and deepen’ our understanding of early childhood practice (Pence & Pacini-Ketchabaw, 2008) because it identified both broad themes and local examples of practice within Indigenous early childhood programs. Second, this study’s findings lend further support to the argument that the universal application of traditional notions of quality care is limiting for community contextualized early childhood practice, as it shed light on where Indigenous perspectives to early childhood education differ from, and are limited by, mainstream notions of quality care. Bearing in mind that this was a small study, we may conclude that Indigenous values for early childhood education and the practices in support thereof, ensure Indigenous teachings of language and culture; adhere to Indigenous laws of relationship building and maintenance; and respect and respond to the ongoing effects of colonization on Indigenous people. To this end, ‘making meaning’ in Indigenous early childhood education and care is a continuous process of exploring, understanding, and negotiating where Indigenous values fit and do not fit within Western values for early childhood.

6.2 Recommendations for research, policy and programming

Indigenous early childhood programs remain a relatively new approach to caring for Indigenous children, and as an under-explored area of research, further inquiry into the philosophies and values that guide Indigenous early childhood practice is

undoubtedly valuable. To address the lack of research in this area, we may look to the reconceptualist movement for guidance and consider asking similar ethical and political questions of our practice. However working with Indigenous communities is different from the reconceptualist movement, in that all inquiry into practice must be considered in light of experiences with colonization and the ongoing impact colonialism has on Indigenous people in Canada (Greenwood, 2006). For example, we may ask, how do Indigenous early childhood programs support long-term Indigenous community goals for political autonomy, social and economic prosperity, and the revitalization of cultures and languages? In addition, by using the meaning-making framework to answer questions relevant to Indigenous early childhood practice, we could begin to problematize and discuss Indigenous early childhood education outside of the quality care framework. With further understanding of how Indigenous early childhood programs and practitioners ‘make meaning,’ we could not only challenge mainstream notions of quality care, and defend the space for alternative perspectives to early childhood education and development (though we may continue to valuably contribute to this literature); but we could also truly move ‘beyond quality,’ and begin to discuss, problematize, and construct early childhood programs from an exclusively Indigenous place. With added research into Indigenous meaning-making, we could shift discussions of Indigenous values and practices in early childhood programs from a place connected to literature on quality care, to its very own discourse for early childhood education and care.

As this study was an exploration of Indigenous notions of quality care and was small in scope, claims that the five values must be adopted as policy are not appropriate. However, with additional survey research and program observation, researchers and educators may be able to identify and claim a set of values useful to inform policy and further shape program development. With further research to a) identify the relevancy and applicability of the five values in other Indigenous early childhood contexts – for example, international and/or other Canadian Indigenous contexts; b) further understand the strategies employed by front-line Indigenous early childhood program staff to meet the service delivery needs of their Indigenous families; and c) identify limitations of the five themes explored in this study, we may be able to draw more clear and firm conclusions of what ‘meaning making’ in Indigenous early childhood contexts looks like.

One of advantages of this study is that it provided a glimpse into front line service delivery, and the resources and challenges that affect implementation of Indigenous values in early childhood education practice. As such, the majority of the recommendations that can legitimately follow from this study reflect programming needs. Until further research and policy may direct us otherwise, the following recommendations for programming stem from the five values explored in this study, and assume for the time being, that they stand as critical elements of Indigenous early childhood programs.

At the core of Indigenous early childhood programs is culturally appropriate programming; and Elders, educators and community members with capacity in language and culture contribute importantly to curriculum. Therefore, to strengthen programming, Indigenous early childhood programs require more Indigenous personnel, as well as culturally appropriate curriculum and teaching resources. Funding is needed to develop curriculum resources to support language teachers and language programming. Curriculum resources must attend to the diversity of languages in Indigenous communities as well as the varying levels of language knowledge among early childhood personnel. Additionally, recruitment campaigns and community-based practitioner training programs could draw more Indigenous people into the field of early childhood education and serve to build program and practitioner capacity. In this study, licensing requirements for practitioners posed barriers for some educators to move from assistant educators to fully licensed, autonomous educators. Therefore, to build program and practitioner capacity, prospective, pre-service, and/or unlicensed practitioners require mentorship from experienced personnel, as well as supplementary income to support their living as they work to obtain their license to practice. Furthermore, provincial licensing regulations for child: staff ratios need to be modified to permit unlicensed practitioners working towards their license to practice to contribute to the permitted/regulated staff: child ratios.

Spiritual development and spiritual renewal through ceremony are vital components of Indigenous ways of being. This study revealed that it is important for early childhood personnel to have access to cultural ceremony for their own spiritual development and healing, and that participation in ceremony sometimes occurs in

contexts outside of the early childhood program. As such, administrators must have programming planned well in advance to notify families and staff of potential personnel absences, and/or program closure. In the event that additional personnel are not available to cover a staff member's leave (while the individual/s participate in ceremony in community-based contexts), programs must work with the community to agree on times and dates for program closure. Staff access to cultural/ceremonial leave should be granted above and beyond statutory holidays, vacation and sick days.

Finally, in this study it was acknowledged that family and community involvement plays an important role in the inclusion of cultural teachings and language instruction in programs. Therefore, resources are needed to appropriately remunerate and/or gift guest speakers for their participation and contribution to cultural programming. One of the key identified means to promote family and community involvement in programming is through sharing food, thus programs require sufficient resources to provide meals, and host celebratory feasts or social gatherings on a regular basis. Celebratory feasts and meals should be open to all community members - not exclusive to families with children registered in the program, and would be flexible to attend to drop-in participation. It is advisable for programs to consider hosting celebratory feasts outside of the program environment so that the program reaches out to the community, rather than solely inviting community members into the early childhood centre. Finally, to ensure the maintenance of relationships with families and community members, and to encourage their ongoing involvement in the program, program regulations and early childhood practitioners must be open to variable family and community member attendance, and not penalize families for inconsistent or non-attendance.

6.3 Closing

This master's thesis research began from the BC Aboriginal Child Care Society's desire to impact policy and program development in Indigenous early childhood education and care by better understanding the values that shape Indigenous early childhood programs, and describing how practitioners operationalize the values in practice. With BCACCS' (2005) *Draft Quality Statement for Aboriginal Child Care* as a

starting point, I identified and explored five values that represent Indigenous perspectives of quality in early childhood education and care, and interviewed ten Aboriginal early childhood practitioners from a range of program models across British Columbia, to describe the successes and challenges they experience implementing quality care in Indigenous early childhood programs. This master's thesis research study is small in scope and does not claim to represent 'meaning making' across all Indigenous early childhood contexts. However, it is my hope that it has provided a glimpse into how Indigenous perspectives of 'quality care' differ from their mainstream counterparts, and why Indigenous early childhood programs must continue to be supported for the unique and important ways they support Indigenous children and families. It is also my hope that in the long term, through increased and ongoing support of Indigenous early childhood education and care programs, we will see our 'gifts from the Creator' grow into spiritually, culturally, and linguistically strong leaders who will continue to build our Indigenous communities' social, economic, and health prosperity.

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Appendices

Appendix 1

Letter to invite participation in study

‘Realizing Quality Care in Aboriginal Early Childhood Development’ Invitation to Participate in Telephone Survey-Interview

Principal Investigator: Dr. Jan Hare
Department of Language and Literacy Education
Faculty of Education
University of British Columbia
(604) 822-9329

Co-Investigator: Danielle Mashon
Department of Language and Literacy Education
Faculty of Education
University of British Columbia

We are conducting a research study that is aimed at developing strategies and ideas for implementing the “Quality Statement on Aboriginal Child Care” that has been developed by the BC Aboriginal Child Care Society. There are many descriptions of “quality child care” that have been useful to Aboriginal early childhood settings, but these have been developed primarily for mainstream programs. BC Aboriginal Child Care Society identified sixteen elements of Aboriginal quality care based on input from Aboriginal communities in BC. Our project seeks to understand the resources, training, and supports that are needed to successfully take up these elements in Aboriginal ECD settings. For the purposes of this project we have grouped the sixteen principles of the statement into five themes.

The project is being carried out by myself, Jan Hare, in partnership with BC Aboriginal Child Care Society. I am a member of the M’Chigeeng First Nation and currently work in the Faculty of Education at the University of British Columbia. The BC Aboriginal Child Care Society is a non-profit provincial organization serving Aboriginal early childhood programs in BC, and provides opportunities for training, networking, resources, advocacy and research in Aboriginal early childhood development. An Aboriginal graduate student, Danielle Mashon, will be conducting her master’s thesis research as part of this project.

We invite you to participate in a telephone survey-interview to discuss the five themes of the “Quality Statement on Aboriginal Child Care.” This survey will take approximately thirty minutes of your time and will be audio-recorded. At the conclusion of the telephone survey we will review your responses with you to verify information and

ensure accuracy. You will be sent copies of transcriptions of recorded data. Your responses will be confidential. We will not use your name or other identifiable information for the report we will be preparing or for future publications.

There are no known risks associated with your participation. You have the right to not answer any questions and to withdraw from the telephone survey at any time. If you have any questions or require further information with respect to this study, you may contact Jan Hare at (604) 822-9329. If you have any concerns about your treatment or rights as a research participant, you may contact the Research Subject Information Line in the Office of Research Services at the University of British Columbia at (604) 822-8598.

If you are interested in our project and wish to participate please *phone* Danielle Mashon by at (604) 913-9128 so she may send you a form to sign indicating your consent to participate. You may also fill in the information box below and *fax* to Danielle Mashon at (604) 913-9129.

Miigwech (thank you) for your assistance and helping us with this important research project.

Respectfully,

Jan Hare

Your signature below indicates that you wish to be contacted to participate in this study.

Your name (please print):

Program name:

Your role in program:

Work telephone:

Work email:

Appendix 2

Letter of consent to participate in study

‘Realizing Quality Care in Aboriginal Early Childhood Development’ Consent to Participate in Audio-Recorded Telephone Survey-Interview

Principal Investigator: Dr. Jan Hare
Department of Language and Literacy Education
Faculty of Education
University of British Columbia
(604) 822-9329

Co-Investigator: Danielle Mashon
Department of Language and Literacy Education
Faculty of Education
University of British Columbia

We are conducting a research study that is aimed at developing strategies and ideas for implementing the “Quality Statement on Aboriginal Child Care” that has been developed by the BC Aboriginal Child Care Society. There are many descriptions of “quality child care” that have been useful to Aboriginal early childhood settings, but these have been developed primarily for mainstream programs. BC Aboriginal Child Care Society identified sixteen elements of Aboriginal quality care based on input from Aboriginal communities in BC. Our project seeks to understand the resources, training, and supports that are needed to successfully take up these elements in Aboriginal ECD settings. For the purposes of this project we have grouped the sixteen principles of the statement into five themes.

The project is being carried out by myself, Jan Hare, in partnership with BC Aboriginal Child Care Society. I am a member of the M’Chigeeng First Nation and currently work in the Faculty of Education at the University of British Columbia. The BC Aboriginal Child Care Society is a non-profit provincial organization serving Aboriginal early childhood programs in BC, and provides opportunities for training, networking, resources, advocacy and research in Aboriginal early childhood development. An Aboriginal graduate student, Danielle Mashon, will be conducting her master’s thesis research as part of this project.

We invite you to participate in a telephone survey-interview to discuss the five themes of the “Quality Statement on Aboriginal Child Care.” This survey will take approximately thirty minutes of your time and will be audio-recorded. At the conclusion of the telephone survey we will review your responses with you to verify information and ensure accuracy. You will be sent copies of transcriptions of recorded data. Your

responses will be confidential. We will not use your name or other identifiable information for the report we will be preparing or for future publications.

There are no known risks associated with your participation. You have the right to not answer any questions and to withdraw from the telephone survey at any time. If you have any questions or require further information with respect to this study, you may contact Jan Hare at (604) 822-9329. If you have any concerns about your treatment or rights as a research participant, you may contact the Research Subject Information Line in the Office of Research Services at the University of British Columbia at (604) 822-8598.

If you are interested in our project and wish to participate please sign the information box below and give to Danielle Mashon.

Miigwech (thank you) for your assistance and helping us with this important research project.

Respectfully,

Jan Hare

Your signature below indicates that consent to audio-recorded participation in this study. Your signature below indicates that you received a copy of this form for your own records.

Your name (please print):

Program name:

Your role in program:

Work telephone:

Work email:

Signature:

Appendix 3

Interview survey-questionnaire

‘Realizing Quality Care in Aboriginal Early Child Development’ A Survey for Practitioners in Aboriginal Early Childhood Education and Care

Background Information

1. Do you identify as Aboriginal?
2. Where are you located?
 - a. On-reserve
 - b. Off-reserve
 - c. Urban
 - d. Rural/Remote
3. What type of program do you work in? E.g., Aboriginal Head Start, preschool, daycare, K4/K5?
4. What is your position/role in the program?
5. Approximately how many children attend your program?
6. Is your program licensed?
7. How many people are employed in your program?

Indigenous Knowledge

Quality Aboriginal ECD programs strive to promote Indigenous ways of knowing, being and ways of life.

1. A) Does your program employ Aboriginal personnel?

B) In what capacity?
E.g., early childhood educators, support staff, program coordinators?
2. A) What types of cultural activities do you include in your program?
E.g., Elders teach, seasonal-based curriculum, drumming and/or drum-making, song, story-telling, prayer, smudge, field/day trips, Aboriginal Day events?

B) How often? E.g., daily, weekly?
3. What kind of access to cultural knowledge and/or resources do you have? E.g. Elders, language-speakers, family members?
4. How do you build positive self-identity and self-concept so children are proud of who they are and where they come from?
5. What resources do you need to further include Indigenous ways of knowing and life in your program?

Self Determination

Quality Aboriginal ECD programs strive to have Aboriginal authority over children's education and care experiences.

1. Tell me how Aboriginal people make decisions about your program. E.g. Do you have a community, parent or Elder advisory group? Do you have Aboriginal staff and program coordinators developing policies and guidelines for programming?
2. What contributes to having Aboriginal authority over your program? E.g. Do you have qualified Aboriginal early childhood educators, policy and guidelines developed by Aboriginal people and/or local community members?
3. What resources and/or supports are further needed to ensure Aboriginal authority over programming?

E.g. Do you require additional funding to support an advisory committee, strategies for recruitment and retention, and/or more lenient reporting-out and/or accountability measures from funding sources?

Holistic View of Child Development

Quality Aboriginal ECD programs aim to foster a holistic perspective of child development where the child's spiritual and/or cultural domain of development is included with cognitive, social, emotional and physical development.

1. What resources are available to you to ensure the child develops spiritually and/or culturally?
E.g. Elders, spiritual leaders/dancers, family members, prayer, dance, feasts, songs, stories?
2. What challenges do you face to ensure the spiritual domain of development is included with the cognitive, social, emotional and physical domains of development?
3. What further resources or supports do you need to include the spiritual domain of child development in your program?

Family and Community Involvement

Quality Aboriginal ECD programs want to include family and adopt a community-based philosophy of parental involvement. Parents, extended family members, Elders and community members are involved in programming to the extent possible.

1. Describe what family and community involvement means to you.

2. Who from the family is most likely to be involved in your program?
3. Who from the community is most likely be involved in your program?
4. How are family and community members involved? E.g. Do you have grand-parents donate resources and/or time, do family members volunteer in your program?
5. How have you achieved strong family and community involvement?
6. What challenges do you face to bring families and community members into your program?
7. What resources and supports are needed to ensure your program involves families and community?

Aboriginal Languages

Quality Aboriginal ECD programs strive to include to the extent possible, Indigenous language.

1. Do you include Aboriginal language in your program?
2. How have you decided which language to include?
3. Is your language program instruction based or integrated?
E.g. Do you have language-time, invite a language teacher, or do you have an immersion program?
4. What resources and/or supports contribute to your success?
E.g. Do you have access to language speakers, teachers, Elders, curriculum (books, tapes), or do you have policy in place to support and ensure is a foundation for your program?
5. What additional resources would support you to deliver language programming?

Additional

Is there anything else you would like to tell me about delivering high quality Aboriginal ECD programs that I haven't asked about?

Appendix 4
Approved certificate from the Behavioural Research Ethics Board



Certificate of Approval

PRINCIPAL INVESTIGATOR Hare, J	DEPARTMENT Language and Literacy Educ	NUMBER B06-0735
INSTITUTION(S) WHERE RESEARCH WILL BE CARRIED OUT UBC Campus ,		
CO-INVESTIGATORS: Mashon, Danielle, First Nations Studies		
SPONSORING AGENCIES Human Early Learning Partnership (HELP)		
TITLE: Realizing "Quality Child Care" in Aboriginal Early Childhood		
APPROVAL DATE JAN 22 2007	TERM (YEARS) 1	DOCUMENTS INCLUDED IN THIS APPROVAL: Nov. 8, 2006, Consent forms / Contact letter / Aug. 28, 2006, Grant application
<p>CERTIFICATION:</p> <p>The application for ethical review of the above-named project has been reviewed and the procedures were found to be acceptable on ethical grounds for research involving human subjects.</p> <div style="text-align: center; margin: 20px 0;"> </div> <p style="text-align: center;"><i>Approved on behalf of the Behavioural Research Ethics Board</i> by one of the following: Dr. Peter Suedfeld, Chair, Dr. Jim Rupert, Associate Chair Dr. Arminee Kazanjian, Associate Chair Dr. M. Judith Lynam, Associate Chair</p> <p>This Certificate of Approval is valid for the above term provided there is no change in the experimental procedures</p>		