

# A holistic approach to supporting Indigenous children's language and literacy development

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## Key questions:

1. What can we do to create culturally safe environments and encounters in our practice and in life?
2. How can we reduce the sense of personal risk and avoidance that some people experience when coming to an assessment, education program, or therapy session?

## Enabling and Limiting Attitudes, Beliefs, and Values

Attitudes, beliefs and behaviours that can be either “enabling” or “limiting” of our own development as culturally competent practitioners (Spence, 2005):

### Enabling

- Willingness to provide assistance to those in need
- Belief in equal rights to equal standards of care
- Questioning one's own beliefs and expectations
- Seeking permission
- Being able to listen without interrupting
- Imaginatively placing oneself in the position of another
- ‘being with’ and ‘being present’
- Advocating for patients when required

### Limiting

- Fearing or avoiding contact with difference
- Belief in the superiority of Western medicine
- Assuming understanding without checking its accuracy
- Being too busy to listen
- Focusing on “self” rather than “other”
- Expecting others to comply with your beliefs and values
- Doing what is minimally necessary
- Prioritizing technical skill over interpersonal skill

## Gathering Information

The First Nations Regional Health Survey offers a model of wellness in which indicators of health or developmental 'outcomes' are considered in relationship to Indigenous Knowledge, Culture, Language, Worldview and Spirituality.

Still, a practitioner must consider the extent to which this model is shared by any particular Indigenous client – since their understanding of wellness and optimal development is likely to combine elements of different models, e.g., an Indigenous model and a mainstream model.

- If you don't know where the person is positioned in relationship to Indigenous views of learning, health and treatment - you need to ask!

## The Kleinman Explanatory Model

This is a widely used approach to understanding how people are thinking when there is a problem. This is especially important when there are ethno-cultural factors that may be shaping different perspectives between the educator/practitioner and the child, parent or guardian.

To understand others, ask *What, Why, How, and Who* questions.

Begin an information gathering session with a statement such as:

*"I know different people have very different ways of understanding problems... please help me understand how you see things."*

After the conversation has been started, ask:

- *What do you call your problem? Do you have a name for it?*
- *What do you think caused your problem?*
- *Why do you think it started when it did?*
- *What does your sickness do to you? How does it work?*
- *How severe is it? Will it have a short or long course?*
- *What do you fear most about this problem?*
- *What are the main difficulties that your problem has caused for you?*
- *What kind of help do you think you should receive?*
- *What are the most important results you hope to get from this type of help?*
- *Who do you turn to for help? Who should be involved in decision making?*
- *How do you want me (this agency/program) to be involved in getting the help you think you need?*

The information you can gather with questions like these allow you to begin to see how a presenting problem is conceptualized by your client.

[https://www.youtube.com/watch?v=f1dA\\_oorQPo](https://www.youtube.com/watch?v=f1dA_oorQPo)



## Affirming and Invalidating Encounters

In a British Columbia study, Annette Browne and Joanne Fiske found two themes that characterized Indigenous women's descriptions of their 'affirming' or 'invalidating' encounters with mainstream services.

### Affirming Encounters:

- Development of a positive, long-term relationship with educators and health practitioners grounded in mutual respect and trust.
- Affirmation of personal and cultural identity: recognition and acceptance of traditional healing knowledge
- Actively participating in education and health care decisions: being able to speak openly through shared knowledge and power
- Receiving exceptional care: practitioners with outstanding ability to convey a caring attitude

### Invalidating Encounters:

- Being in situations of vulnerability: (JB: in special education and speech, language and audiology practice, this could involve various diagnostic assessments or exercises involving speaking. In residential schools, children were punished for using their first language, and often punished for speaking at all.)
- Dismissal by practitioners: feeling that schooling and/or health concerns were not taken seriously
- Transforming one's self to gain credibility: feeling the need to change appearance and behavior to obtain credibility and legitimacy
- Negative stereotypes about First Nation women: encounters with discriminatory attitudes and behaviors and treated accordingly
- Marginalization from the mainstream: feeling of being on the "outside" and "intruding"
- Disregard for personal circumstances, including poverty.

## Relational practice behaviours

- Offer a personal introduction, not only a professional mantle
- Ask where a person came from before the appointment (get a sense of where they may live or spend time, without asking: where are you from?)
- Be warm and respectful. Find common ground
- Be aware that too much eye contact may lead many people to feel uncomfortable.
- Pacing – let the person set the 'pace' for the interaction. Note their personal rhythm or tempo and try to adapt to it.
- Respect silence – your interaction may be punctuated with silence. This does not mean that the person has finished saying what they wish to say. They may be thinking, or the silence may simply be a reflection of the person's interactional pacing. Be patient.
- Wait until you are sure a person has completed their contribution to a dialogue before contributing yourself (i.e., do not voice-over or interrupt or engage in debate).

## Some “Do’s” and “Don’ts”

### DO:

- Establish rapport
- Use common protocols to show respect
- Acknowledge diversity/differences between you and your clients
- Be attuned to and accept possible incompatibilities between your culture, your professional culture, and the client’s culture(s)
- Become aware of the link between your discipline and colonial institutions
- Find commonality/common ground
- Apply the LEARN model in consultations
  - Listen to your client
  - Explain your own perspective
  - Acknowledge differences and similarities
  - Recommend a course of action
  - Negotiate mutual agreement
- Encourage your colleagues to adopt cultural competency standards for service delivery

### DON’T:

- Use colloquialisms in your communication [e.g. Indian Summer, Indian time, Low man on the Totem Pole - even if you hear Indigenous people using them]
- Tell clients or community staff members you have a timeline and they have to meet it.
- Tell them that you have to treat them “equally” with others.
- Tell them what dates to meet: instead ask which dates would work best for their community.
- Go to clients or community staff members with a completed treatment plan before consulting and collaborating.
- Expect to consult with the same community in the same way on different issues.
- Confuse potluck with potlatch.
- Assume that information about spiritual issues or cultural ceremonies will be freely provided. If it is important or necessary for you to know, someone will provide you with the information.
- Say that some of your best friends are: Aboriginal, Indian, First Nations...
- Impose or expect direct eye contact.
- Feel that you must answer or fill the silent periods during discussions. These silent periods may be longer than you are accustomed to, and may be needed for thought formulation. Try to ensure that the speaker has finished before you contribute to the conversation.
- Ask an Indigenous person to speak on behalf of all Indigenous people or even on behalf of a community or a family. (When was the last time you were asked to speak on behalf of or represent your entire ethnic group?)

## Suggestions for community visits

### DO:

- Research the community before going to the community. [Who is the Chief; language and cultural group; what they prefer to be called]
- Locate a mentor from the community with whom you can ask questions about activities, events, protocols and sensitive interpersonal relationships
- Be aware that prejudice and discrimination continues in the lives of Indigenous people.
- Be aware that issues involving child welfare, policing, education, health, and justice can trigger emotions associated with a negative history of these sectors in Indigenous communities
- Be flexible in planning meetings to accommodate community activities such as fishing, harvesting, and funerals.
- Thank the community for the invitation into their traditional territory. For example, “I would like to thank the \_\_\_\_\_ First Nation (s) for agreeing to meet with us and inviting us into your traditional territory.”
- Try to establish a relationship before you need to ask for something.
- Recognize that individual Nations are autonomous (one First Nation cannot speak for another); avoid setting up processes, discussion, or consultations where this could be an issue.
- Learn about and stay up to date on Indigenous issues and perspectives.
- Approach issues with a joint problem-solving attitude.
- Be prepared to say when you are having a problem and that you are seeking their thoughts on how to solve it.
- Honour all your agreements, including verbal agreements.
- Be aware that some rights in First Nations are communally held and that the whole community may need to be involved in the decision-making process.
- Recognize that, like working in other communities, there are many dynamics at play when working with Indigenous people and organizations; try to learn about those dynamics in advance.
- Be aware that cultural (and often language) survival and revitalization is a fundamental driver of an Indigenous community’s decision-making process.
- Make every effort to attend cultural events when invited – it is an honour to be asked to attend.
- Ask for protocol guidance from the host before attending cultural events (ceremonies; dress or attire; gifts or offering of tobacco; expectations).

