Maawandoonan*:

Early Childhood Disability Support Services In Constance Lake First Nation

An Inclusive Early Childhood Service System (IECSS) Project Study

Nícole Ineese-Nash, MA Early Childhood Studies, Ryerson University, Toronto, Ontario, 2017

Introduction

Indigeneity and Disability

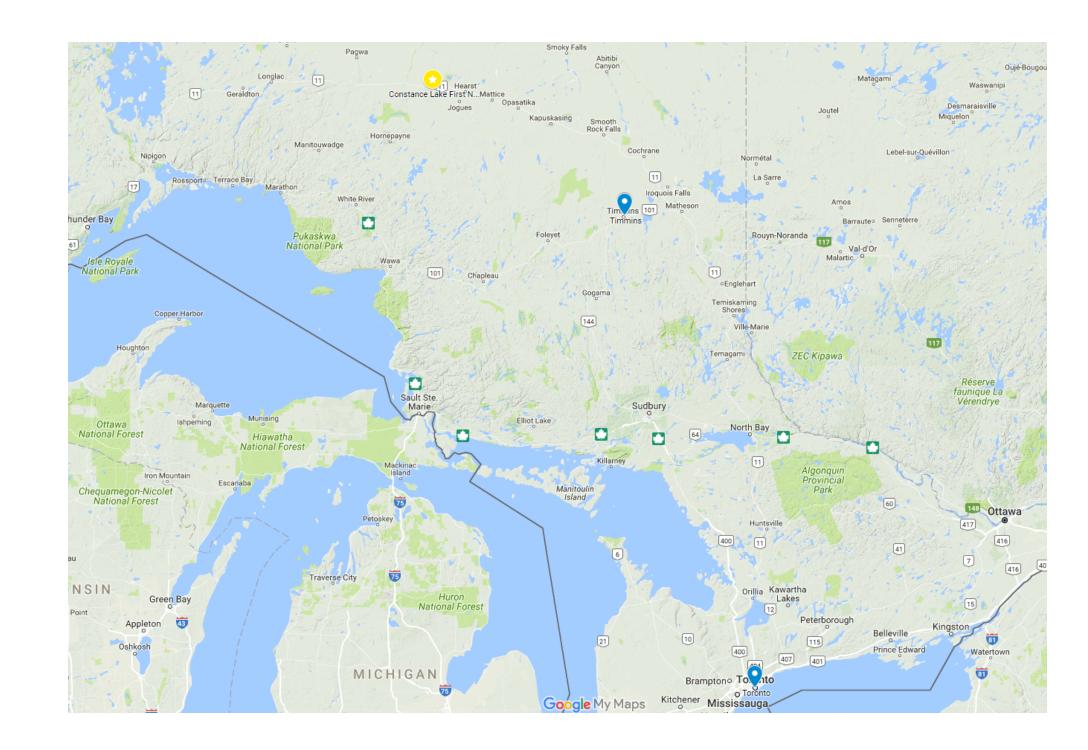
Indigenous children with disabilities in Canada navigate various service systems that vary in purpose, approach, and ideology (Durst, 2006). Children who are identified as having a disability or developmental concern in early childhood are often referred to intervention services such as speech and language supports, behavioural intervention, or various therapies (Underwood, 2012). Indigenous perspectives of development are largely overlooked within these settings (Ball, 2012). Indigenous children are identified as having a disability at two to three times the rate of the non-Indigenous population (Durst, 2006; Hanvey, 2002). Early childhood and intervention services need to recognize the marginalization of Indigenous children through the intersection of oppressions relating to race and ability (Durst et al., 2001).

Structural Barriers to Service

There are significant barriers to accessing support services in Northern Ontario due to distance, availability of service providers, and funding (Durst, 2006). Receiving supports within the current service system remains a challenge for Indigenous families due to the structure of funding within these programs (Blackstock, 2012). Jordan's principle, a child first principle was unanimously endorsed in the House of Commons in 2007 in an attempt to remedy the institutional barriers to accessing appropriate care for First Nation children (Sinha & Wong, 2015). However, there has been little evidence to suggest there has been any system level change in this regard (Blumenthal & Sinha, 2015).

Research Questions

- I. How does the support service system function for families with children with disabilities in CLFN?
- II. Are Indigenous frameworks of child development, wellness, disability, and healing taken into consideration within the interventions provided to families?
- III. How are children and families impacted through interactions with service system?



Acknowledgements

The project is part of a larger institutional ethnography, studying experiences of early childhood disability. This larger study is a partnership with The District of Temiskaming, Wellington County, City of Toronto, and the City of Hamilton, and three Indigenous organisations (Temiskaming Native Women's Support Group, Niwasa Aboriginal Education Programs, and Native Child and Family Services of Toronto). The Indigenous partner organisations have also deferred to the Temiskaming Elder's Council who have acted in an advisory capacity in the design, implementation, and analysis of the project data.

Method

Constance Lake First Nation adds a fifth community to the overall project. Community members were recruited through service providers in the community as well as through community Facebook posts. Semi-structured interviews as well as a service questionnaire were conducted in the community with 6 parents. The interviews were transcribed verbatim and analyzed using NVivo software. Recurrent themes were then generated through a review of the coded transcripts. It should be noted that the thematic analysis of the data is currently in process. The emergent findings discussed are therefore reflective of the current point in the analytic process. Transcripts and questionnaires were reviewed for points of institutional interaction. Service maps were then generated to illustrate family interactions with service providers (see Figure 1).

*Maawandoonan is an Ojibway word meaning to bring them together. This title was chosen in order to honour Indigenous perspectives in the research processes. Bringing them together in the context of this work refers to the need for collaboration within the disability support system with Indigenous peoples in order to better support Indigenous children with disabilities in a culturally safe way.

Emergent Findings

Access to Service

All participants described challenges to accessing services. Other than occasional speech services early intervention was not available in the community. Families had to travel to urban centres for medical appointments, diagnostic tests, and ongoing treatments which required time and money.

Institutional Processes

Families had to navigate the service system, by seeking diagnoses, filling out applications, and getting referrals. These processes enabled families to access funds, service, and information regarding their child's disability, but processes were also onerous for parents.

Family Support

Many families discussed their experiences of accessing supports for themselves in addition to those accessed for their children. These included shelters, mental health services, and addiction supports. Additionally, families' networks of relatives were important in supporting both the child and the family overall.

Community Inclusion

In almost all cases, children were unable to attend early childhood programming in the community due to the lack of support available for children with disabilities. Families wanted more special education teachers and support people within the community to allow children with disabilities to be included in programs with other children.

Children's Hospital Eastern Ontario (Ottawa) Family Doctor (Hearst) Orthopedic Specialist Children's Hospital Fastern Ontario (Ottawa) Recreation Program Library OT (waiting before surgery)

Figure 1: IECSS Service Map

Discussion and Conclusion

Children with disabilities in Constance Lake face significant barriers to participating in their community on an equal basis with other children. They often spend long periods of time outside of their community in order to access therapies and other clinical services. Some children were denied the opportunity to attend school in their community altogether. The current system of services that is available to children with disabilities may be disharmonious with Indigenous worldviews of disability and child development (Ball, 2012; Durst 2006). Indigenous peoples have beliefs about ability that differ from the medical model that permeates the disability support system (Lovern & Locust, 2013), yet there is little consideration of Indigenous ontologies in assessment, diagnosis, and treatment processes. Although this study examines the structure of services in a particular community, many First Nation children likely face similar challenges in accessing supports across Ontario.

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