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BELIEF OF OUR PEOPLE.

CHILDREN MUST BE
RESTORED TO THEIR
PLACE, THE HEART OF THE
COMMUNITY

**BC First Nations Children:
Our Families, Our
Communities, Our Future**

AND

IN DOING

SO RESTORE

OUR COMMUNITIES TO A

PLACE OF POWER AND

SELF-SUFFICIENCY.



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Executive Summary

The government in present-day Canada is placing a great emphasis on both Aboriginal and non-Aboriginal children. The federal government's announcement of the National Children's Agenda in December 2000 was the impetus for many early childhood development initiatives, both federally and provincially. Aboriginal communities feel the impact of these initiatives. One of our challenges, in this context of new government developments and current community realities, is to ensure that adequate and quality programming is available, and that Aboriginal values and cultural principles underlie the care and education of BC's Aboriginal children.

We have been caring for our children since time immemorial. The teachings of our values, principles, and ways of being to the children and youth have ensured our existence as communities, nations and peoples. Mary Thomas (1995), Shuswap Elder says, "the values of our people have ...ensured our existence. It is to the children that these values are passed. The children are our future and our survival." Care of children was a shared responsibility by the family and community.

Babies and toddlers spent their first years within the extended family where parents, grandparents, aunts and uncles, brothers and sisters all shared the responsibility for protecting and nurturing them. Traditional Aboriginal life provided the conditions for a solid childhood foundation. (Royal Commission on Aboriginal People, 1996).

Today, families continue to play an important role in socializing their children. In fact, Carole Phillips (1994) says that this process of socialization (or as she terms it 'enculturation') into the child's birth community is critical to their self-esteem and overall healthy growth and development. Michael Chandler's research



demonstrates that youth with a strong sense of community and cultural identity are less likely to commit suicide. Emmy Werner's (1982) work points out that, the ability to trust, learned early in a child's life, lays the foundation for resiliency, that is, the ability to bounce back when times get tough. Equally important as children's social emotional development is their physical development. Loving care, stimulating environments, and social interaction are key factors in children's brain development. This early brain development affects the child's capacity for the rest of their life. Physical skills and abilities are also developed early in children's lives. Taken together, we cannot underestimate the importance of children's early childhood development.

Families today do their part within the home environment. The community and broader society's part is provided through government funded programs. Because of the central and critical role these ECD programs and services play in the development of our children, it is critical that we 'get it right' as leaders, policy makers, experts and practitioners. How do we best direct and implement these programs and services in our communities? That is the focus of this paper.



Introduction

Children are not our possessions, they are gifts to us. This is the belief of our people. Children must be restored to their place, the heart of the community and in doing so restore our communities to a place of power and self-sufficiency (Joint First Nations Inuit Federal Child Care Working Group, 1995, p.9).

Although the National's Children's Agenda (2000) committed 2.2 billion dollars¹ to support Canadian families and communities in their efforts to ensure the best possible future for their children, funding for Aboriginal peoples was conspicuously missing. In December 2001 the federal government committed \$185 million toward the early childhood development programs and services for Aboriginal children. One element of the government's broad Early Childhood Development strategy is to move toward greater coordination among young children's programs and services. While federal strategies focus on the overall children's initiative in broader society, they also impact the delivery of Aboriginal programs and services throughout the provinces and in specific regions. To that end, the following paper seeks to begin creating a vision for the early childhood development of Aboriginal children in British Columbia.

As expressed in the words of one Elder,

Traditional Aboriginal life provided the conditions for a solid childhood foundation. Babies and toddlers spent their first years within the extended family where parents, grandparents, aunts and uncles, brothers and sisters all shared the responsibility for protecting and nurturing them. Traditional Aboriginal child rearing practices permitted children to exert their will with little interference from adults (Royal Commission on Aboriginal People, 1996).

The task before us today is to ensure that there is adequate quality programming available and that Aboriginal values and cultural principles are put to use in the care and education of our children. We must make certain that quality

¹ See Appendix 'A' for the breakdown of these funds along with an overview of the National Children's Agenda date.



early childhood development principles are utilized to meet the needs of the children and families, now and in the future. We must also make certain that our commitment to the healthy well being of our children is incorporated within a vision for early childhood development in British Columbia. Given the current emphasis that government places on early childhood development, and the realities of communities currently coordinating early childhood services, we have a unique opportunity to create and implement a vision for BC's Aboriginal children and families.

Care and Education of Our Children

We have been caring for our children, and providing them education, since time immemorial. Our children have been taught our ways of being, our values and our principles. Fundamental values such as trust, respect, sharing, caring, humility, and love have been integrated into our caring and educational practices. Our values and principles have also been integrated into the care and education of our children, specifically the inclusion of a sense of connection to the land and the people and a belief that time and life itself mirrors the cycles that are evident in Mother Earth. Our children were cared for in a manner that reflected all of these values and principles.

We have had in the past, our own systems of child care and the whole spectrum of social interaction which encompassed the mind, body, and soul of the whole community. (Coldwater Indian Band, in Community Panel, Family and Children's Services Legislation Review in British Columbia, 1992, p.8)

Furthermore,

The survival of any distinct cultural group or society lies in its ability to perpetuate its existence, and this is basically done through the teachings of its youth in all that is vital to the social fabric of the community's life line. (Coldwater Indian Band, in Community Panel, Family and Children's Services Legislation Review in British Columbia, 1992, p.18)



The belief that child rearing is a sacred responsibility has always been present for Aboriginal people. This belief is embodied in the customs and practices of childrearing as a communal (or tribal) practice done not only by parents and immediate family, but rather by the whole (and extended) community. This practice is well documented by Aboriginal scholars and experts, and outlined in the following quotations:

Grandparents played a key role in the rearing children. They spent many hours telling stories and showing children how to do things. A tiny baby was nurtured by older siblings, and older siblings cared for each other. A child's family was supported through care for him. In short, the whole community took responsibility for the children and family through extended family, clan and family grouping relationships (Native Council of Canada, 1990).

In this early stage of development, children learned how to interpret and respond to the world. They learned how to walk on the land, taking in the multiple cues needed to survive as hunters and gatherers; they were conditioned to see the primacy of relationships over material possessions; they discovered that they had special gifts that would define their place in, and contribution to the family and community. From an early age, playing at the edge of adult work and social activities, they learned that dreams, visions and legends were as important to learning as practical instruction (Report of the Royal Commission on Aboriginal Peoples, Vol. 1, 1996, pp 446-447).

Today, as in the past, Aboriginal families play the most important role in the care and education of their children. Families continue to socialize their children into their communities and their nations. Carole Phillips, a contemporary researcher of early childhood development, identifies a process she calls 'enculturation' which is the process by which families enable children to know and understand a culture and/or society's values, attitudes, beliefs and behaviours. She states that children gain the power to influence and impact their world through this process of enculturation (Phillips, 1994).

Enculturation is essential, not only to the survival of a culture and people, but also to the development of healthy individuals who will one day be active and participating members in their community and nation. This positive development of a child's identity and esteem is particularly relevant for Aboriginal children given



the experiences of Aboriginal people since Euro-colonial contact. Sandra Griffin highlights the importance of enculturation for Aboriginal children in her keynote address at the Aboriginal Child Care Society Annual Conference in 1998, wherein she stated,

When children have what they need to grow, then the development of good character, wholesome personality, positive human relations, adequate goals and necessary skills are automatic (1998).

The importance of early childhood development is at the heart of our communities (and indeed our very existence) as Aboriginal peoples. Early childhood development has been given considerable attention in the past two decades by contemporary early childhood researchers, though it remains at the core of Aboriginal Elder's consideration of children. For instance, Shuswap Elder Mary Thomas has commented on early childhood development in her statement "The care of children begins with conception" (April 2002). Other non-Aboriginal experts in early childhood development have noted that loving care, social interaction and stimulating environments are important for promoting all aspects of brain development. Fraser Mustard (2002) and Clyde Hertzman (1999) write that the development of the brain determines the child's capacity for the rest of a lifetime. Multiple brain paths permit flexible thinking and problem-solving. In early childhood, children who have opportunities to explore their world build motor skills and hands-on understanding of the physical world. Outdoor/indoor environments provide opportunities for children to participate in daily activities and enhance their large and fine motor skills. In addition to the physiological development of children, other important aspects need to be considered in early childhood development. These include, as noted by Susan Fraser, (2000) that trust in others and making relationships lay the foundation for life in the human community. Additionally, Emmy Werner (1992) writes that when children's needs are met, trusting relationships are fostered, and in early childhood (provided trust is established) children develop resilience - the capacity to bounce back when life is tough. An environment of positive relationships, role models and recognition of a child's family



and community enhances the self-esteem of a child, as noted by (H.N. Chang et al. 2000), who writes that in early childhood, the foundation for self-esteem and pride in one's community and culture is laid (Carol Phillips, 1994; J. Gonzales-Mena, 1993; and L. Derman-Sparks, 1989). Further UBC professor Michael Chandler's (1998) research demonstrates that youth with a strong sense of community and cultural identity are less likely to commit suicide. Finally, in early childhood, children play in order to learn - making choices, sustaining a focus, problem solving, making friends and negotiating rules and roles. They learn to be interested in what attracts them and they practice the skills of learning (E. Jones & G. Reynolds, 1992).

Providing the Best Care and Education for Our Children

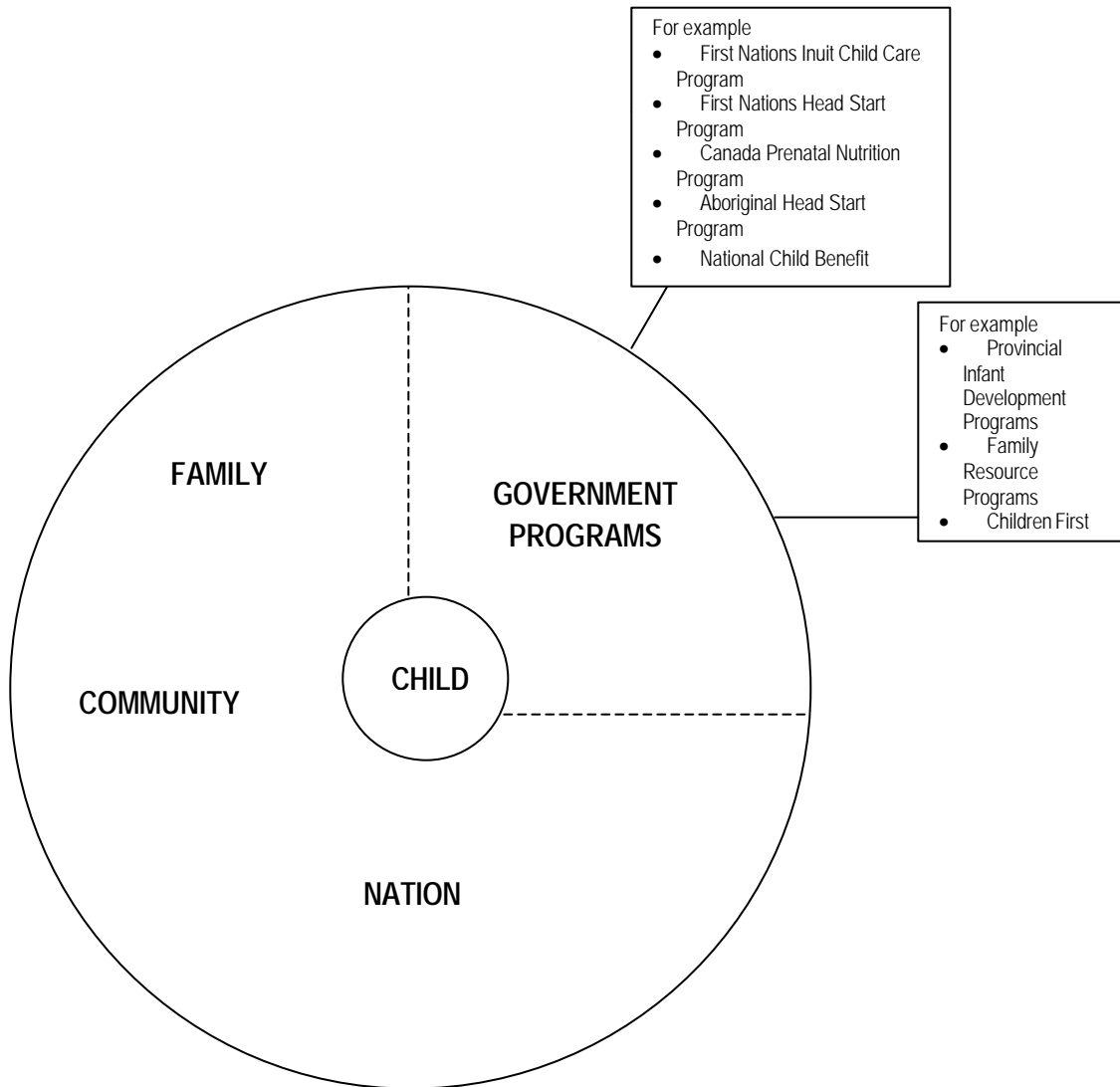
The importance of early childhood development in society, from both a physiological and social perspective, is well documented. The historic and contemporary practices of Aboriginal people with regard to the care and education of their children is similarly well documented, specifically the inclusion of holistic values and principles into those practices. The question thus arises as to how we, as Aboriginal people, can provide the best care and education for our children, ensuring our children's healthy development. In our current context, how do we achieve this?

The care of a child does not occur in isolation: an Aboriginal child lives within a family, a community, a Nation, a province, and a country. In this context children develop their self-esteem, and pride in their heritage and culture, which is needed to sustain them in their communities and nations as well as in broader society.

Parents do their part in the home environment. The community and broader society's part is provided through government funded programs and services. Because of the central and critical role these ECD programs and services play in the development of our children, it is critical that we 'get it right' as leaders, policy



makers, experts and practitioners. How do we best direct and implement these programs and services in our communities? Appendix C of this document identifies many of the federal and provincial programs involved in the support and growth of Aboriginal children's early childhood development. The diagram below seeks to illustrate the context of a child and those involved and responsible for his/her growth and development.



Holistic Delivery of Early Childhood Development Programs: Practical Examples

The principle of holistic practices within early childhood care and education can also be projected upon the delivery of services and programs for young children. In this way, the delivery of services to our children can also reflect an Aboriginal philosophy and way of life. By making programs and services work together in a coordinated fashion, we can meet the needs of children and families in a more holistic manner. As illustrated in the previous diagram, Aboriginal children do not raise themselves. Rather they live in a unique context specific to their families, communities and nations. In many Aboriginal communities, programs for children that focus on children's early development are being delivered in a holistic manner. The delivery of programs and services from this holistic perspective is the outcome of complex community realities and a 'common sense' approach to service delivery. Integrated and holistic service delivery involves coordinating and streamlining programs and services so that they more effectively and efficiently meet the needs of children and their families. Examples of the manner in which specific programs have coordinated and streamlined their method of service delivery, at both the Tribal Council and community levels, can be found in Appendix 'B'.

Carole James, Director of Child and Family Services for Carrier Sekani Family Services, identifies collaborations and partnerships as cornerstones to the successful coordination of services (2002). She thus addresses the manner by which programs and services can be delivered in a holistic manner and reflect an Aboriginal philosophy and way of life. Inherent to collaborations being successful is the assumption of support from key stakeholders, and a shared vision with common goals and strategies on the part of all stakeholders. James states that partnerships



within (and between) communities begin when stakeholders are brought together as a result of common challenges and realities. Once the stakeholders come together, they work to identify challenges they face and ways to address those identified challenges. James also states that successful partnerships are built upon the following factors: 1) a history of collaboration, 2) recognition of need, 3) responsibility for the problem and the solution, 4) scarcity of resources, 5) competition for clients, 6) complex problems, 7) failure of existing efforts to address the issue, and 8) viewing collaboration as important and compelling (p. 2).

The primary considerations with regard to a holistic delivery model of early childhood development programs include the potential benefits to a community, the potential challenges a community may face in the implementation of such service delivery, and the administrative and delivery options. Other factors may include jurisdictional considerations, current community capacity, funding mechanisms, transferability, and standards of practice. Finally, when deliberating the potential benefits and challenges of implementing program and service delivery in a holistic manner, stakeholders may want to consider issues of monitoring and evaluation.



Conclusions

The importance of a child's early years cannot be underestimated. During these years the foundation of a healthy life are set. Each of these contexts, the family, the community, and the nation, are integral to a child's healthy development and education. In turn, a child becomes integral to their family, their community, and their nation. This cyclical and holistic relationship can be recognized within the provision of early development programs and it can also be recognized in the manner in which the programs are delivered.

As our Elders have told us, and as early childhood researchers have identified, it is our responsibility to look to ourselves (and those around us) to ensure our children's healthy well-being and thus their (and our own) future. As Charles Nelson, from Rousseau River, Manitoba (1992) stated:

In our history it tells us of a prophecy of the seventh fire, fire representing eras. In that prophecy, it says that in the time of the seventh fire, a new people will emerge to retrace the steps of our grandfathers, to retrieve the things that were lost but not of their own accord. There was a time in the history of Anishnabe people we nearly lost all of these things that we once had as a people, and that road narrowed ... but today we strive to remind our people of our stories once again, to pick up that work that we Anishnabe people know. It is our work and we ask no one to do that work, for it is our responsibility to maintain those teachings for our people (Report of the Royal Commission on Aboriginal Peoples, Vol. 1, 1996, pp 617-618).

It is the job before us to contemplate the words of our Elders, the research of experts in the area of early childhood development, and our own knowledge of the realities in our communities, in order to create a vision for British Columbia's Aboriginal children. The first steps in this process involve coming together to consider a number of questions that pertain to Aboriginal early childhood development.



Visioning for Our Children's Future

These questions are meant to guide you through a series of group breakout sessions during which time you will come together to have an opportunity to discuss and share your thoughts and realities with regard to early childhood development for Aboriginal children in British Columbia. This is a time of visioning – there is no singular vision that will guide us through our considerations. Many visions must come together in order to honour the diversity of our nations, our communities, our families, and perhaps most importantly, our children.

1. What is your vision for early childhood development in your community?
 - a) What kinds of experiences and outcomes do you want to see for children and families in your community?
2. What would you need to implement your vision?
 - a) Are there areas that need to be strengthened in your community's current capacity?
 - b) If yes, what might be done to address challenges?
3. Are there effective practices that exist in your community that others should know about?
 - a) What do they look like?
4. How could you make early childhood development a priority in your community?
5. How can all stakeholders work together to implement a vision of the healthy growth and development of British Columbia's Aboriginal children?



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APPENDIX A

NATIONAL CHILDREN'S AGENDA: GOVERNMENT OF CANADA

On September 11, 2000, the First Minister's signed an Early Childhood Development (ECD) Agreement. The agreement confirmed their commitment to the well-being of Canadian children and set out a vision that recognizes the role of parents and families as the primary supporters and nurturers of their children. The First Ministers identified the early years as having the potential to shape long-term outcomes of human growth and development. (First Ministers' Meeting and Communique on Early Childhood Development and Federal/Provincial/Territorial Early Childhood Development, 2000). They agreed to:

- promote early childhood development (ECD) so that, to their fullest potential, children will be physically and emotionally healthy, safe and secure, ready to learn, and socially engaged and responsible; and
- help children reach their potential and to help families support their children within strong communities. (News Release, First Ministers Meeting Communique on Early Childhood Development, September 11, 2000)

To implement these objectives the First Ministers agreed on four key areas of action:

- pregnancy, birth and infancy;
- parenting and family supports;
- early childhood development, learning and care; and
- community supports.

Further, the First Ministers agreed to build on current investments in the provinces and territories, and that funding would be incremental, predictable and sustainable over the long term. A federal commitment of 2.2 billion dollars, transferred through the Canada Health and Social Transfer (CHST) over five years, was made to the provinces and territories. Funding is to flow according to the following profile: 2001/02 - \$300M; 2002/03 - \$400M; 2003/04 - \$500M; 2004/05 - \$500M; 2005/06.

While Aboriginal peoples were conspicuously left out to the funding profile governments did agree to work with Aboriginal peoples of Canada in finding practical solutions for addressing the developmental needs of Aboriginal children. A federal strategy for Aboriginal children, announced in December, 2001, is to provide \$320 million dollars over five years. Like the provincial territorial strategy, Aboriginal funds are to build upon existing programs and services for First Nations and Aboriginal children. Specifically funding is to be used to enhance the existing Aboriginal Head Start Program, the First Nations and Inuit Child Care Initiative, to address FASD in First Nations and Aboriginal communities and to support the development of a national network of early childhood educators.

Another part of the First Ministers' agreement was a commitment to report annually to Canadians on their investments and progress in enhancing programs and services in the action areas mentioned earlier. To undertake this reporting they agreed to develop a shared framework, including jointly comparable indicators to permit each government to report on progress. The First Ministers also agreed to work together when appropriate, on research and knowledge sharing relating to ECD, effective practices and improvement of child outcomes.

On June 12, 2002, the ECD Sub-Committee called for an overhaul of federal government's First Nation ECD programming. In their report, "Building on Success", government is urged to change the manner in which it is administering programs for First Nation families and young children living on reserves by streamlining federal funding and enhancing accountability by flowing ECD funding through one envelope. There is also a call for a focus on a coherent set of ECD services starting with the establishment of community-based, universally acceptable ECD demonstration projects in selected First Nations across the country.

The report, "Building on Success", is based on findings with representatives of First Nations bands and communities, federal departments and experts in ECD and native leaders from across Canada. The report considers the conditions of First Nations children from the prenatal period to age six living on reserve and is the first of four phases of the Sub-Committee's study of Aboriginal children from the prenatal period to age 12 living on and off-reserve. Combining this with the Senate Aboriginal People's Committee current study of urban Aboriginal youth aged 16-24, the studies profile the challenges facing Aboriginal children and youth and steps needed to improve their quality of life. A list of recommendations include all federal departments with programs for First Nations families and young children living on reserves join together to create an integrate policy framework for the development of young First Nations children 0-6. The framework includes a common vision for the results required and includes lines of accountability (see Appendix for List of Recommendations).

In November, 2002, the Government of Canada Reports on ECD through two reports jointly released by Human Resources Development Canada, Health Canada and Department of Indian Affairs. These reports focus on documenting progress made by the Government of Canada's commitment to helping young Canadian children get a start in life. The first report, "Early Childhood Development Activities and Expenditures: Government of Canada Report 2001-02", provides update on expenditures since implementation in September 2000, of the Federal/Provincial/Territorial Early Childhood Development (ECD) Agreement. The second report, "Well-Being of Canada's Young Children: Government of Canada Report 2002" presents national level data on young children and their families. (These reports are available on the internet at www.socialunion.gc.ca).

There were gaps in the collection of data on Aboriginal children and children with disabilities for inclusion the "Early Childhood Development Activities and Expenditures: Government of Canada Report 2001-02" and "Well-Being of Canada's Young Children: Government of Canada Report 2002" reports. Despite these gaps, chapter 6 of the latter report focuses on dedicated services and activities for First Nations and other Aboriginal children and families. Services and activities at a glance include: 1) Health Canada Programs: Aboriginal Head Start in Urban and Northern Communities; Brighter Futures; and First Nations Head Start On-reserve; 2) Human Resources Development Canada Programs: First Nations and Inuit Child Care Initiative; 3) Indian and Northern Affairs Canada Program: Child/Day Care Program (Alta and Ont.); elementary education :junior kindergarten and kindergarten; First Nations Child and Family Services Head Start(NB); and First Nations National Child Benefit Reinvestment. Included in the report are new initiatives such as: evaluation of Aboriginal Urban Head Start programs; program improvements to on-reserve Head Start programs; and program improvements to First Nations and Inuit Child Care Initiatives.

Also found in Chapter 6 of the “Well-Being of Canada's Young Children: Government of Canada Report 2002” report, BC announces priority areas as: 1) childcare support; 2) urban Aboriginal early intervention (“RFP for Urban Aboriginal ECD Strategy targeted at 19 communities”) and 3) other supports for ECD including the development of a longitudinal research survey of Aboriginal children.

In British Columbia there has been a shift to regional governance models which include a reference to building capacity in Aboriginal communities. Planning for this Transfer of Responsibility for the Jurisdiction of Aboriginal Child and Family Services to Aboriginal People included the signing on September 9, 2002 of a Memorandum of Understanding (MOU) between provincial government and Aboriginal leaders of BC. The MOU establishes a 14-member committee, representing all major Aboriginal organizations and provincial government, which will enable aboriginal communities and the provincial government to work collaboratively to improve the safety and well-being of aboriginal children and families. The purpose of the MOU is to establish common dialogue and a decision-making process for addressing general and systemic issues. The goal is to reduce the number of Aboriginal children in care, to return Aboriginal children to their communities, where it is appropriate to do so, and other topics as agreed upon. A copy of MOU may found on the internet at <http://www.mcf.gov.bc.ca>.

The MOU is a huge step forward in our relationship with Aboriginal community and marks real and exciting progress toward the achievement of Strategic Shift #4: “Building capacity within Aboriginal communities to deliver a wide range of services with an emphasis on ECD and development.” Some of current realities within this strategy include the need for: 1) resources, 2) community mobilization, 3) focused strategies, and 4) a range of prevention services.

APPENDIX B

INTEGRATED SERVICES

**Developed by
Carole James, Director of Child and Family Services,
Carrier Sekani Family Services**

BACKGROUND

Integrated services can range from simply bringing together groups to share information and learn what each other are doing, to bringing together groups to set a common vision, goals, and working together to achieve that.

Agencies moving to integrated services may take a systems approach in which agencies work to create new services and develop new service delivery structures OR a service oriented approach, where agencies try to link clients to services while maintaining their own structures.

Service integration can achieve several goals:

- Ease for clients in accessing services through a single point of entry (e.g. one stop access centers, multiple services co-located)
- Increase access to services for clients
- Minimize duplication
- Potential for financial and human resource savings
- Agencies may specialize in particular areas and pool and share expertise
- Improve capacity to plan and develop comprehensive strategies
- Shared responsibility for complex problems can provide an environment for creativity
- Increase support and advocacy for the clients served
- Organized, coordinated community support programs and strategies can increase life style changes, increasing and strengthening health in communities. The most effective programs include several programs and services.
- Support Carrier Sekani culture and traditions
- Address community needs in a holistic approach
- Stretch existing resources
- More community involvement and participation
- Ability to act with a proactive approach

Challenges to integrated services include:

- Turf-protection
- Different philosophies and visions
- Incompatible information management systems,

- Different eligibility requirements for clients to be served,
- Time necessary to establish and maintain
- Skilled staff required to manage partnerships, and to work with diverse groups and organizations.
- Shortage of healthy caregivers
- Lack of cultural and traditional understanding and sensitivity
- Lack of qualified services for specialized programs

In order for integrated services to be successful, collaborations and partnerships must be built. Key characteristics for successful collaboration include support from key stakeholders and a common vision, goals and strategies.

Partnerships begin when factors in the environment bring together a group to identify and describe the community, identify and describe the issues, identify and describe the resources and needs related to the issues, and involve the community in implementation.

The most frequent factors cited in successful partnerships include:

- History of collaboration within the community
- Recognition of mutual need or purpose and shared responsibility for the problem as well as the solution
- Scarcity of resources, economic insecurity amongst members, and competition for clients.
- Problem complexity
- Failure of existing efforts to address the problem
- Viewing the collaboration as compelling and attaching positive attitudes, expectations and value to collaboration
- Common vision and goals
- Recognition of cultural and traditional family structures

Failure to define a common mission, goals and objectives are among the most commonly reported obstacles to partnership development. Lack of resources and cultural differences are also raised. The importance of citizen participation in defining the problem, establishing priorities, and shaping the mission, as well as implementing activities and retaining control over what happens in the community is emphasized by many.

Partnerships must go beyond information sharing and move to community empowerment and capacity building. David Osborne and Peter Prastrick speak about their lessons learned regarding this work in their book “The Reinventor’s Fieldbook: Tools for Transforming your Government.”

- Governments that wish to empower communities or strengthen community capacity must build trust first
- Communities require accurate data about the issues in their community and any evidence-based services available to address them

- Successful community capacity-building takes time and patience
- Train and support employees to prepare them to work with community groups
- Ensure that community consultation includes grassroots and non-traditional groups
- Help community entities to develop accountability mechanisms from the outset
- Allow for variation at the community delivery level

In the early stages of consensus building and building partnerships several techniques can be helpful for building consensus:

- Focus on the importance of the problem rather than the specific solutions.
- Focus on on-going discussions
- Hear and respect all points of view
- Acknowledge differences will occur and address them openly
- Document accomplishments
- Develop an environment of trust and respect

Creation of an action and implementation plan is critical to effective partnerships.

Plans may include:

- Specific objectives for community change
- Action steps to effect those changes
- Evidence that the partners support the plan
- Maximized ownership at the committee, organization, and/or community level
- Ensuring communities have qualified, accredited individuals to meet the community objectives

Implementation considerations include:

- Sufficient resources and support
- Support for community including training, professional development, conferences, workshops, information bulletins, newsletters, resource directories, etc.
- Key staff who are accepted by the community
- Leadership
- Technical assistance
- Monitoring and evaluation
- On-going planning
- Need for more staffing at the local and regional level
- Possible reorganization and changes for existing staff

COMMUNITY DEVELOPMENT IN FIRST NATIONS COMMUNITIES

BACKGROUND

Community development within First Nations communities has many similarities to community development within other non-native communities.

Community development is a process or way of working with people, in which they are participants in both their own self-development and the development of their communities. Community members are directly involved in taking action to address issues and concerns of interest to them and most importantly, directly involved in taking control of those issues affecting their lives. (Empowerment) Empowerment is a key component of community development in First Nations ideology of community development.

It is also stressed throughout the various examples of community development that every effort be made to include all segments of the community. Within First Nations communities, a particular focus on the elders and links to youth are seen as critical to success.

In the past, First Nations communities had elder councils, family systems, and the clan system governed by the potlatch. Issues/concerns were brought forward for discussion and eventual resolution. Decisions affecting the communities were made only after considerable debate and discussion and were often done through consensus.

Throughout the literature, there are two dominant themes that emerge with regards to community development in First Nations communities:

1. Relatedness. Every issue/concern or problem is in some way formulated to each other and as such, requires a multi-disciplinary, multi-sectored approach to its resolution.
2. Culture is intrinsic in healing. Traditional First Nations values, culture, and spirituality must be incorporated into any community development initiative.

Throughout the literature, the concept of the “Medicine Wheel Teachings” was also a predominant theme. Within Carrier communities, the Potlatch is the source of these teachings. The medicine wheel symbolizes a uniquely Aboriginal view on life; that all living things are connected and exist in balance. The holistic approach is sometimes stated as the four quadrants: Emotional, Physical, Spiritual and Intellectual, and the teachings sometimes stated as Sharing, Kindness, Humility, Trust, Respect, Wisdom, and Love.

These teachings are common to all First Nations people, regardless of the symbols or cultural idioms used to express these beliefs.

Health and wellness are described by Aboriginal people in a holistic way, often as a circle within which there is balance and harmony of inner and external forces. The inner forces often refer to the four quadrants of the medicine wheel, while the external forces combine the social, cultural, economical and political environments of a person.

Theresa Meuse, a community health coordinator for Bear River First Nations identified the four components of Aboriginal wellness to the Standing Committee on Health in 1995:

“The mental component includes positive thinking, good judgment, exploring creativity, maintaining self-respect, and understanding one’s emotions. The physical component includes respecting our bodies, practicing routine exercise, maintaining stress levels and choosing healthy foods. The spiritual component includes the learning and practice of having faith and believing in a higher power and being respectful and thankful to the higher power for all things. The environmental component includes respect for all land, water, human animal life and air.”

Community Development within First Nations Communities: Five Underlying Principles:

1. Community Development must be developed from within the communities who desire change and must be largely directed from those people wanting change.
2. Vision (goal) is an intrinsic part of community development. Without a clear vision there is little hope of healing and developing.
3. Development of the individual and the development of their families and community go hand in hand.
4. Life learning is required.
5. Reconciliation (reconciling past?)

A large part of First Nations Community Development rests with the elders. Without their support, it is unlikely that any plan would be successful.

AN ACTION PLAN FOR INTEGRATED SERVICES AND COMMUNITY DEVELOPMENT

In reviewing the research and literature on successful integrated services, a number of key words and direction were common throughout.

These included:

- Community development/empowerment
- Common vision/goals/objectives
- Working and learning together
- A view to “how do we make this happen,” rather than “it can’t be done.”

- Best interests of the client/community/individual
- A belief in and respect for the knowledge and strength of the individual and community
- Willingness to take risks
- Leadership
- Collaboration and direct and continuing partnership with community
- Building trust and respect

In developing our action plan for Carrier Sekani Integrated Services, we have based our plan on what we see as three critical components for successful integrated services:

- Community development/empowerment and partnership
- Carrier Sekani Family Services organization focused to support community vision
- Carrier values, traditions, and culture are central to our work

GOAL

Carrier Sekani Family Services will develop and implement integrated services that are community based and reflective of our culture and values, in order to support the health and well being of our children, families, and communities.

PRINCIPLES

1. Resources and services belong to the communities.
2. CSFS is responsible and accountable for providing available resources and service delivery in the best way possible to meet the community's needs.
3. The community has a collective responsibility to be involved in the planning of their services.
4. Every challenge is a learning opportunity
5. Each individual within CSFS contributes to serving the needs of our communities
6. Healthy organizations include healthy staff and CSFS is committed to supporting and encouraging our staff in their personal development, growth, and learning
7. CSFS believes in and respects the knowledge and strength of each individual and community
8. CSFS is a learning organization. We believe in learning and working together

OBJECTIVES

1. Develop a Community Vision for child and family services for each community served by CSFS
2. Establish an implementation plan to support each Community Vision
3. Develop integrated community profiles to support resource and service delivery

4. Develop and implement an integrated case management system and organize CSFS staff, services, and work plans to support community vision

N'ZEN'MAN CHILD AND FAMILY DEVELOPMENT CENTRE SOCIETY

In 1993, four bands of the Nihakampmx Nation: Lytton First Nation, Skuppah, Nicomen, and Kanaka Bar Bands, supported the establishment and incorporation of the N'zen'man Child and Family Development Centre Society. The purpose of this society is to develop and deliver a wide range of child and family development programs.

Programs and Services

Since its inception, the N'zen'man Child and Family Development Centre Society has been successfully implementing many programs and services including:

- **Child Care Centre** - this licensed 43 space centre provides care programs for Infants and Toddlers, Three to Five Year Olds and Out of School Care.
- **Home Portage Program for Three to Five Year Olds** - is a family centred home visiting program designed to enhance parent/child interaction with a focus on creating awareness of child development and how it can be enhanced and supported within a home environment.
- **Infant Development Program/Growing: Birth to Three** - is a family centred home visiting program designed to enhance parent/child interaction and create and further awareness of child development and how it can be enhanced and supported within a home environment.
- **Mother Goose** - is a weekly drop-in program offered to all families with children ages 0-3 years. Families and children have the opportunity to sing songs, interact, and promote positive parent/child interaction and promote early literacy development.
- **Prenatal Outreach** - is a family centred home visitation program targeted to families who are expecting. Many areas are addressed within this program including: FAS/FAE awareness, nutritional support, pre and post natal education, weekly drop-in, cultural activities, breastfeeding support, and doula services.
- **Family Place** - is a facility that offers a variety of resources and informal child and family support programs such as drop-in Mother Goose, prenatal drop-in, and library.

Internal and External Program Linkages

There are many internal and external linkages created between programs offered by the society. One of the most important links is funding. This coordination of funds also promotes program linkages that enhance the ability of each program in meeting the unique and diverse needs of the communities= children and families.

Internal Linkages

Programs are designed to dove-tail with each other so that the early childhood services are provided in a consistent and stable manner. For example,

For families who choose home visit programs:

Prenatal Outreach >>>>>> Infant Development >>>>>> Home Portage
(Conception) (Birth to 3 years) (Three to Five years)

For families who choose centre based programs:

Infant and Toddler >>>>>> Three to Fives >>>>>>>> Out of School
(3 mos - 36 mos) (36 mos - 5 years) (6 yrs - 11 yrs)

Families may also choose to mix and match programs, for example, a family may choose to participate in the prenatal outreach program and then enter their child into the Infant and Toddler centre based program.. Parents are not locked into either stream of service delivery.

External Linkages

We have established many external linkages and working relationships with other Aboriginal and non-Aboriginal service organizations such as:

- Provincial Infant Development Program
- Speech and Language Pathologists
- Dental Therapists
- Health Canada
- Community Health Nurses and Representatives
- Ministry of Health, Licensing
- Ministry of Children and Families
- Nlha'kampx Child and Family Services
- Local Public and Independent Schools
- Nutritionists

LE'LUM'UY'L (TAKING CARE OF OTHERS) CHILD DEVELOPMENT CENTRE- COWICHAN TRIBES

The Le'lum'uy'l Child Development Centre is under the auspices of the Cowichan Tribes= Chief and Council. Set within the Education Department the centre=s activities are guided by Elders' committees.

Programs and Services

The Le'lum'uy'l Child Development Centre offers several programs and services to Cowichan Tribe members including:

- **Infant Development Program (IDP)**
- **Mother's Morning Out Program**
- **Healthy Babies Program**
- **Day Care Program** (includes a Mother Goose Program, Infant Stimulation Program and Parenting Programs)
- **Kindergarten Program**
- **Preschool Program**

In addition, to these programs Cowichan Tribes has its own mandated Health Authority that provides services directly to the children as does the Tribe's Social Services Program. The following paragraphs describe how a new mother might access early childhood services in Cowichan.

As soon a woman finds out she is pregnant she is referred to the Infant Development Program where she would learn about healthy eating habits, infant prenatal development and parenting. At each of these regular meetings she is given a specific food to help her maintain healthy nutrition, for example, fish, eggs, milk etc.

The expectant mother is also invited to the Infant Development Program three time per week and to the Mother's Morning Out Program held twice a week. Transportation is provided for both these programs.

Once the baby is born, the hospital calls the Infant Development Program and an infant development worker visits Mom while she is still in the hospital. The worker continues to visit Mom after she arrives home. This may be weekly or more often depending on Mom's needs. When she is ready Mom will start attending the programs she attended while she was pregnant with her new baby. The Mom's Morning Out Program is there to make sure Mom is aware of immunizations for her baby along with the ages and stages of her new babies development. The Infant Development Program focuses on nutrition for the baby including breast feeding, introducing solid foods etc. Mom may also be introduced to the Day Care and its services. Often times the Day Care, Infant

Development, Health and Social Services programs may working together to meet the needs of families. Consideration for the whole child and his or her family and a view of the day care as a partner with parents in the healthy development of their children is evident in both the delivery and development of the day care program. For example, in addition to the children=s program the day care provides infant stimulation, models appropriate parenting behaviours, teaches budgeting and menu planning, and shares cooking ideas with parents while building on the existing strengths of children and families attending it. The day care may also be called upon to provide supervised visits between parents and children being re-introduced.

Literacy for both parents and children is promoted by having students, attending the Adult Basic Education Program, read to the children on a daily basis. Parents are encouraged to take books home for their children and read to them. They are also support parents by setting up appointments for them, assisting them with job applications, filling out forms and helping with homework.

Following day care children may attend the Tribe=s preschool and kindergarten. Similar philosophies and supports to parents and children are provided by these programs. Once children reach grade one they attend the public school system . However by 2004 the children will be able to attend a band school. The Tribe provides a student advisor to support children and families along with science camps, summer day camps, and other educational activities in the summer. The day care also remains open year round.

Currently, negotiations are underway for the Infant Development Program and the day care to amalgamate in one location. In doing so, the programs will be able to provide services to more children and families then they did independently. The programs will retain their own mandates while working together in enhancing each other. Administrative details are still being worked out.

APPENDIX C

EARLY CHILDHOOD DEVELOPMENT INTERDEPARTMENTAL LISTING OF PROGRAMS AND SERVICES

Name of First Nation	Band No. (INAC)	Isolation Zone (INAC)	Pop 0 - 6 Dec 3/01 INAC data	AHRDA Name (HRDC)	NCB Allocation (INAC) 0-18 years	HEADSTART Allocation (HC) 0 - 6 years	FNICC Allocation (HRDC) 0 - 6 years	K 4 - 2 FTE's (INAC)
Adams Lake	684	2	62	CIPAHRD	xxx	xxx	xxx	xxx
Ahousaht	659	4	138	N&W Coast	xxx		xxx	See NTC.
Aitchelitz	558	1	9	SNHRD	xxx			
Alexandria	709	2	7	CCATEC	xxx			
Alexis Creek	710	2	44	CCATEC	xxx			xxx
Ashcroft	685	2	4	CIPAHRD	xxx			
Beecher Bay	640	1	14	S. VAN ISL	xxx			
Blueberry River	547	2	46	NENAS	N/A			xxx
Bonaparte	686	2	29	CIPAHRD	xxx			xxx
Boothroyd	700	2	18	CIPAHRD	xxx	Spuzzum		
Boston Bar	701	2	15	CIPAHRD	N/A	Spuzzum		
Bridge River	590	2	30	CIPAHRD	xxx			
Burns Lake	619	2	10	PGNAETA	N/A			
Burrard	549	1	25	FNES	xxx			
Campbell River	622	1	49	N&W Coast	xxx			xxx
Canim Lake	713	2	33	CCATEC	xxx	xxx	xxx	xxx
Canoe Creek	723	2	24	CCATEC	xxx	xxx	xxx	xxx
Cape Mudge	623	1	31	N&W Coast	xxx	xxx	xxx	xxx
Cayoos Bay	591	2	9	CIPAHRD	xxx			
Chawathil	583	1	49	SNHRD	xxx			
Cheam	584	1	43	SNHRD	N/A			
Chehalis	559	1	50	SNHRD	N/A	xxx	xxx	xxx
Chemainus	641	1	89	S. VAN ISL	xxx	xxx	xxx	xxx
Cheslatta	620	2	21	PGNAETA	N/A			
Coldwater	693	1	46	CIPAHRD	xxx	xxx		xxx
Columbia Lake	604	2	21	OKAMS	xxx		xxx	xxx
Comox	624	1	13	N&W Coast	N/A			
Cooks Ferry	694	2	13	CIPAHRD	xxx			
Cowichan	642	1	345	S. VAN ISL	xxx		xxx	xxx
Da-naxda'xw FN	635	3	9	N&W Coast	Whe-la-la- u			
Ditidaht	662	2	58	N&W Coast	NTC	xxx	xxx	See NTC.
Doig River	548	2	17	NENAS	xxx			
Douglas	561	4	10	SNHRD	xxx			
Ehattesaht	634	4	25	N&W Coast	NTC		xxx	

Esketemc	711	2	41	CCATEC	xxx	xxx	xxx	xxx
Esquimalt	644	1	30	S. VAN ISL	xxx			
Fort Nelson FN	543	1	58	NENAS	xxx	xxx	xxx	xxx
Fountain	592	2	51	CIPAHRD	xxx			xxx
Gingolx	671	4	108	SKEENA	Nisga'a			
Gitanmaax	531	2	138	SKEENA	G.T.C.			xxx
Gitanyow	537	2	54	SKEENA	G.T.C.			xxx
Gitksan T.C.	1116			SKEENA	xxx			
Gitlakdamix	677	2	96	SKEENA	Nisga'a	xxx		
Gitsegukla	535	2	64	SKEENA	xxx	xxx		xxx
Gitwangak	536	2	52	SKEENA	G.T.C.	xxx	xxx	xxx
Gitwinksihlkw	679	4	14	SKEENA	Nisga'a	xxx	xxx	
Glen Vowell	533	2	32	SKEENA	G.T.C.			xxx
Gwa'Sala-Nakwaxda'xw	724	1	79	N&W Coast	xxx			xxx
Gwawaenuk Tribe	627	4	6	N&W Coast	xxx			
Hagwilget Village	534	2	36	SKEENA	xxx			
Halalt	645	1	11	S. VAN ISL	xxx			
Halfway River	546	2	20	NENAS	xxx			xxx
Hartley Bay	675	4	41	SKEENA	xxx			xxx
Heiltsuk	538	4	119	SNHRD	xxx	xxx		xxx
Hesquiaht	661	4	38	N&W Coast	N.T.C	xxx		See NTC
High Bar	703	2	4	CIPAHRD	N/A			
Homalco	552	1	35	FNES	xxx			xxx
Huu-ay-aht FN	663	2	42	S. VAN ISL	N.T.C.		xxx	
Huupaasath	664	1	14	N&W Coast	N.T.C.			
Iskut	683	3	54	SKEENA		xxx		xxx
Ishxowhamel (Ohamil)	587	1	20	SNHRD	Sto:lo			
Ka:'yu:k't'h'/Che:k:tl'es7et'h' FN	638	4	41	S. VAN ISL	N.T.C.			See NTC
Kamloops	688	1	81	CIPAHRD	xxx		xxx	xxx
Kanaka Bar	704	2	13	CIPAHRD	xxx	Nzenman		
Katzie	563	1	29	SNHRD	xxx			
Kispiox	532	2	101	SKEENA	G.T.C.	xxx		xxx
Kitasoo	540	4	25	SNHRD	xxx	xxx	xxx	xxx
Kitamaat	676	1	80	SKEENA	xxx			xxx
Kitkatla	672	4	139	SKEENA	xxx			xxx
Kitselas	680	1	14	SKEENA	xxx	xxx		
Kitsumkalum	681	1	28	SKEENA	xxx	xxx		
Klahoose	553	4	11	FNES	xxx	xxx	xxx	
Kluskus	721	4	9	CCATEC	xxx			xxx
Kwadacha	610	4	26	PGNAETA	xxx		xxx	xxx
Kwakiutl	626	1	37	N&W Coast	xxx	xxx	xxx	xxx
Kwantlen FN	564	1	12	SNHRD	xxx	Sto:lo		
Kwaw-kwaw-apilt	580	1	6	SNHRD	Sto:lo	Sto:lo		
Kwiakah	628	3	2	N&W Coast	N/A			

Kwicksutain euk -ah-kwaw-ah-mish	625	4	7	N&W Coast	xxx			
Kwikwetlem (Coquitlam)	560	1	5	SNHRD	xxx			
Lakahahmen	579	1	13	SNHRD	Sto:lo	Sto:lo		
Lakalzap	678	2	68	SKEENA	Nisga'a		xxx	.
Lake Babine	607	2	160	PGNAETA			xxx	xxx
Lake Cowichan	643	1	1	S. VAN ISL	xxx			
Lak-kw'alaams	674	4	178	SKEENA	xxx		xxx	xxx
Lheidli T'enneh	611	1	18	PGNAETA	N/A			
Little Shuswap	689	2	20	CIPAHRD	N/A		xxx	
Lower Kootenay	606	2	15	OKAMS	xxx			xxx
Lower Nicola	695	1	64	CIPAHRD	N/A	xxx	xxx	xxx
Lower Post (Yukon)	502	4	?	NENAS	N/A	xxx	xxx	
Lower Similkameen	598	1	20	OKAMS	xxx	xxx		xxx
Lyackson	646	1	10	S. VAN ISL	T.G.O			
Lytton	705	2	82	CIPAHRD	xxx	Nzenman		xxx
Malahat	647	1	20	S. VAN ISL	N/A			
Mamalilikulla-Que'Qwa'Sot'Em	629	3	28	N&W Coast	Whe-la-la-u			
Matsqui	565	1	15	SNHRD	Sto:lo	Sto:lo		
McLeod Lake	618	2	22	PGNAETA	xxx			
Metlakatla	673	4	50	SKEENA	xxx	xxx		
Moricetown	530	1	132	SKEENA	xxx	xxx		xxx
Mowachaht/Muchalaht	630	2	45	N&W Coast	N.T.C.			See NTC
Mt. Currie	557	2	146	FNES	xxx		xxx	xxx
Musqueam	550	1	98	FNES	xxx		xxx	xxx
Nadleh Whuten	612	2	28	PGNAETA	xxx			xxx
Nak'azdli	614	2	93	PGNAETA	xxx		xxx	xxx
Namgis FN	631	3	84	N&W Coast	xxx	xxx	xxx	xxx
Nanoose	649	1	11	S. VAN ISL	xxx	xxx		
Nazko	720	2	20	CCATEC	xxx			
Nee Tah Buhn	726	2	5	PGNAETA	xxx			
Neskonlith	690	2	25	CIPAHRD	xxx		xxx	xxx
New Westminster	566	1			N/A			
Nicomien	696	2	6	CIPAHRD	xxx	Nzenman	xxx	
Nisga'a					xxx			
Nooaitch	699	1	8	CIPAHRD	xxx			
North Thompson	691	2	38	CIPAHRD	xxx	xxx	xxx	xxx
N'quatqua	556		18	FNES	N.T.C.			
Nuuchatlaht	639	4	16	N&W Coast	N.T.C.			
Nuu-Chah-Nulth T.C. (13 bands)				N&W Coast	xxx			xxx
Nuxalk	539	3	90	SNHRD	xxx		xxx	xxx
Nzenman Birdsnest Society				SNHRD	N/A	xxx		
Okanagan	616	1	93	OKAMS	xxx	xxx	xxx	xxx
Old Masset	669	4	136	SKEENA	xxx		xxx	xxx

Oregon Jack Creek	692	2		CIPAHRD	xxx			
Osoyoos	596	1	36	OKAMS	xxx	xxx	xxx	xxx
Oweekeno	541	4	10	SNHRD	xxx			
Pacheedaht	658	2	18	S. VAN ISL	xxx			
Pauquachin	652	1	30	S. VAN ISL	xxx			
Pavilion	594	2	33	CIPAHRD	xxx	xxx	xxx	xxx
Penelakut	650	4	46	S. VAN ISL	xxx	xxx	xxx	xxx
Penticton	597	1	69	OKAMS	xxx	xxx		xxx
Peters	586	1	2	SNHRD	xxx			
Popkum	585	1	1	SNHRD	Sto:lo			
Prophet River (Dene Tsa)	544	2	17	NENAS	xxx			xxx
Qualicum	651	2	7	S. VAN ISL	xxx			
Quatsino	633	1	42	N&W Coast	xxx			
Red Bluff	715	1	4	CCATEC	xxx			
Saik'uz FN	615	2	41	PGNAETA	xxx		xxx	xxx
Samahquam	567	4	13	SNHRD	xxx			
Salteau FN	542	2	53	NENAS	N/A	xxx		xxx
Scowlitz	568	1	8	SNHRD	xxx	Sto:lo		
Seabird Island	581	1	51	SNHRD	xxx	xxx	xxx	xxx
Sechelt	551	1	69	FNES	xxx	xxx	xxx	
Semiahmoo	569	1	5	SNHRD	xxx			
Seton Lake	595	2	35	CIPAHRD	xxx			xxx
Shackan	698	1	10	CIPAHRD	xxx			
Shuswap	605	2	13	OKAMS	xxx			
Siska	706	2	12	CIPAHRD	xxx			
Skatin Nations (Skookumchuk)	562	4	10	SNHRD	xxx			xxx
Skawahlook FN	582	1	3	SNHRD	Sto:lo			
Skeetchestn	687	2	28	CIPAHRD	xxx		xxx	xxx
Skidegate	670	4	87	SKEENA	xxx	xxx	xxx	xxx
Skin Tyee	729	2	19	PGNAETA	xxx			
Skowkale	571	1	12	SNHRD	Sto:lo	Sto:lo		
Skuppah	707	2	12	CIPAHRD	xxx	Nzenman		
Skwah	573	1	22	SNHRD	xxx			xxx
Skway	570	1	9	SNHRD	Sto:lo	Sto:lo		
Sliammon	554	1	49	FNES	N/A	xxx	xxx	xxx
Snuneymuxw (Nanaimo)	648	1	103	S. VAN ISL	xxx	xxx	xxx	xxx
Soda Creek	716		21	CCATEC	N/A			
Songhees	656	1	33	S. VAN ISL	xxx			xxx
Soowahlie	572	1	23	SNHRD	Sto:lo	Sto:lo	xxx	
Spallumcheen	600	1	47	CIPAHRD	xxx	xxx	xxx	xxx
Spuzzum	708	2	8	SNHRD	xxx	xxx		
Squamish	555	1	272	FNES	xxx		xxx	xxx
Squiala FN	574	1	10	SNHRD	Sto:lo			
St. Mary's	602	1	19	OKAMS	xxx		xxx	xxx

Stellat'en FN	613	2	23	PGNAETA	N/A			
Sto:Lo	1126	1		SNHRD	xxx	xxx		
Stone	717	2	39	CCATEC	xxx		xxx	xxx
Sumas	578	1	12	SNHRD	xxx	xxx		
Tahltn	682	3	67	SKEENA	xxx			
Takla Lake	608	4	41	PGNAETA	xxx			xxx
Tit'q'et	593	2	23	CIPAHRD	xxx	xxx	xxx	xxx
Tla-o-qui-aht	660	4	48	N&W Coast	N.T.C.	xxx	xxx	
Tlatasikwala	632	3	7	N&W Coast	Whe-la-la-u			
Tl'azt'en	617	2	137	PGNAETA	xxx	xxx	xxx	xxx
Tl'etinqox-t'in Gvmt Office	712	2	97	CCATEC	xxx			xxx
Tlowitsis Tribe	637	3	23	N&W Coast	Whe-la-la-u			
Tobacco Plains	603	2	5	OKAMS	xxx			
Toosey	718	2	21	CCATEC	xxx			
Toquaht	666	2	11	N&W Coast	N.T.C.			
Tsartlip	653	1	48	S. VAN ISL	xxx			xxx
Tsawwassen	577	1	19	FNES	xxx		xxx	xxx
Tsawataineuk (Kingcome Inlet)	636	4	27	N&W Coast	xxx			xxx
Tsawout	654	1	50	S. VAN ISL	xxx			
Tsay Keh Dene	609	4	21	PGNAETA	N/A			xxx
Tsashaht	665	1	53	N&W Coast	N.T.C.	xxx		See NTC
Tseycum	655	1	2	S. VAN ISL	xxx			
Tsouke	657		12	S. VAN ISL	xxx			
Tzeachten	575	1	18	SNHRD	Sto:lo			
Uchucklesaht	667	4	9	N&W Coast	N.T.C.			
Ucluelet	668	2	41	N&W Coast	N.T.C.		xxx	
Ulkatcho	722	3	73	CCATEC	xxx			xxx
Union Bar	588	1	3	SNHRD	xxx			
Upper Nicola	697	2	42	CIPAHRD	xxx	xxx	xxx	xxx
Upper Similkameen	599	2	2	OKAMS	xxx			
West Moberly	545	2	8	NENAS	xxx			
Westbank FN	601	1	41	OKAMS	xxx			xxx
Wet'suwet'un FN	725	2	17	SKEENA	xxx			
Whe-la-la-u Council T.C.	1007	3		N&W Coast	xxx			
Whispering Pines/Clinton	702	2	7	CIPAHRD	xxx			
Williams Lake	719	1	30	CCATEC	xxx			
Xeni Gwet'in FN	714	3	24	CCATEC	N/A		xxx	
Yakwekwioose	576	1	10	SNHRD	Sto:lo	Sto:lo		
Yale FN	589	1	8	SNHRD	xxx			
Yekooche	728	2	15	PGNAETA	xxx	xxx		
			7751					