



October 2013

Aboriginal Perspectives on Social-Emotional Competence in Early Childhood

Melissa Tremblay

University of Alberta, mkd@ualberta.ca

Rebecca Gokiert

University of Alberta

Rebecca Georgis

University of Alberta

Karen Edwards

University of Alberta

Berna Skrypnek

Follow this and additional works at: <https://ir.lib.uwo.ca/iipj>

 Part of the [Child Psychology Commons](#), [Community-Based Research Commons](#), [Multicultural Psychology Commons](#), and the [Social Psychology Commons](#)

Recommended Citation

Tremblay, M., Gokiert, R., Georgis, R., Edwards, K., Skrypnek, B. (2013). Aboriginal Perspectives on Social-Emotional Competence in Early Childhood. *The International Indigenous Policy Journal*, 4(4). Retrieved from: <https://ir.lib.uwo.ca/iipj/vol4/iss4/2>

DOI: 10.18584/iipj.2013.4.4.2

Aboriginal Perspectives on Social-Emotional Competence in Early Childhood

Abstract

Gaining an understanding of how best to support the development of Aboriginal children is important in promoting positive social, emotional, educational, and health outcomes. The purpose of the current study was to identify the most important elements of healthy development for Aboriginal children, with a particular focus on social-emotional development. Focus groups were conducted with 37 Aboriginal Canadians, including parents, service providers, adolescents, and young adults. Five inter-connected themes emerged: cultural wellness, emotional wellness, mental wellness, social wellness, and strong identity, with strong identity described as central and foundational to the other themes. This study strengthens the assertion that Aboriginal children require an additional set of social-emotional skills to successfully navigate different cultural contexts during development. Implications for research and practice are discussed.

Keywords

early childhood, social-emotional development, Indigenous, Aboriginal

Creative Commons License



This work is licensed under a [Creative Commons Attribution-Noncommercial-No Derivative Works 4.0 License](https://creativecommons.org/licenses/by-nc-nd/4.0/).

Aboriginal Perspectives on Social-Emotional Competence in Early Childhood

Recently, the social-emotional competence of young children has gained increasing attention from researchers and educators. Social-emotional competencies have been defined to include behavioural and emotional regulation, understanding emotions, showing self and social awareness, social problem solving, as well as relationship skills (Denham, 2005; McCabe & Altamura, 2011). The development of social-emotional competencies during early childhood can significantly impact outcomes in the areas of learning and academic success, mental health, and general wellbeing (Peth-Pierce, 2000; Rhoades, Warren, Domitrovich, & Greenberg, 2011; Shonkoff & Phillips, 2000; Zins, Bloodworth, Weissberg, & Walberg, 2004).

For Aboriginal children in Canada, who include First Nations, Métis, and Inuit children under the constitutional definition (Indian and Northern Affairs Canada, 2002), socio-cultural adversities related to colonization and loss of language and culture have contributed to long-lasting struggles with social and emotional wellbeing and with positive identity development (Chandler & Lalonde, 2008; King, Smith, & Gracey, 2009). Aboriginal children represent the fastest growing segment of Canada's population (Statistics Canada, 2008); yet, are among the lowest ranking groups in the country in terms of health status, as well as social, educational, and economic wellbeing (National Association of Friendship Centres, 2009). Further, due to colonization, Aboriginal children develop within multiple contexts in Canada (i.e., urban, rural, on-reserve, traditional or non-traditional) that may, at times, be incongruent with one another. As a result, Aboriginal children and youth may receive and have difficulty reconciling contradictory information about who they are, how they fit into their heritage culture and the dominant culture, as well as the meanings associated with being a visible minority (Corenblum, 1996; Toombs, 2011; Wang, 2010). Despite these acknowledged struggles, little is known about the social-emotional development of Aboriginal children (Sarche, Croy, Big Crow, Mitchell, & Spicer, 2009). As such, gaining an understanding of how best to support the development of Aboriginal children is important in preventing social, emotional, educational, and health problems in later life (Rabaa, 2010).

Research has demonstrated that *early* intervention with respect to social-emotional issues is paramount for ensuring optimal developmental trajectories (Baggett et al., 2010; McCabe & Altamura, 2011). In order to engage and effectively serve Aboriginal children and families through early childhood interventions and programming (e.g., Head Start), programs must have a foundation in Aboriginal ways of knowing and being (Hare, 2011; Taylor, 2011). However, of the 0- to 6-year-old Aboriginal children who attend early childhood programming in Canada, less than 20 percent attend programs that promoted First Nations, Métis, and/or Inuit cultures (Statistics Canada, 2008). In recognition of this deficit, culturally appropriate early childhood programs are beginning to emerge. However, systematic evaluations of these programs are lacking, in part because tools that measure culturally relevant aspects of development for Aboriginal children are similarly lacking (Ball, 2009).

The lack of culturally sensitive tools can have multiple consequences for Aboriginal children. Interpretations generated from culturally insensitive tools can result in children being incorrectly identified as experiencing difficulties and can result in inappropriate placements in special education programs (De Plevitz, 2006; Gould, 2008). Alternatively, there may be specific social and emotional competencies that Aboriginal children require that are not reflected in commonly used screening and assessment tools. The use of tools that fail to measure such potentially important aspects of

development can result in under-identifying Aboriginal children who may require additional supports in these critical areas.

Clearly, the long-term health and development of today's Aboriginal children hinges on a better understanding of developmental processes, coping responses, and the competencies required to effectively straddle two or more cultural contexts, as well as how these competencies can be measured and supported in early learning settings (Padilla, 2006). It is also evident that the perspectives of Aboriginal peoples must be central in the identification of these essential elements of development (D'Aprano, Carapetis, & Andrews, 2010). As such, the purpose of the current study was to identify the most important elements of healthy development for Aboriginal children from the perspectives of Aboriginal peoples, with a particular focus on social-emotional development.

Methods

This qualitative community-based participatory research (CBPR) (Israel, Schulz, Parker, & Becker, 1998) study was conducted as a partnership between university researchers and an Aboriginal-serving community-based agency. A CBPR approach to research attends to the relationships between partners and aims to benefit the partners involved (Minkler & Wallerstein, 2003). This study was reviewed and approved by the Human Research Ethics Board at the University of Alberta.

Participants

The partners engaged in purposeful sampling of focus group participants in order to recruit those who could provide the richest information about the competencies most important for Aboriginal children (Abrams, 2010). The focus group participants were 37 Aboriginal Canadians and consisted of parents (1 male and 10 females), service providers including 1 elder (11 females), adolescents (5 males and 6 females), and young adults attending university (4 females). Service providers were involved in a number of agency programs and services, including: (a) school outreach; (b) sharing circles and cultural family nights; (c) programs that support pregnant women and parenting families; and (d) an Aboriginal Head Start program. Parent participants were from families with young children who had received or were currently receiving programs or services offered by the partner agency. Adolescent participants recruited by the partner agency were taking part in a skill development program intended to address the issue of high school attrition in Aboriginal youth aged 16 to 25. University student participants were studying education, psychology, and political science at the undergraduate level. A graduate student working on the study utilized snowball sampling to recruit university student participants. Consistent with a qualitative research framework, the sample size was not pre-determined (Lincoln & Guba, 1985); rather, the point at which saturation in the data was reached dictated the size of the sample. Saturation occurs when no new information is surfacing in the data collection process and when collecting more data would, as a result, not be helpful in understanding the data (Mayan, 2009).

Focus Groups

For parent participants, a focus group was held at the partner agency and facilitated by agency staff members who were working directly with the researchers. For service providers, a separate focus group was held at the partner agency and facilitated by the researchers. For adolescent focus group participants, researchers facilitated focus groups at the partner agency on three separate days with the same

participants. University students participated in a focus group facilitated by the researchers on the university campus.

For those focus groups that took place through the partner agency, audio recording was not possible due to an agency policy prohibiting voice recording. In the instances where audio recording was not possible, three researchers participated in detailed note taking and/or focus group facilitation. Because the focus group with university students took place independent of the partner agency, this discussion was audio taped with participants' permission and transcribed verbatim.

Using a basic interpretive inquiry method to "simply seek to discover and understand a phenomenon, a process, or the perspectives and worldviews of the people involved" (Merriam, 1998, p. 11), participants were asked semi-structured questions about the most important skills, strategies, and resources necessary for healthy development in the early years and more specifically in the area of social-emotional development. Following a qualitative approach to simultaneous data collection and analysis (Suter, 2006), subsequent focus group questions were modified to reflect the findings of previous focus groups.

Data Analysis

Consistent with a qualitative inquiry approach, data were analyzed and collected concurrently (Morse, 1999). A series of systematic steps were carried out to analyze the focus group data using content analysis (Morse & Field, 1995). Initially, three researchers independently read through focus group transcripts and notes and engaged in the process of memoing (Mayan, 2009). Next, the researchers came together to code the data by identifying recurring phrases and concepts in the transcripts, and to subsequently group them into categories (Mayan, 2009). Finally, after a coding scheme was developed based on a thorough analysis of one of the focus groups, the other focus group data were analyzed using this scheme. Representatives of the partner agency, who had in-depth understandings of Aboriginal worldviews, reviewed the themes that emerged in order to ensure cultural appropriateness.

Findings

Five broad, inter-connected themes emerged from the data, as depicted in Figure 1: cultural wellness, emotional wellness, mental wellness, social wellness, and strong identity. Strong identity was foundational to the other themes and will be discussed first. Each theme is described in detail using participants' voices to maintain the integrity of the data.

Strong Identity

For focus group participants, social-emotional health corresponded to having a strong identity, which in turn contributed to overall health and wellbeing. According to participants, having a strong identity meant: knowing who you are; being confident, proud, and accepting of who you are; having self-respect; loving yourself; and having a sense of authenticity. Participants also suggested that having a strong identity provided a sense of grounding and belonging. Further, a reciprocal relationship emerged between the theme of strong identity and each of the other themes. In particular, having a strong identity clearly facilitated social, emotional, mental, and cultural wellness, while alternatively health and wellness in these four areas facilitated the development of a strong identity. Participants described the facilitating factors and challenges in developing a strong identity.

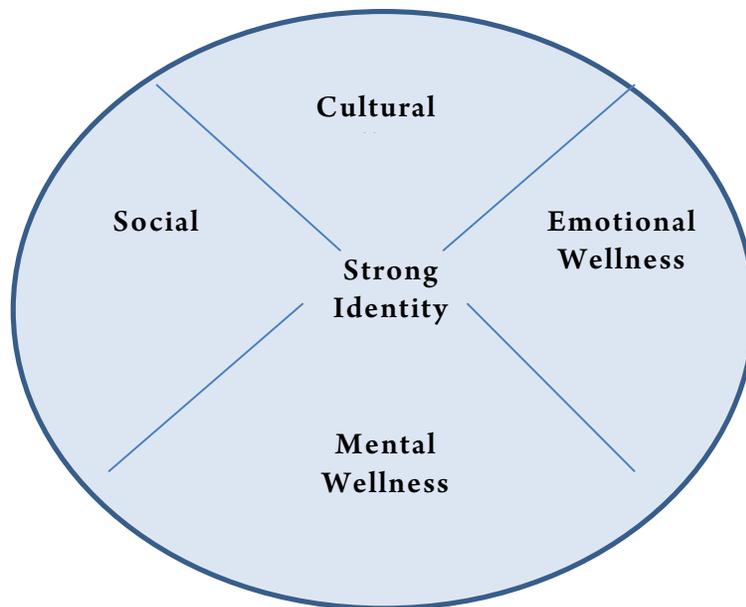


Figure 1. Visual depiction of themes.

Part of having a *strong identity* simply involved knowing who you are. According to one participant:

Success is almost the same as that self-actualizing, when you get to the top of Maslow's pyramid. Once you're there, it doesn't matter how much money you have or regardless of you've been to school or not, as long as... you have that sense of identity and who you are...

Having a strong identity also meant having pride and confidence in oneself as an Aboriginal person. Parent participants extensively discussed how younger generations needed to "get their pride back" and needed to "be taught how to be proud of their cultural heritage." In this sense, a strong identity was described as:

A fundamental confidence, sense of belonging to your identity... I think it's confidence... in who you are as a person and knowing certain things about yourself. I'm not gonna not be who I am, I'm confident in who I am.

Another participant stated that

[A]dopting my Aboriginal culture makes me feel good about who I am ... I think we find a connection in ourselves when we belong to our heritage.

Having a strong identity also meant finding an *inner contentment and respect for oneself*:

[F]or me, success isn't what society says. It's an inner thing. Being happy with who you are, contentment.

Challenges to the development of identity included experiences that contributed to cultivating shame and self-hatred. Participants described the impact on Aboriginal children and families of historical experiences with residential school and continued experiences with colonization:

When you have families that have had residential school experiences, you've taken away the ability to teach their children and how to parent. All those things essential to being a parent were taken away and that took away who they are and being able to have an identity... so a lot is missing there and a lot of kids struggle with how to identify.

Participants described the significant challenges faced in developing a strong identity in the context of a mainstream culture that is often racist toward Aboriginal peoples:

No matter how much you try to assimilate to White culture, you know you don't quite fit in. Because racism exists. As a child you know you're not accepted and it affects you socially, emotionally, in your development.

As another participant described:

Growing up, it was kind of hard to... accept that you were ... Aboriginal ... 'cause people have stereotypes attached to being Aboriginal, or you'd be like, "I'm Aboriginal," and they'd be like, "oh, well, you're not that type of Aboriginal person," so... I didn't fully accept it until grade 11 or 12, so it took a long time.

Participants also described familial experiences with internalized racism, wherein parents relayed to their children that it was necessary to reject their Aboriginal heritage in order to be successful. As one participant stated:

I was brought up non-Aboriginal. My mom grew up in a residential school and she didn't want us to be Aboriginal. She said, if you wanna go far in life, you have to be Caucasian. But I didn't look like a Caucasian person.

Another participant described the negative implications associated with her struggle to develop an identity as an Aboriginal person:

When I was going through identity and living in mainstream society, and also trying to follow the Native culture, I had a lot of conflict with, I didn't wanna be Native and, and I wanted to party and get drunk and do drugs.

In order to achieve a strong identity, Aboriginal children had to overcome these barriers. In sum, this became increasingly possible when cultural, emotional, social, and mental wellness were attained. Alternatively, wellness in these four areas, discussed below, strongly facilitated a strong identity.

Cultural Wellness

Cultural wellness was described as particularly important in the development of a strong identity. Again in relation to residential schools, one participant stated that

[M]any children were taken away from their heritage and weren't with their families, so it's important to encourage that in kids because you feel stronger once you connect to your culture.

Of particular significance to the development of cultural wellness was the need for children to develop *knowledge of Aboriginal history*. Participants pointed out that many Aboriginal people lack information important to understanding their histories. As one participant stated,

[T]he first thing that pops out about being proud of your heritage is assuming everyone really understands their heritage ... many Aboriginal people don't understand their history.

According to another participant,

It's great to feel proud, but in order to be proud, you first have to understand your heritage.

Many participants emphasized that Aboriginal history should be embedded in the mainstream school curriculum. They expressed frustration with not having the opportunity to learn about Aboriginal history because

[T]hey teach us about Nazi Germany and ... the Holocaust, but they won't teach us about ... the 60's scoop and the residential schools.

A participant voiced further frustrations about her schooling experience:

These are just facts that could be in the textbooks ... I feel like in the social studies textbooks ... they're just not giving you the complete truth ...

Participants also emphasized the importance of *broader society having knowledge of Aboriginal history*. According to participants, all Canadians should be educated as to the history of Aboriginal peoples in order to promote understanding, empathy, and respect between Aboriginal and non-Aboriginal people:

I think when non-Aboriginal children will learn that in the schools, they'll go home and ask their non-Aboriginal parents, and ... maybe they'll teach their parents and so it's a whole community that starts learning ... the whole city ... will start learning and having more empathy.

Another strong element of cultural wellness was knowledge of *Aboriginal language*. Participants reported that if children know their Aboriginal language, their connections to family, culture, and their identity can be strengthened:

It's the communication part. Just being able to have that at home, something on my own, and I know that it made our family stronger. Mainly, most of the time when we did speak it was during the ceremonies and during the society gatherings and during ceremonies. That's when we spoke it for real.

Alternatively, some participants spoke about feelings associated with not knowing their Aboriginal language and how this could interfere with a sense of connection to culture:

It's a sense of loss and you feel kind of sad because you don't know your own language. And I attend a lot of ceremonies, and everyone speaks in the cultural language... you still feel like you're not fully understanding everything you need to be, and not fully experiencing it ...

Engaging in *cultural practices* was another important element of cultural wellness. Participants shared that when children had the opportunity to become familiar with their own culture as they grew up, they developed a set of skills that allowed for a culturally and spiritually rich life, and they began to understand what constituted culturally appropriate behaviour. One participant stated that

[T]here's certain places, you know, the ceremonies you go to and there's a certain way to act.

Finally, participants described the importance of *spirituality and belief systems* in building cultural wellness. Participants emphasized educating children about the Creator and the story of creation as it existed in their own communities, as well as educating children to respect differences in spiritual beliefs. Learning about and experiencing spirituality was also important for facilitating connections to culture and community, and was described as a potential resource for Aboriginal children and families:

I think my outlet, too, was my spirituality, the fact that I knew that even though I'm living this life here, you know, off the reserve and then when I come home there's always good things about coming home too ... there was that balance at home ...

According to participants, when children knew and understood their Aboriginal history and language, had opportunities to engage in cultural practices, and had connections to spirituality and belief systems, it allowed them to achieve cultural wellness, which in turn contributed to overall social-emotional wellness.

Social Wellness

Participants discussed the importance of children being connected to family, culture, and community. In order to experience a sense of *social connectedness*, participants described how children must be socially involved with other individuals and groups. As one participant stated,

I think first being committed to your own family is important to feel connected once you grow up. My nephew isn't connected to his family ... and he's learned helplessness and giving up.

Alternatively, having social connections assisted with identity struggles and confusion. According to one service provider,

[I]n high school, you're lost and you don't know ... what culture are you? So it's good to have youth drop-ins so they can stay connected.

For one participant, social connectedness was the basis for defining overall success:

[F]or me, success is being able to raise your kids or teach your family to grow up in society to feel some sort of connection.

Related to social connectedness was the element of *social support*. Family members were particularly important in helping children deal with challenges and generally acting as a support system:

I have to give credit to my parents and my grandparents just because they were so supportive and any time I'd go home, I'd have issues... I had an older sister too and she was two grades ahead of me, so she... really helped me as well.

The children that I've seen and I've worked with... they don't have the parents that are there to support them or the family. Or they've all been split in different directions... they create their own family... and it's really sad 'cause you see a lot of those children from the child welfare system create that support within the gang system now... but that's all they need is support.

Families also provided support by encouraging children toward pursuits outside of their own communities. For participants who lived in communities that struggled with high rates of crime, violence, and substance abuse, this encouragement was initially unwelcome, but later greatly appreciated:

My grandparents and my parents forced me... at times I wanted to go to school on the reserve and say you know what, my friends are on the reserve, can I just go, I'm tired of riding the bus... and... they said you have to learn how to be there... 'cause we don't wanna see you live in this community... my mom didn't want me to become one of the teen pregnancy statistics... and so I think that's what really helped was the fact that I was forced to do it.

Peers were also an important source of social support. For some participants, it was especially valuable to have Aboriginal friends with whom they could share their experiences related to identity development. As one youth stated,

I think it was the peer support... just being able to empower each other and support.

Another youth shared that

[M]y best friend... he's Métis also, and we went to the same high school together so we got involved and... started actually accepting the fact that we were Aboriginal... so that kind of... let me fully accept it.

Role models such as teachers, youth leaders, and older family members also provided support, as one participant described:

[T]here are positive role models and it is okay to accept who you are and do your culture... and it's supposed to be a fun thing.

People who acted as role models demonstrated a positive acceptance of Aboriginal culture and an ability to balance mainstream and Aboriginal contexts:

I seen her and how she... played basketball and she was on the honour roll, like she was living both lives too but she was successful in both kind of cultures...

Finally, participants discussed the importance of children being *respectful* to others. Many participants had experienced a lack of respect from others and saw the value in teaching children to respect differences:

A lot of it is respect. And that's what's missing in our culture... then anger comes out in the wrong way... when you teach your kids to be prejudiced, they carry that with them and it's wrong... a lot of where our culture gets lost is where we don't respect each other.

Insofar as children were respectful of others, received support from family members, peers, and role models, and were connected to their families, communities, and culture, they were able to successfully function in different social contexts and learn how to develop a strong identity, self-confidence, and pride.

Emotional Wellness

Participants relayed that it was crucial for Aboriginal children to develop the capacity for *love, empathy, and understanding*. Children who experienced and focused on feelings of love for themselves and others were able to forgive, heal from negative experiences, and engage in successful social relationships. One participant spoke about the capacity for love and understanding:

For someone to love themselves within, inside and out, unconditionally is what I believe is true happiness because once you love yourself you can show others how to love... and along with the love, then you then have empathy... and then it becomes more you're not mad or sad because this person acted a certain way towards you. You would understand that maybe they don't understand what they're doing at that time...

Another participant stated that

[U]nderstanding is a big one. Understanding how others are feeling. Not only understanding our own kids but how everyone feels.

Healing was also discussed as important for emotional wellness:

You see the street people and you know they need healing. And you know a lot of them, given the right tools, they'll get themselves out of that... So for them to be able to shape shift into the student or whoever they wanna be, it's healing and acceptance and that authenticity of... okay, well... I'm gonna, you know, find the healing I need.

For participants who had experienced challenges and hardships in their relationships, *forgiveness* was also emphasized. Particularly for those children whose families had been impacted by residential school experiences, forgiveness provided a transition beyond natural feelings of anger and pain. Participants shared the importance of focusing on positive emotions relative to negative emotions, and recognizing where negative emotions come from. This helped in allowing participants to make the conscious decision to move on from negative emotions toward emotional wellness. As one participant stated:

You're not experiencing it but thinking about it's because of residential school but it is still there and you still get the sense of anger and hurt and pain even though you haven't been a part of it you still are experiencing the ripple effect of what has happened.

Children who experienced and expressed positive emotions including love, empathy, understanding, forgiveness, as well as self-respect and an inner contentment, rather than focusing on negative emotions such as anger and blame, were better able to relate to others and to develop pride in themselves.

Mental Wellness

Mental wellness was described as the ability to develop and maintain a strong, positive attitude and mind. In recognition of the problems and challenges that many Aboriginal children face in the course of development, *problem solving* was an important element of mental wellness:

Another skill that people need to be successful is the ability to problem solve. Find solutions. Kids especially need to learn that. When kids don't have that skill, life can be very challenging.

Related to problem-solving skills was the ability to approach challenges with a *determined attitude*. A mentality of determination allowed Aboriginal children to persevere when faced with barriers:

I like the words perseverance and persistence. There's so many challenges to get through before kids get to the good stuff... there's lots of barriers. It's also attitude... you need and can find a way to live and solve problems.

Participants discussed how having an attitude of determination could help children to anticipate and achieve success. On the other hand, a defeatist attitude could interfere with the achievement of success:

Success is something you're taught as a child. If you're taught you can be successful, you can reach for the next thing. And that's why our families in the system are defeatist because they haven't been taught success.

Similarly, it was also important for children to have the ability to *derive motivation from negative experiences*:

Some of the motivators I had were the negative things that I witnessed and a lot of it, like, losing a parent... I didn't wanna keep living that and living in that cycle... so it was prevention... I'm not gonna let myself, you know, live this life.

Some participants had grown up and/or were still living in communities where substance abuse and criminality were significant issues. They described their continued ability to witness others making poor decisions and to utilize what they had witnessed to motivate their own success:

Going home every day, seeing negativity... people smoking on the streets or [prostitutes]... it just makes me not wanna be like that and to try to work hard so I don't end up like that. And then seeing my friends or family in jail... all that just makes you wanna... keep working hard.

Participants also discussed the importance of witnessing others' success in order to motivate their journey toward their own achievements:

Well I experienced the non-Aboriginal life ... my white friends at school ... when they turn 18 they get a vehicle and university ... you experience it and you want a kind of taste of it ... and you know you want it. Just, it works both ways, negative too ...

Finally, participants relayed the importance of children exhibiting *adaptability in different social and cultural contexts*. A crucial element of adaptability was being able to fit in to different contexts while still retaining your core identity:

There's that authenticity ... it's a real asset to have. 'Cause ... there's certain places, you know, the ceremonies you go to and there's a certain way to act and, you know, on the street ... there's a survival thing that sort of kicks in ... that adaptability is really important. Just being authentic in those situations ... being yourself or being your professional self or being your student self or being ... your cultural self.

Essentially, this meant having an integrated sense of self that could look slightly different depending on the varying contexts that Aboriginal children found themselves in. One participant described this ability as becoming a "chameleon." On the contrary, some participants described the necessity to change their roles as burdensome:

I feel like I have ... all these different people I have to be ... when you go ... to the street or to see your cousins, they're all gangsters, like, you're a different way, then you go to, like, a gala and you're all ... high class ... I feel like I'm always switching my roles.

It's hard living like that ... always having to change your role and change your identity for ... people you're around ... I even noticed here ... hanging out with a group of ... Aboriginal friends ... we're just really lax and open, we can talk about anything. But then ... once you go into a certain ... seminar or something and you're talking about the same issues ... but you have to watch what you're saying or ... you have to be ... the educated person ...

In order for a child's adaptability to serve their overall wellbeing and contribute to a strong identity, it was necessary for adaptability to come from a place of strength and authenticity, and not a place of vulnerability. Aboriginal children need to have the ability to competently fit in to different social and cultural contexts while retaining their strong identities, rather than attempting to act as someone that they are not by hiding parts of their identities in order to fit in.

Discussion

The current study has identified key elements of the healthy social-emotional development of Aboriginal children from the perspectives of a sample of Aboriginal Canadians. Data analysis revealed important elements of cultural, social, emotional, and mental wellness that contribute to the development of a strong identity. This study found that a strong and proud identity is central to social-emotional health, and therefore imperative to the overall health and wellbeing of Aboriginal children.

For Aboriginal children, having a strong identity meant knowing and having pride in who you are as an Aboriginal person. Echoing the voices of participants in this study, Kickett-Tucker (2009) identified that

A strong racial identity and related self-esteem is like a hub of a wheel because without the hub, the wheel can go nowhere. Like the hub, racial identity is the centre of a child's and youth's well-being... (p. 130)

Further, the findings of the current study are consistent with research indicating that a strong cultural identity can be a protective factor against suicide in Canadian Aboriginal youth (Chandler & Lalonde, 1998; Chandler & Proulx, 2008), and is associated with more favourable outcomes related to school attendance and academics (Purdie, Tripcony, Boulton-Lewis, Fanshawe, & Gunstone, 2000). Conversely, research indicates that social, emotional, and behaviour problems exhibited by Aboriginal children may be linked to lack of a positive identity (Zubrick et al., 2005), which is consistent with the challenges discussed by participants.

There is also a growing literature base to support the elements of cultural wellness identified by participants in this study. To illustrate, knowledge of a cultural language has been linked to positive school outcomes for Aboriginal children (Guevremont & Kohen, 2012). According to Ball (2004),

First Nations leaders have linked improvement of developmental conditions for children to the reconstruction of their cultural identity, revitalization of intergenerational transmission of culture and traditional language, and reproduction of culturally distinctive values and practices in programs for children and youth. (p. 455)

As part of cultural wellness, participants in the current study discussed the importance of children knowing and understanding their cultural history; at the same time, they expressed frustration with their own prior lack of knowledge of Aboriginal history due to the omission of these topics from school curricula. Aboriginal youth in Lee and Cerecer's (2010) qualitative study identified similar frustrations and emphasized that it was unacceptable to leave Aboriginal culture, language, and history out of their education. In a policy report, Toulouse (2008) identified that respect for Aboriginal culture and traditions, as manifested by representing Aboriginal cultures, languages, and traditions in the classroom, is crucial for supporting and ensuring the academic success of Canadian Aboriginal youth. The current study adds to the growing evidence base supporting the importance of a strong identity and cultural wellness and highlights the need to address issues of culture and identity development in screening, assessment, and educational programming for Aboriginal children.

Participants also discussed aspects of social, emotional, and mental wellness that are particularly important for Aboriginal children. In Aboriginal populations, connections, relations, and family are considered fundamental aspects of overall wellness (King et al., 2009) and are important in promoting Aboriginal child health (Long & Sephton, 2011). Further, when Aboriginal children have access to family members and other adults who can provide social support, their knowledge of Aboriginal language and culture is strengthened (Bougie, 2010). The capacity to respect others has also been cited as a core value of Aboriginal peoples (Kirkness & Barnhardt, 1991; Toulouse, 2008); in particular, it is essential for children to learn to respect elders as keepers of knowledge and wisdom (Roué, 2006). Although a history of colonization and discrimination could understandably interfere with the development of a sense of respect in Aboriginal children, this is essential for moving toward emotional

wellness. The aspects of emotional wellness discussed by participants (i.e., inner contentment, self-respect, forgiveness, love, empathy, and understanding) are also particularly relevant for Aboriginal children because they are developing and learning in the context of pervasive challenges that they must face simply by virtue of their heritage. These challenges include disrupted attachment caused by residential schooling, which has continued to have an intergenerational impact, and has contributed to racism, marginalization, and inequities in virtually all areas of health and education (Heath, Bor, Thompson, & Cox, 2011; King et al., 2009). Similarly, the elements of mental wellness identified in the current study (i.e., problem solving abilities, a determined attitude, the ability to derive motivation from negative experiences, and adaptability) are especially important for Aboriginal children, given the current social and political landscape within which Aboriginal children are developing. Indeed, it is evident that the barriers Aboriginal children face may make it more difficult for them to achieve success than their non-Aboriginal counterparts (Priest, Mackean, Davis, Waters, & Briggs, 2012). This is particularly relevant to the skill of being adaptable, where Aboriginal children must learn to fit into different social and cultural contexts while maintaining authenticity. When participants described the course of their development, they spoke about feeling challenged in terms of maintaining authenticity; part of mental wellness involves Aboriginal children maintaining their sense of identity while flowing between contexts.

The findings from the current study can also be discussed in the context of recent literature on social-emotional development. In the research literature, social-emotional development is defined as involving self-regulation, understanding emotions, self and social awareness, social problem solving, and relationship skills (Denham, 2005; McCabe & Altamura, 2011). Self-regulation can involve the expression of more positive emotions relative to negative emotions (Denham, 2006). This was a strong component of emotional wellness in the current study: Participants discussed the need for Aboriginal children to focus on and express positive emotions such as forgiveness and love in order to achieve wellness and move on from feelings of anger and pain. Self-regulation and emotional understanding are also described in the literature as having the ability to regulate emotional and behavioural responses appropriately in different contexts (Denham, 2006). This was echoed in Aboriginal participants' descriptions of adaptability and authenticity. In particular, participants relayed that Aboriginal children need to have knowledge of the emotional responses and behaviours that are suitable for the different social and cultural contexts in which they grow and develop, as well as the ability to act appropriately based on that knowledge. Further, literature on social-emotional development emphasizes social and relationship skills. Similarly, Aboriginal participants discussed the importance of social connectedness and of having relationships with peers, role models, and family members who can support and contribute to overall wellness. However, despite some similarities between the literature on social-emotional development and the findings of the current study, it is clear that literature is lacking with respect to a focus on cultural wellness. Also, the most prominent theme that emerged from the current study was that of a strong identity. Although self-concept is discussed in the literature as part of social-emotional development, this refers to a sense of self-efficacy, self-worth, or mastery (Denham, 2005; McCabe & Altamura, 2011) and is not tied to culture. For Aboriginal participants, a strong identity was clearly related to a sense of pride and belonging as an Aboriginal person.

With respect to screening and assessment tools, current measurement tools and processes do not reflect the importance of children having knowledge of culturally relevant history, heritage language, cultural practices, spirituality and belief systems, social connectedness, the ability to draw motivation from

negative experiences, and a strong identity. Examining how these elements of wellness can be incorporated into screening and assessment processes and tools will be important to more accurately reflect Aboriginal child development and for achieving enhanced indicators of both short and long term outcomes. Further, because these elements are not currently captured in measurement tools, the current study suggests that the results of mainstream tools should be interpreted with caution when used with Aboriginal children. Moreover, this study provides the foundation for future research into the evaluation and enhancement of commonly used screening and assessment tools to better reflect our multicultural landscape and the elements of wellness that lead to healthy development outside of Euro-Western standards and norms. Further, findings from the current study highlight that, in order to obtain a complete picture of Aboriginal child health and wellness, the child must be considered in his or her entirety; in addition, attention must be paid to elements such as his or her context, support systems, and available opportunities. Social-emotional development for all children can best be understood in the context of additional developmental domains (Squires, 2003); this study highlights that for Aboriginal children, considering other domains such as identity and cultural wellness and their influence on development is particularly important. With respect to screening and assessment, this could involve utilizing multiple informants (e.g., the child, parents, caregivers, teachers) and multiple methods (e.g., interviews, questionnaires, direct observations, valid assessments).

Although screening and assessment tools and processes do not reflect many of the elements of wellness identified in this study, children can be given opportunities to develop these elements of wellness by attending culturally appropriate programming in their early years. Early childhood programs that honour and respect Aboriginal worldviews are being increasingly recognized as crucial for supporting the healthy development of Aboriginal children (Hare, 2011; Mckeough et al., 2008). In order to develop a strong identity, Aboriginal children need to have opportunities for early learning experiences that are grounded in culture (Best Start Resource Centre, 2010). Accordingly, it is imperative for early childhood programming to move toward focusing on these critical areas for Aboriginal children.

Concluding Remarks

This study strengthens the assertion that Aboriginal children require an additional set of social-emotional skills to successfully navigate different cultural contexts during development. These additional skills, particularly relevant to cultural wellness and a strong identity, are not reflected in the literature on social-emotional development or in current early childhood screening and assessment tools. Clearly, further research is needed to elevate understanding of social-emotional wellness in Aboriginal children and to begin to incorporate additional elements of wellness into screening and assessment tools, as well as into early childhood programming. Aboriginal child development should also be conceptualized holistically. Utilizing the lived experiences and perspectives of Aboriginal peoples to enhance programming, screening, and assessment will heighten the potential to optimally support Aboriginal children and families.

References

- Abrams, L. S. (2010). Sampling 'hard to reach' populations in qualitative research: The case of incarcerated youth. *Qualitative Social Work, 9*, 536 - 550. doi: 10.1177/1473325010367821
- Baggett, K. M., Davis, B., Feil, E. G., Sheeber, L. L., Landry, S. H., Carta, J. J., & Leve, C. (2010). Technologies for expanding the reach of evidence-based interventions: Preliminary results for promoting social-emotional development in early childhood. *Topics in Early Childhood Special Education, 29*, 226 - 238. doi: 10.1177/0271121409354782
- Ball, J. (2004). As if Indigenous knowledge and communities mattered: Transformative education in First Nations communities in Canada. *American Indian Quarterly, 28*, 454 - 479.
- Ball, J. (2009). Supporting young indigenous children's language development in Canada: A review of research on needs and promising practices. *Canadian Modern Language Review, 66*, 19 - 47. doi: 10.3138/cmlr.66.1.019
- Best Start Resource Centre. (2010). *Founded in culture: Strategies to promote early learning in First Nations children in Ontario*. Toronto, ON: Health Nexus.
- Bougie, E. (2010). Family, community, and Aboriginal language among young First Nations children living off reserve in Canada. *Canadian Social Trends, 90*, 75 - 85.
- Chandler, M. J., & Lalonde, C. (1998). Cultural continuity as a hedge against suicide in Canada's First Nations. *Transcultural Psychiatry, 35*, 191 - 219. doi: 10.1177/136346159803500202
- Chandler, M. J., & Lalonde, C. E. (2008). Cultural continuity as a protective factor against suicide in First Nations youth. *Horizons, 10*(1), 68 - 72.
- Chandler, M. J., & Proulx, T. (2008). Personal persistence and persistent peoples: Continuities in the lives of individual and whole cultural communities. In F. Sani (Ed.), *Self-continuity: Individual and collective perspectives* (pp. 213 - 226). New York: Psychology Press.
- Corenblum, B. (1996). Development of identity in Native Indian children: Review and possible futures. *Canadian Journal of Native Studies, 16*, 81 - 103.
- D'Aprano, A. L., Carapetis, J. R., & Andrews, R. (2010). Trial of a developmental screening tool in remote Australian Aboriginal communities: A cautionary tale. *Journal of Paediatrics and Child Health, 47*, 12 - 17. doi: 10.1111/j.1440-1754.2010.01883
- Denham, S. A. (2005). *Assessing social-emotional development in children from a longitudinal perspective for the National Children's Study: Social-emotional compendium of measures*. Columbus, OH: Battelle Memorial Institute.

- Denham, S. A. (2006). Social-emotional competence as support for school readiness: What is it and how do we assess it? *Early Education and Development, 17*, 57 - 89. doi: 10.1207/s15566935eed1701_4
- De Plevitz, L. (2006). Special schooling for Indigenous students: A new form of racial discrimination? *The Australian Journal of Indigenous Education, 35*, 44 - 53.
- Gould, J. (2008). Non-standard assessment practices in the evaluation of communication in Australian Aboriginal children. *Clinical Linguistics and Phonetics, 22*, 643 - 657. doi: 10.1080/02699200802222206
- Guevremont, A., & Kohen, D. E. (2012). Knowledge of an Aboriginal language and school outcomes for children and adults. *International Journal of Bilingual Education and Bilingualism, 15*, 1 - 27. doi: 10.1080/13670050.2011.581268
- Hare, J. (2011). 'They tell a story and there's meaning behind that story': Indigenous knowledge and young Indigenous children's literacy learning. *Journal of Early Childhood Literacy, 12*, 389 - 414. doi: 10.1177/1468798411417378
- Heath, F., Bor, W., Thompson, J., & Cox, L. (2011). Diversity, disruption, continuity: Parenting and social and emotional wellbeing amongst Aboriginal peoples and Torres Strait Islanders. *The Australian and New Zealand Journal of Family Therapy, 32*, 300 - 313.
- Indian and Northern Affairs Canada. (2002). *Words first: An evolving terminology relating to Aboriginal peoples in Canada*. Retrieved from <http://publications.gc.ca/collections/Collection/R2-236-2002E.pdf>
- Israel, B. A., Schulz, A. J., Parker, E. A., & Becker, A. B. (1998). Community-based research: A partnership approach to improve public health. *Annual Review of Public Health, 19*, 173 - 202. doi: 0163-7525/98/0510-0173\$08.00
- Kickett-Tucker, C. S. (2009). Moorn (Black)? Djardak (White?) How come I don't fit in Mum? Exploring the racial identity of Australian Aboriginal children and youth. *Health Sociology Review, 18*, 119 - 136.
- King, M., Smith, A., & Gracey, M. (2009). Indigenous health part 2: The underlying causes of the health gap. *Lancet, 374*, 76 - 85.
- Kirkness, V. J., & Barnhardt, R. (1991). First Nations and higher education: The four r's- respect, responsibility, relevance, reciprocity, responsibility. *Journal of American Indian Education, 30*, 1 - 15.
- Lee, T. S., & Cerecer, P. D. (2010). (Re) claiming Native youth knowledge: Engaging in socio-culturally responsive teaching and relationships. *Multicultural Perspectives, 12*, 199 - 205. doi: 10.1080/15210960.2010.527586

- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Newbury Park, CA: Sage.
- Long, M., & Sephton, R. (2011). Rethinking the “best interests” of the child: Voices from Aboriginal child and family welfare practitioners. *Australian Social Work, 64*, 96 - 112. doi: 10.1080/0312407X.2010.535544
- Mayan, M. (2009). *Essentials of qualitative inquiry*. Walnut Creek, CA: Left Coast Press.
- McCabe, P. C., & Altamura, M. (2011). Empirically valid strategies to improve social and emotional competence of preschool children. *Psychology in the Schools, 48*, 513 - 540. doi: 10.1002/pits.20570
- McKeough, A., Bird, S., Tourigny, E., Romaine, A., Graham, S., Ottmann, J., & Jeary, J. (2008). Storytelling as a foundation to literacy development for Aboriginal children: Culturally and developmentally appropriate practices. *Canadian Psychology, 49*(2), 148 - 154. doi: 10.1037/0708-5591.49.2.148
- Merriam, S. B. (1998). *Qualitative research and case study application in education*. San Francisco, CA: Jossey-Bass.
- Minkler, M., & Wallerstein, N. (Eds.). 2003. *Community-based participatory research for health*. San Francisco, CA: Jossey-Bass.
- Morse, J. M. (1999). Qualitative generalizability. *Qualitative Health Research, 9*, 5 - 6. doi:10.1177/104973299129121622
- Morse, J. M., & Field, P. A. (1995). *Qualitative research methods for health professionals* (2nd ed.). Thousand Oaks, CA: Sage.
- National Association of Friendship Centres. (2009). *Urban Aboriginal Poverty and Social Exclusion Survey*. Retrieved from <http://nafc.ca/en/content/research>
- Padilla, A. M. (2006). Bicultural social development. *Hispanic Journal of Behavioral Sciences, 28*, 467 - 497. doi: 10.1177/0739986306294255
- Peth-Pierce, R. (2000). *A good beginning: Sending America's children to school with the social and emotional competence they need to succeed*. Chapel Hill, NC: The Child Mental Health Foundations and Agencies Network.
- Priest, N., Mackean, T., Davis, E., Waters, E., & Briggs, L. (2012). Strengths and challenges for Koori kids: Harder for Koori kids, Koori kids doing well- Exploring Aboriginal perspectives on social determinants of Aboriginal child health and wellbeing. *Health Sociology Review, 21*, 165 - 179.
- Purdie, N., Tripcony, P., Boulton-Lewis, G., Fanshawe, J., Gunstone, A. (2000). *Positive self-identity of Indigenous students and its relationship to school outcomes*. Canberra: Legislative Services, Commonwealth of Australia.

- Rabaa, C. (2010). Towards improving the social and emotional wellbeing of Indigenous children: Mental health education in a far North Queensland school. *Aboriginal and Islander Health Worker Journal*, 34(2), 21 - 24.
- Rhoades, B. L., Warren, H. K., Domitrovich, C. E., & Greenberg, M. T. (2011). Examining the link between preschool social-emotional competence and first grade academic achievement: The role of attention skills. *Early Childhood Research Quarterly*, 26, 182 – 191. doi: 10.1016/j.ecresq.2010.07.003
- Roué, M. (2006). Healing the wounds of school by returning to the land: Cree elders come to the rescue of a lost generation. *International Social Science Journal*, 58, 15 - 24. doi: 10.1111/j.1468-2451.2006.00596.x
- Sarche, M. C., Croy, C. D., Crow, C. B., Mitchell, C. M. & Spicer, P. (2009). Maternal correlates of 2-year-old American Indian children's social-emotional development in a Northern Plains tribe. *Infant Mental Health Journal*, 30, 321–340. doi: 10.1002/imhj.20217
- Shonkoff, J., & Phillips, D. (2000). *From neurons to neighborhoods: The science of early childhood development*. Washington, DC: National Academy Press.
- Squires, J. (2003). *The importance of early identification of social and emotional difficulties in preschool children*. Washington, DC: Center for International Rehabilitation.
- Statistics Canada. (2008). *Aboriginal peoples in Canada 2006: Inuit, Métis, and First Nations 2006 Census*. Ottawa, Ontario: Minister of Industry.
- Suter, W. N. (2006). *Introduction to educational research: A critical thinking approach*. Thousand Oaks, CA : Sage.
- Taylor, A. (2011). Coming, ready or not : Aboriginal children’s transition to school in urban Australia and the policy push. *International Journal of Early Years Education*, 19(2), 145 - 161. doi : 10.1080/09669760.2011.602593
- Toombs, M. (2011). Identity and this skin colour business - A university student’s perspective. *Aboriginal and Islander Health Worker Journal*, 35(3), 14 - 15.
- Toulouse, P. R. (2008). *Integrating Aboriginal teaching and values into the classroom*. Sudbury, ON: Laurentian University.
- Wang, E. (2010). The beat of Boyle Street: Empowering Aboriginal youth through music making. *New Directions for Youth Development*, 125, 61 - 70. doi: 10.1002/yd.338
- Zins, J. E., Bloodworth, M. R., Weissberg, R. P., & Walberg, H. J. (2004). The scientific base linking social and emotional learning to school success. In J. E. Zins, R. P. Weissberg, M. C. Wang, & H. J. Walberg, (Eds.), *Building academic success on social and emotional learning: What does the research say?* (pp. 3 - 22). New York, NY: Teachers College Press.

Zubrick, S. R., Silburn, S. R., Lawrence, D. M., Mitrou, F. G., Dalby, R. B., Blair, E. M, Griffin, J., Milroy, H., De Maio, J. A., Cox, A., & Li, J. (2005). *The Western Australian Aboriginal Child Health Survey: Forced separation from natural family, forced relocation from traditional country or homeland, and social and emotional wellbeing of Aboriginal children and young people*. Perth, WA: Curtin University of Technology and Telethon Institute for Child Health Research.