



A FRAMEWORK AND ACTION PLAN FOR

EARLY CHILDHOOD DEVELOPMENT

IN THE NORTHWEST TERRITORIES





Message from the Ministers of Health and Social Services and Education, Culture and Employment

We are pleased to present the Northwest Territories (NWT) *Framework for Early Childhood Development: Right from the Start*. The renewed *Framework* represents the future success of our most important resource, our children, and will guide the Government of the Northwest Territories' (GNWT) investment in programs and services aimed at improving outcomes in early childhood development. The *Framework* is designed to ensure that every child, family, and community in the NWT, including those most at risk, has access to high quality, comprehensive, integrated early childhood development (ECD) programs and services that are community driven, sustainable and culturally relevant.

The *Framework* reflects Northern input through comprehensive public engagement. These activities included on-line surveys, regional meetings and focus groups, an Elders' sharing circle, and a roundtable where we heard from experts, community leaders, and practitioners - many of whom were parents. Their opinions, expertise, and input helped craft the principles and guidelines for our work.

The early years are critical to create a foundation for healthy development. Science is showing us that positive development in early childhood helps prevent adult physical and mental health issues, as well as many social problems. All children, particularly those in early childhood, need a safe, nurturing, and healthy environment to reach their full

potential. This *Framework* includes commitments and areas for action; to provide innovative outreach programs and services for families and children, and ensure no one is left behind.

The GNWT cannot approach early childhood development alone. It must be a shared approach through partnerships with Aboriginal governments, parents, caregivers, healthcare workers, childcare operators, teaching professionals, and communities. By working collaboratively we will ensure our children receive the very best care and attention, to enable them to be healthy, school-ready and reach their full potential.

Together, we will develop a system that serves the needs of our children and families, and helps build a healthy and sustainable future for the Northwest Territories.



Hon. Tom Beaulieu
Minister, Health and Social Services



Hon. Jackson Lafferty
Minister, Education, Culture and Employment



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Executive Summary



The Northwest Territories (NWT) Early Childhood Development (ECD) Framework will guide the Government of the Northwest Territories' (GNWT) actions in the areas associated with early childhood for the next 10-years. This Framework is an expression of Government's continued commitment to support programs and initiatives aimed at ensuring that every child, from birth through the first years of life, experiences a positive childhood.

This document, *Right from the Start*, was developed through a partnership between the Departments of Education, Culture and Employment (ECE) and Health and Social Services (HSS). To inform the Framework, the departments completed a comprehensive public engagement process that included parents and caregivers, community members, Elders, early childhood experts, and northern leaders. Parents, families, professionals, and northern leaders completed more than 500 on-line surveys. In addition there were two webinars, 11 focus groups, 17 regional meetings, an Elders' sharing circle, and a round-table event with more than 100 early childhood development professionals.

Our priority is to support the healthy development of all children in their early years. Our uniquely Northern context and the richness and diversity of cultures and languages across the NWT serve as a foundation for child development. By improving child outcomes through investment in early childhood development, we are investing

in a future where people are productive and contributing members of family, community, and society as a whole. This is not only the right thing to do but will position the NWT to achieve long-term economic and social sustainability.

Our vision for the future is that children will have the necessary supports in life that will allow them to develop to their full potential. To achieve this goal, everyone must do their part; governments, caregivers, early childhood educators, leaders, and communities. This vision is grounded in guiding principles and a system that values high quality care and a child-centred approach, and that respects the role of families and communities. The goals of this Framework are:

1. Increased accessibility and participation in early childhood development programs, services, and supports for children and families;
2. Enhanced quality of early childhood development programs, services, and supports; and,
3. Improved integration and collaboration at all levels of the early childhood development system.

The Departments of Health and Social Services and Education, Culture and Employment have made the following commitments to move us towards achieving our goals:



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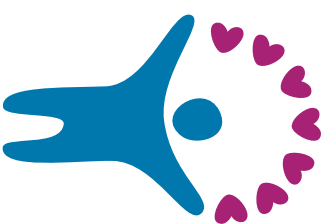


OUR COMMITMENTS

1. Expectant mothers will have access to evidence-based services that support improved outcomes for mom and baby.
2. Early intervention programming aimed at infants, children, and parents will be expanded.
3. Early childhood assessment, intervention, and responses will be improved.
4. Coordination and integration will be improved across the continuum of ECD programs and services.
5. Promotion, awareness, and education initiatives related to early childhood development will be available to all families and communities.
6. Access to high quality, affordable early learning programs and child care services will be enhanced.
7. The Departments will ensure there is monitoring, evaluation, and reporting for continuous quality improvement in early childhood development programs and services.

Through the development of a detailed action plan, each of these commitments will be supported by specific actions, initiatives, and timelines. We will also develop a robust monitoring, evaluation, and accountability plan for the renewed Early Childhood Development Framework and Action Plan to measure our progress and adjust programs and services accordingly. This will include consistent data collection and tracking to allow for ongoing performance monitoring, continuous quality improvement, and reporting on our progress towards achieving our goals.

This 10-year Framework was built on our past experience, the results of the review of the 2001 framework, feedback from our public engagement strategy, and a thorough review of new research and best practices. It will guide future action plans and departmental business plans to ensure ongoing commitment and investment from government into early childhood development in the Northwest Territories.





CHAPTER 1

BUILDING THE CASE FOR INVESTMENT

1.1 Introduction

This document lays out the Government’s commitment to action, to ensure every child, family, and community has access to high quality, comprehensive, integrated early childhood development (ECD) programs that are community driven, sustainable, and culturally relevant. There are a number of components to the Government of the Northwest Territories’ response to early childhood development:

- **Right from the Start** is a 10-year guiding framework that outlines our vision for the future, commitments, and goals and will serve as a touchstone for GNWT investments and activities over the next decade;
- **The Action Plan** provides detailed actions that will drive business planning and government initiatives, moving us towards the goals and commitments made in **Right from the Start**. The Action Plan will be updated as required to reflect results from evaluation and planning; and,
- **The Accountability Plan** outlines responsibilities and provides our plan for monitoring, reporting, and evaluation.

Several key foundational documents were developed to inform our work. Two reports summarized the ECD community engagement process: an executive summary of responses from home visits, regional meetings and focus groups, and summary reports of both the Roundtable and the Elders’ Sharing Circle. *Success in Early Childhood: How Do We Get There* provided a summary of evidence in support of ECD.

The best interests of the child shall be a primary consideration in all that we do.

- *United Nations Convention on the Rights of the Child, Article 3, Section 1*



PHOTO: TESSA MACINTOSH



PHOTO: TESSA MACINTOSH

1.2 Northern Families

All children in the NWT deserve the best possible care, nurturing and support “right from the start” so that they can develop physically, emotionally, socially, and spiritually and grow up to become healthy and productive members of their communities and society.



Positive early experiences have a huge impact on children’s chances for successful and happy lives. It is the early years that provide the most critical opportunity to take action and prevent negative experiences and circumstances from impacting children for the rest of their lives.

Statistics indicate that, relative to the rest of Canada, NWT children are more likely to be exposed to negative experiences and circumstances that impact their development.

The Northwest Territories is home to 3,921¹ children aged five years and younger. Of that group, 2,311 (59 per cent) are Aboriginal and 1,610 (41 per cent) are non-Aboriginal. The NWT has a higher birth rate than the rest of Canada. In 2010, the NWT rate was 16.0 births per 1000 people, which was up from 15.0 births per 1000 in 2001. The Canadian rate remained more

consistent at 10.8 births per 1,000 in 2001 and 11.1 births per 1000 in 2011.²

Teen pregnancy remains higher in the NWT than the rest of Canada, at 3.75 births per 100 females (aged 15-19) as compared to 1.35 births per 100 in Canada.³ The teen birth rate in the NWT, although higher than the rest of Canada, actually decreased between 2001 and 2010. Teen births

Teenage pregnancies in the NWT are more than double the national average.



expose both mother and baby to a certain number of risks including physical complications such as premature and low birth weight as well as psychological stress. Teenage pregnancy is not only an issue of young mothers needing support; many NWT males become fathers in the teenage years and face many of the same challenges.

Risk to children's educational and social

outcomes begins before birth. Maternal mental health challenges, drinking, and smoking while pregnant decrease successful outcomes for children. In 2009, 22 per cent of NWT women aged 20-44 smoked during their last pregnancy and 9 per cent reported they drank alcohol at least once per week or 1 to 3 times per month during their last pregnancy.

Two parent families make up 34.4 per cent of private households and remain the most common family type in the NWT. A single parent heads 21.4 per cent of all families. There are an increasing number of blended families in the NWT where one or both partners bring children into their relationship.

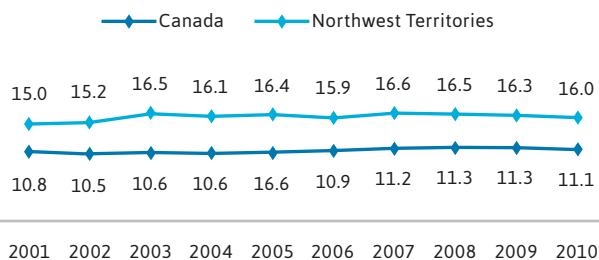
Poverty is a real issue facing many families across the NWT. In 2010 the average personal

income in Yellowknife was \$64,350, in the Regional Centres \$52,627 and in the small communities \$36,797. While there are many families who enjoy a higher income than in other parts of Canada,⁴ there are also many families living in poverty.

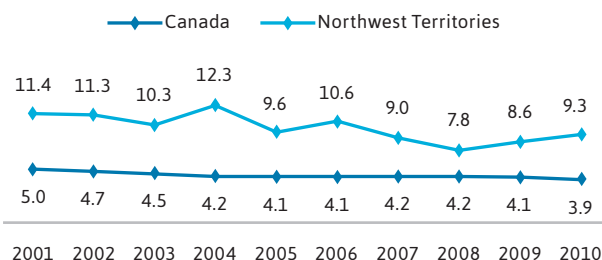


NWT Statistics

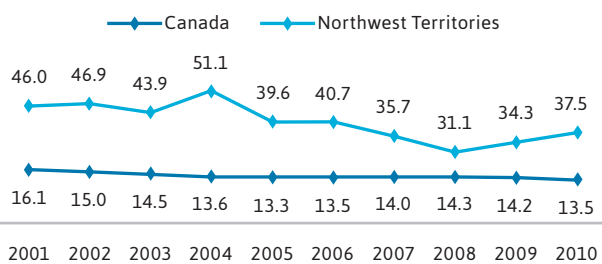
Birth Rate (births per 1000 population)



Percent Teen Births



Teen Birth Rate (births per 1,000 females aged 15-19)



Victims of Police Reported Violent Crimes by Intimate Partner per 100,000 population (2010)

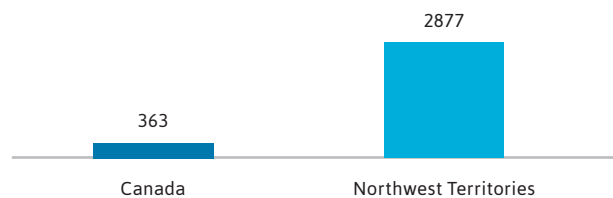




PHOTO: TESSA MACINTOSH

Our young people were gone for ten months every year. We didn't know and still don't know how to deal with having young people in the community. We were not used to being a full time parent.

Participant at the Elders' Sharing Circle, January, 2013

In 2010, 16.7 per cent of families in the NWT made less than \$30,000 per year⁵ but incomes varied considerably between Yellowknife, the regional centres of Inuvik, Hay River, and Fort Smith, and the small communities that make up the Northwest Territories. Less income creates stress on families and may limit a parent's ability to meet their child's needs. This

is compounded by the high cost of living in the North, which can create additional financial stress on families, most especially in the remote communities.

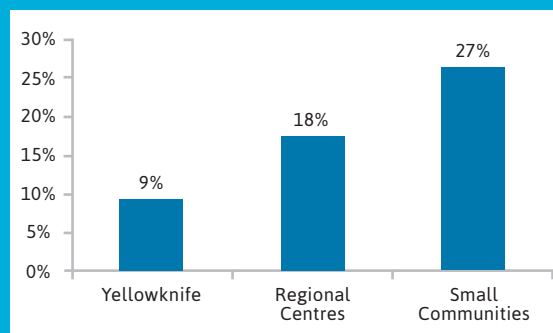
Lone-parent families' average income was \$50,933 in 2010, versus \$133,875 average income for couples.⁶ Lone parenting may add additional stressors on

families that can have impacts on children's well-being; for example, working single parents may be less able to afford quality child care.

It is difficult to quantify the number of children growing up in circumstances that put them at risk. One measure may be the rate of women going to shelters. In the NWT, we have five times

the national average of women and children going to shelters.⁷ Another relative measure is the rate of police reported violent crime by an intimate partner. In 2010, there were 2,877 police reported violent crimes committed by an intimate partner per 100,000 people, compared to 363 per 100,000 people in Canada.⁸

Families with Less than \$30,000 Annual Income (2010)



All but 5 per cent of Canadian children are born with a strong potential to grow, learn and thrive, yet by school age more than 25 per cent of Canadian children are behind in their development. In the NWT over 32 per cent of children are developmentally behind as they enter grade one.

The number of children who receive services under the *Child and Family Services Act* (Act) is also a relevant indicator. From April 1, 2011 to March 31, 2012, 6.8 per cent of children aged zero to six in the NWT received at least one service under the Act. Parents retained custody of 75 per cent of those children, and received services through the use of a Plan of Care or Voluntary Service Agreement. Children may receive services for many reasons, but it is certain that a significant number require services because their parents struggle to provide for their needs.

The Early Development Instrument (EDI) is a measure of children's developmental health at school entry. The initial baseline data from the EDI found that 32 per cent of five-year old children in the NWT are vulnerable in the areas of social, emotional, physical, cognitive, and language development at school entry. Initial results of the EDI also suggest that NWT children in small communities are at greater risk in their early years. The percentage of children behind in one or more area of their development was as high as 60 per cent of the

five-year old population in small communities.

Developing high quality early childhood education and care programs is a focus for community development around the world, particularly

in nations with issues of poverty, disparity, and marginalized populations. NWT small communities have fewer options available for high quality programs, services, and supports for children in the early years, such as affordable high quality child care, than what is available in the regional centres and Yellowknife.

Childcare Spaces Available for Children 4 and Under (2012)

Region	0-4 Population	Spaces
Beaufort Delta	621	287
Sahtu	163	59
Yellowknife	1,518	1,045
Tłıchq	361	145
South Slave	473	286
Dehcho	174	94

Types of Licensed Early Childhood Centres (2012)

Region	Child Care		Nursery School		After School		Family Day Home		Total	
	# of Centres	# of Spaces	# of Centres	# of Spaces	# of Centres	# of Spaces	# of Centres	# of Spaces	# of Centres	# of Spaces
Beaufort Delta	8	124	4	61	4	94	1	8	17	287
Sahtu	1	24	2	35	0	0	0	0	3	59
Yellowknife	10	265	8	126	15	326	41	328	74	1,045
Tłıchq	4	103	3	42	0	0	0	0	7	145
South Slave	2	42	5	96	1	20	16	128	24	286
Dehcho	1	25	3	48	2	21	0	0	6	94
Total	26	583	25	408	22	461	58	464	131	1,916



The *You Bet We Still Care Survey* (2012) results released from the Child Care Human Resources Sector Council reported that the average wage for early childhood program staff across Canada was \$16.50/hour and the average wage for early childhood program managers was \$22.00/hour.



Well-trained early childhood educators, with the knowledge and skills needed to deliver high quality programs, make a significant difference in the development of the children in their care. In 2013, the Child Care Human Resources Sector Council released *You Bet We still Care: A Survey*

*of Centre-Based Early Childhood Education and Care in Canada.*⁹ Survey results revealed wages across Canada averaging \$16.50/hour for early childhood program staff and \$22.00/hour for program managers. Attracting qualified program staff to positions is challenging due in part

to low income earning potential as an early childhood educator. This may also contribute to difficulties in enticing northerners to enroll in post-secondary certificate or diploma programs to train as early childhood workers.



1.3 Self-Sufficiency and Early Childhood Development

Supporting healthy development for all children in the early years is a priority. Economist and Nobel Prize winner James Heckman’s research revealed the economics of investing in early childhood development. Heckman calculated that every dollar spent on early childhood programs pays the same dividends as spending three dollars on school-aged programs or eight dollars on education for young adults. Heckman demonstrated that dollars invested in the first three years of life make economic sense.

THE HECKMAN EQUATION

+ INVEST

Invest in educational and development resources for disadvantaged families to provide equal access to successful early human development.

+ DEVELOP

Nurture early development of cognitive and social skills in children from birth to age five.

+ SUSTAIN

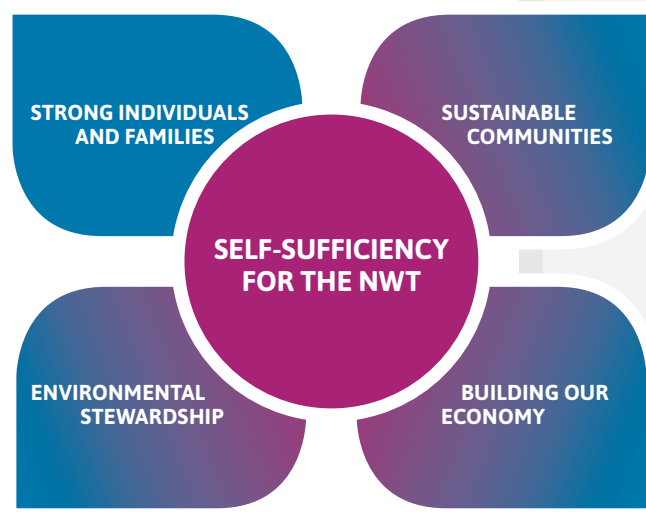
Sustain early development with effective education through to adulthood.

= GAIN

Gain a more capable, productive and valuable workforce that pays dividends to America for generations to come.¹⁰

The vision of the Members of the 17th Legislative Assembly is: “Strong individuals, families and communities sharing the benefits and responsibilities of a unified, environmentally sustainable and prosperous Northwest Territories”.

Just as government alone cannot effect change, no one strategy can achieve this vision. Social policy strategies focused on early childhood development and anti-poverty cannot be effective in isolation, and they require all partners to work together. Social, economic, and environmental strategies and policies interact and complement each other. For instance, a strong economy is sustained by having communities that are



attractive and welcoming, and it is strengthened by having social policies that help NWT residents achieve their full potential. Similarly, land use plans and economic opportunities strategies need to be linked to sustainable community initiatives and the health of physical environments - from clean air to safe drinking water - to sustain the health of the people who live in them.

1.4 Investing in Children's Futures: What Matters?



WORKING TOGETHER

GNWT departments are working together and with our partners to develop and implement a number of key frameworks, strategies, and plans that, taken together, will create the right conditions to achieve our collective vision and sustain it for future generations.

By improving child outcomes, through investment in early childhood development, we are investing in a future where each of us – no matter where we live – has the opportunity to be a productive and contributing member of

our family, community, and society as a whole. Taken together, the social, economic and environmental strategies will help position the NWT and its residents to achieve long-term economic and social sustainability.

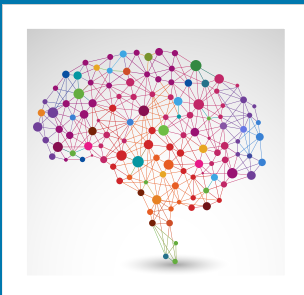
PRIORITIZING THE EARLY YEARS

A child's environment and early experiences will impact the rest of their lives. As documented in *Success in Early Childhood: How Do We Get There* (see

“By focusing on the early years, we can promote health and prevent a whole host of problems in later life. Not only are investments in early childhood development in the interest of parents and families, but as a society we stand to benefit tremendously.”

Dr. Andrew Lynk, President-Elect of the Canadian Pediatric Society

Synthesis of Research from *Success in Early Childhood: How Do We Get There*



BRAIN DEVELOPMENT:

- The brain grows most rapidly between birth and age three.
- Brain development continues throughout life, but the brain is most open to change during the early years.
- The brain responds and adapts to the child's relationships and environment.
- Brain connections in early life are made that control different physical, behavioural and cognitive (thinking) functions, including hearing, vision, language, learning, problem solving and memory.

Pay close attention to a child’s rapid brain development in the first 2,000 days of life.

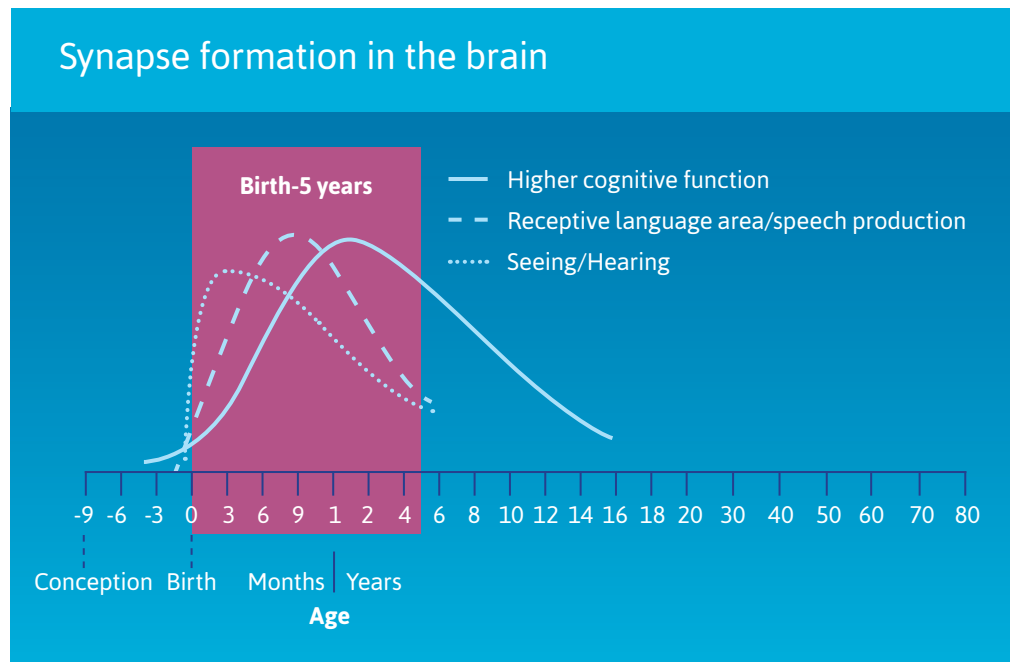
Dr. Fraser Mustard

Appendix A), there is an ever-growing body of research on children’s development in the early years. Science is showing us that positive development in early childhood helps prevent heart disease, diabetes, obesity, and social issues of crime, alcoholism, illegal drug use, and abuse in adults. The rate of teen pregnancy is reduced and delinquency and social services involvement is decreased. Learning problems that can keep children from reaching their full potential are reduced so the child can achieve his or her goals and dreams.

Brain development is about many things. Emotional, social, physical, and thinking abilities are all connected.

Each area is part of the whole. Learning to talk, for example, involves healthy hearing and the ability to hear different sounds. It requires being able to put meaning to words, to concentrate, and to interact with others,

along with wanting to communicate. Vision and hearing pathways develop first, followed by early language skills and then the higher thinking (cognitive) functions, such as exploring, learning and problem solving.¹¹



- Once brain connections are formed, they are more difficult to change.

CHILD DEVELOPMENT AND SOCIAL DETERMINANTS OF HEALTH:

- The child’s capacity to learn, create, love, trust and develop a strong sense of self are determined early in life.

- Early childhood development is related to heart disease, diabetes, obesity, and social issues of crime, alcoholism, and illegal drug use later in life.
- The rate of teen pregnancy, delinquency and social services involvement is decreased through early childhood development.
- Learning problems that keep

children from reaching their full potential are reduced if quality interventions occur in the early years.

- It is more effective and less costly to create the right early childhood development conditions than to address problems later in life.



Parents – mothers, fathers and other significant caregivers – are children’s first and most influential teachers.

SUPPORTS FOR MOTHERS, FATHERS AND FAMILIES

A nurturing physical and emotional environment helps the brain form the right connections in the right order for healthy development. A child’s family provides the first environment in which they will interact. The capacity of mothers and fathers to provide safe, nurturing, and stimulating environments

for children is affected by many factors. Children who are well cared for by mothers, fathers, and other caregivers in the earliest years are healthier throughout their lives.

Healthy development begins with a healthy pregnancy. There are many factors that affect a healthy pregnancy and healthy development, such as the mother’s state of mental health during pregnancy, high levels

of nicotine exposure before birth, and the consumption of alcohol during pregnancy.

The foundation for a child’s emotional health and wellbeing is rooted in the responsiveness of the mothers, fathers, and caregivers, and their ability to meet the child’s needs. The child’s ability to manage their emotions and cope with stress is directly related to the interaction with their

parents. A happy, secure child can develop trust, self-esteem, self-control, and positive relationships.

There is considerable research in relation to mothers’ and children’s healthy development; however, in recent years more studies are focusing on the roles and impacts of fathers on children’s healthy development. The involvement of fathers has been linked to children’s health, education, and



Changing constructions of gender roles in Canada—with greater flexibility and equality in the kinds of things that men and women do for their children – call for greater responsiveness and equality in the ways that professionals and programs reach out to fathers to ensure their optimal and sustained involvement.

Jessica Ball, 2010



developmental outcomes in significant ways.¹² One study exploring 80 Indigenous men’s journeys of fatherhood illuminated the socio-historical conditions that compounded these fathers’ challenges.¹³

Quality care is another contributor to children’s healthy development. Parents’ personal well-being, knowledge and skills related to all areas of their child’s development are keys to ensuring children experience safe homes, good nutrition, physical activity, and the nurturing they need in the early years. Supporting NWT parents and caregivers to provide high quality care at home, with options for high

quality early childhood programs available to all families, is a priority.

The research shows that parental alcohol abuse and addiction, family violence, parental criminal activity, low income, dependence on social assistance, and housing issues were all associated with a higher likelihood of a child being in need of protection. The majority of children taken into care are suffering from neglect, not abuse. Addictions are a leading factor related to neglect. Therefore, one of the best ways of preventing children from being taken into care is by treating parental addictions.¹⁴



INTEGRATION AND COLLABORATION ACROSS PROGRAMS AND SERVICES

The success of an early childhood program is ultimately demonstrated by the impact on children individually and collectively within their families and communities. Nationally and internationally, the focus in the field of early

childhood includes not just what we know about child development, but research exploring what programs and services positively impact children’s healthy development.

Internationally, early childhood programs and services are a priority for many countries. In the *Starting Strong II* review of early childhood programs

The Organization for Economic and Co-operative Development (OECD), recommended a more systematic approach across early childhood programs.



Sweden was ranked first by the United Nations in the area of early childhood education and care.

in 18 countries, including Canada, the Organization for Economic and Co-operative Development (OECD), recommended a more systematic approach across early childhood programs. At least nine OECD countries have done so, with the belief that early childhood programs are essential to the preparation of children for school, an important part of the supports for families, and a place for identifying children and families who need special services.¹⁵

A Canadian study, *Early Years II*, provided strong evidence that integrated

child development programs (such as child and family resource centres) improve outcomes for children. One example cited was two neighbouring communities in **British Columbia** with similar socio-economic profiles but different outcomes. Over four years, one community experienced a decline in the number of vulnerable children whereas the other had an increase. The difference was attributed to the first community having a neighborhood hub of integrated early childhood programs, while the other had a number of stand-alone programs and services.¹⁶

Another example of successful integration

of early childhood development programs and services is **Toronto First Duty** – a universal early learning and care program model that meets the developmental needs of children so they reach their full potential. Parents are supported to work or study and are provided support in their parenting role. Access to a range of child and family supports is available through this one site.

Australia has set up a number of Early Years sites where groups of community members are involved in the development of local strategies and initiatives to meet local needs. The team looks at what is working well for young children and identifies the missing supports and services. The group uses local resources, adds to these from other sources when needed, and shares their progress with other sites.

Sweden ranked first in the area of early childhood education and care according to the United Nations. Sweden has been working on reform of early childhood education and care for the past 30 years. Many changes have occurred, such as four- and five-year-olds being eligible for 525 free hours of child care a year. The aim of the Swedish system is to support children's development, education, and wellbeing and to help parents balance parenthood with employment or study.¹⁷

In Finland, researchers found that it was important to ensure early childhood educators were well trained. The professionalism of the early educators was the key to providing high quality early childhood education and care with the best cognitive and social outcomes for children. Better educated and trained staff members were more prepared and

able to create high quality environments because of their broad understanding of child development. Trained early educators supported and encouraged children, had leadership skills, problem solved, and developed plans that supported the children's perspective and elicited their ideas.¹⁸

HIGH QUALITY EARLY EDUCATION AND CARE OPTIONS

One of the most significant elements affecting a child's early development, after the home environment and relationship with parents, is the provision of high quality early education and care. Quality early childhood education and care programs contribute to the healthy development of children in the early years. Effective early childhood programs create benefits to society that far exceed program costs. High quality early education and care programs positively impact children's healthy development; allow for parents to return to the workforce who would not otherwise be able to work; and reduce social, special education and healthcare costs.

According to the Child Care Advocacy Association of Canada (CCAAC), children benefit from a high quality child care system and their development suffers when they experience poor quality care. Well-trained early childhood staff are able to provide developmentally appropriate programming and care that respects diversity and values all children and families.

Dr. Fraser Mustard's advocacy for high quality early learning for Canadian children contributed to the pan-Canadian Learn Canada 2020 declaration signed by all provincial and territorial Ministers of Education.¹⁹ The declaration states that, "all children should have access to high-quality early childhood education that ensures they arrive at school ready to learn." Children's readiness for learning in grade one is not about knowing letters and numbers, it's a combination of emotional, social, physical, language, and cognitive development. Nurturing children's developmental health in high quality early education and care programs must provide for all areas of children's development.

Value children, teach them with respect, value how well a parent knows their child and work with this.

Survey Respondent

The quality of early childhood education and care programming is crucial to the development of the children who access them.^{20, 21, 22} Longitudinal international research shows that high quality early education has a significant impact on child developmental health. The research also shows that children who attend high quality early education and care programs tend to have

better developmental outcomes at school entry than those who do not. It is not surprising that investment in early childhood has become a priority for economic development internationally and in Canada. This focus is supported by a policy paper released by The Toronto Dominion Bank on increasing the quality of early education programs as an economic priority²³ (See Appendix B).





CHAPTER 2

OUR VISION FOR THE FUTURE

2.1 Our Vision, Mission, Goals and Guiding Principles

Vision

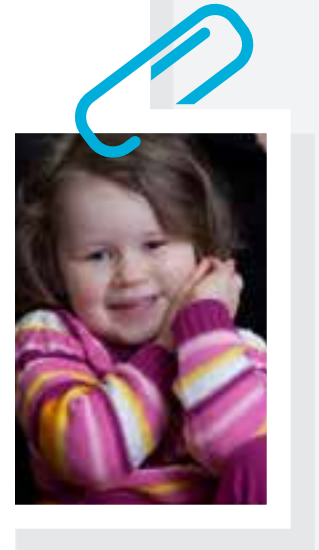
Children will have the best start in life, with supports that allow them to develop to their fullest potential; creating a positive future for themselves, their families, and their communities.

Mission

To provide equitable access to a continuum of inclusive, culturally relevant early childhood development programs, services, and resources for children, parents, families, and communities.

Our Goals

- 1) Increased accessibility and participation in early childhood development programs, services, and supports for children and families.
- 2) Enhanced quality of early childhood development programs, services, and supports.
- 3) Improved integration and collaboration at all levels of the early childhood development system.



Guiding Principles

CHILD-CENTRED AND FAMILY-FOCUSED

The most significant influence on a child's life comes from their parents and family. It is primarily the responsibility of the family to create a safe nurturing environment that meets a child's physical, emotional, interpersonal and intellectual needs. Families will be supported in creating a healthy environment and ensuring their children can thrive.

COMMUNITY-DRIVEN

Communities play an important role in identifying and responding to the culturally diverse and unique needs of their families and young children.

THE ROLE OF ELDERS

Elder's guidance and contributions as "knowledge keepers" will be incorporated into early childhood development programs and services.

INCLUSIVE

ECD programs, services and supports must be available to every child, be comprehensive, and meet the diverse needs of all children and families. Programs will respect cultural, spiritual, and societal differences.

PROGRAMS AND SERVICES FOCUSING ON VULNERABLE CHILDREN

ECD programs and services must be available to all children, and special

effort must be made to provide additional support for those most in need, to ensure no one is left behind.

PREVENTION FOCUSED

Programs and services will be prevention-focused and promote the overall health and wellbeing of young children and families.

EVIDENCE BASED APPROACHES

Programs and services for children and families will be grounded in research, based on best practices, and benefit from ongoing quality improvement.

2.2 Outcomes for Early Childhood Development



GOALS	COMMITMENTS	OUTCOMES
<p>Increased accessibility, affordability and participation in early childhood development programs, services and supports for children, families and communities</p> <p>Enhanced quality of early childhood development programs, services and supports</p> <p>Improved integration and collaboration at all levels of the early childhood development system</p>	<p>Expectant mothers will have access to evidence-based services that support improved outcomes for mom and baby</p> <p>Early intervention programming aimed at infants, children and parents will be expanded</p> <p>Early childhood assessment, intervention and responses will be improved</p> <p>Coordination and integration will be improved across the continuum of ECD programs and services</p> <p>Promotion, awareness and education initiatives on early childhood development will be available to families and communities</p> <p>Access to high quality, affordable early learning programs and child care services will be enhanced</p> <p>Monitoring, reporting and ongoing evaluation for continuous quality improvement in ECD programs and services</p>	<p>Mothers are healthy and give birth to healthy babies who remain healthy</p> <p>Children have safe, culturally appropriate early childhood development opportunities, including early learning and play</p> <p>Children and families participate fully in their community: no one is left behind</p> <p>Families have the knowledge, skills and resources needed to support their children's development</p> <p>Residents of the NWT have access to quality ECD programs, services and supports</p>

2.3 Building an Effective and Integrated Early Childhood Development System

Achieving our vision and goals requires an effective, comprehensive, and coordinated approach to improve early childhood development outcomes.



An effective early childhood development system recognizes that parents and caregivers have the primary responsibility and the most influence and impact on a child's wellbeing, learning and development. However, all parents need some level

of support or access to services at various points in their child's early years.

There is a broader responsibility to create conditions that allow families and children to

Everyone has a responsibility for children in the community.

Survey Respondent

reach their full potential. This responsibility extends to all levels of government, communities, non-government organizations, and businesses and employers.

QUALITY, INTEGRATED AND RESPONSIVE SERVICES

In order to be effective, an early childhood development system needs to provide programs and services that are responsive to the needs of children and their families. Responsive services are high-quality services that are community-driven and community-based, have a strong focus on promotion and prevention, and engage and empower parents and communities to develop the most appropriate response to their early childhood development needs.

Responsive early childhood development programs and services are integrated and linked in different ways, depending on local needs and each child and family situation. This includes integration that encourages interdisciplinary approaches such as common assessment,

There are several different programs and services for families with young children but they are often disconnected. It is really important to bring those services and programs together.

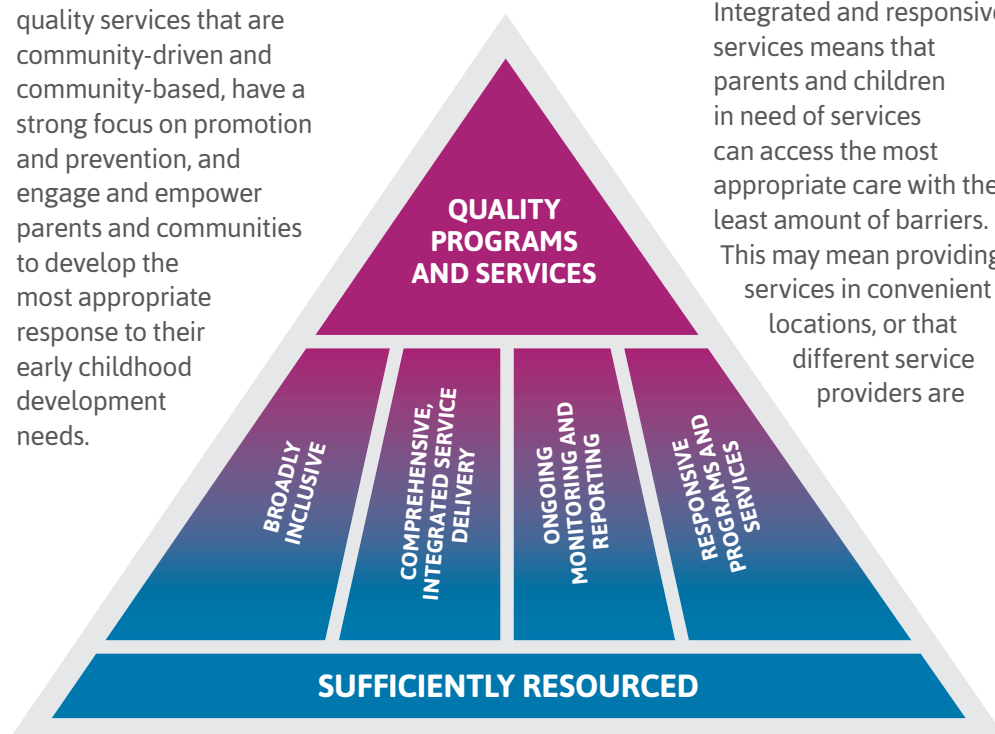
Survey Respondent

sharing of information, and coordination of program and community resources.

Integrated and responsive services means that parents and children in need of services can access the most appropriate care with the least amount of barriers.

This may mean providing services in convenient locations, or that different service providers are

communicating to coordinate a client's care. It also means connecting services – offering two services in one location, or expanding the roles of existing service providers so that multiple issues can be addressed in one visit and clients benefit from improved continuity. This will result in a more seamless, holistic service delivery from the perspective of families, while improved integration and communication between agencies will prevent families and children from “falling through the cracks”.



Everyone Has a Role to Play

FAMILIES – Parents and other primary caregivers have the most direct influence on young children. Their role is to provide a nurturing home environment and to access services and supports to best meet a child's developmental needs for emotional security, physical health, socialization, cultural identity, and stimulating play-based learning experiences.

ELDERS – Elders hold a wealth of knowledge and are highly respected and valued by the younger generations. Incorporating Elders and Aboriginal practices into the spectrum of care can strengthen ECD and ensure it is reflective of the unique cultural practices of the north. Involving Elders in the delivery of programs and services will help to ensure that ECD initiatives are culturally relevant and appropriate,

and that they support community efforts to preserve and revitalize culture and language.

COMMUNITY – Aboriginal and municipal governments, non-government organisations, community leaders, volunteers, businesses, and service providers have a responsibility to ensure the community is child and family-friendly. This includes fostering a culture where children and parents are valued and supported,



ACCESSIBLE SERVICES

To be effective, ECD programs, services and supports must be available to every child, be comprehensive, be affordable, and meet the diverse needs of all children and families. Programs must respect cultural, spiritual, language and societal differences and aim to remove inequities for those most disadvantaged or at-risk.

To reach disadvantaged or at-risk children and families, special effort must be made to provide additional support for those most in need to ensure no one is left behind. The following practice considerations should guide service providers and decision makers in engaging disadvantaged or socially isolated children and families. Programs and services need to go where the families are. The

environment cannot be intimidating, unfamiliar or in an inconvenient location. Programs and services need to be promoted in a non-stigmatizing and non-threatening way. Services should be delivered in a universal venue such as a health clinic, a band office or a school. Consideration also needs to be given to the learning style of parents, as many parents may not be comfortable in a classroom type

of setting, and may prefer a more casual, or informal environment. A non-stigmatizing approach also includes the behaviours of services providers, in respecting and valuing families and children.

following inclusive planning processes for the built and natural environment that take into account the needs of children and families, and promoting community safety.

WORKPLACE – Employers have a role in supporting the parenting responsibilities of all workers, through such mechanisms as family-friendly leave provisions and flexible working arrangements. Businesses also have an

important role in the direct provision of a range of services that support children and families in their local community.

GOVERNMENT – All levels of government, including Aboriginal, Federal, GNWT, and Municipal, have programs to deliver services and supports for young children and families. Governments provide leadership and build capacity

through funding, planning, workforce development, research, and monitoring to ensure effective policy responses for children and their families. This includes providing quality, accessible and affordable services which have a central focus on supporting positive development of children as well as supporting the participation of parents in community life.

2.4 Looking Forward, Looking Back

A review of the 2001 *Early Childhood Development: Framework for Action* revealed successes in the programs, services and supports provided to children and families in the NWT, and also identified many opportunities for future growth. An overview of the review’s findings involved identifying challenges and barriers, successes, and gaps (see Appendix C). Significant gaps identified included the following:



- The lack of program monitoring and evaluation was identified as a gap in the successful implementation of the *Framework (2001)*. Consistent data collection and analysis did not occur. This is important to make sure the program or service is meeting identified outcomes and expectations.

- Gaps in services and funding for children with challenges, disabilities, or developmental delays were also identified. This area did not receive funding specific to the 2001 *Framework*. This is important for policy makers to prioritize given the known advantages of investing and providing appropriate supports early in life.

The government is investing significantly in early childhood development. We recognize that, for this investment to be effective, changes to our approach are needed to respond to changes in family structures over the past years, new information about brain development, and many identified opportunities for strengthening our programs, services, and supports.

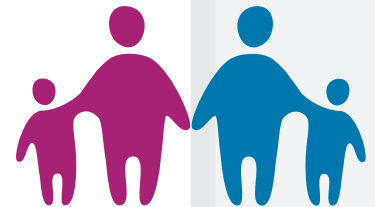
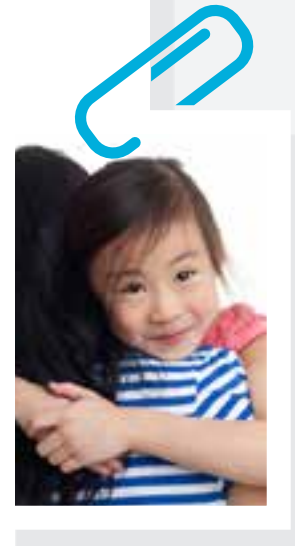


2.5 Building on the Strengths of Early Childhood Programs and Services

Both the Territorial and Federal governments invest in a number of early childhood development programs and services including prenatal care and public health, health promotion, early literacy programs, child care, preschool education, recreation, and supports for families at risk. Through public engagement and research, we have reaffirmed the relevance of our existing programs and services. Our efforts will be on refocusing and enhancing information, access to services, quality improvement, accountability, and sustainability.

HEALTHY PREGNANCY, BIRTH AND INFANCY

- **The Canada Prenatal Nutrition Program (CPNP)** is a community-based program that promotes public health and provides support to improve the health and well-being of pregnant women, new mothers, and babies. Major components of the program are: nutrition screening, education and counseling; maternal nourishment; and breast feeding promotion, education, and support.
- **Fetal Alcohol Spectrum Disorder (FASD) Programs** aim to support and deliver FASD awareness, prevention, and support to communities. These programs are designed to reduce the number of babies born with FASD, and to support children and youth who are diagnosed with FASD.





- **The Maternal Health program** provides care to women from pre-conception to six weeks postpartum.
- **The Infant and Child Health program** includes all children from newborn to school entry, including pre-kindergarten screening and immunization. The program includes: breastfeeding support; immunization; infant/child physical assessment; growth monitoring; hearing and vision screening at school entry; and parent education on child nutrition, safety and growth, and development.
- **Breastfeeding programs** promote and support public health and health care efforts to make breastfeeding the normal method of infant feeding in the Northwest Territories, in order to provide proven benefits to the mother, infant, and society.
- **The Healthy Family Program** is a voluntary, intensive, home visitation program for young mothers and new parents. This early intervention program promotes the importance of the nurturing parent-child relationship, aimed at increasing the child's developmental opportunities and fostering positive interaction for improved outcomes in the child's future.



PROMOTION AND PREVENTION IN EARLY CHILDHOOD DEVELOPMENT

- **Oral health promotion** is delivered at the community level by Dental Therapists, community health representatives, wellness workers, and day care operators. Existing oral health campaigns for ages 0-6 include Little Teeth are a Big Deal and Lift the Lip.
- **The Health Promotion Fund** supports community-based projects to improve health and wellness, promote healthy lifestyles, and reduce preventable diseases. The Fund provides small scale project funding to support community-based approaches to: tobacco harm reduction and cessation; sexual health; healthy eating; active living; healthy pregnancies; and injury prevention. The Fund also supports projects for babies, children, youth, pregnant and breastfeeding women, and their families. Non-profit organizations in the NWT who have health promotion ideas are encouraged to apply.
- **Healthy Choices Framework** - the Healthy Choices Framework includes a broad range of activities under the pillars of: healthy eating; physical activity; mental wellness; injury prevention; healthy sexuality; and living tobacco free. Healthy children and families are addressed across all pillars. GNWT departments and agencies collaborate through an interagency working group to identify and implement initiatives to build awareness, knowledge, and skills.

SUPPORT FOR AT-RISK FAMILIES

- **Rehabilitation services** such as speech language and occupational therapy services are provided in a range of settings, including the home and health service agencies, and can include assessment, treatment, intervention, and education.
- **Respite care** is the provision of short-term, temporary relief to those who are caring for family members who might otherwise require permanent placement in a facility outside the home. Respite programs provide planned short-term and time-limited breaks for families and other caregivers of children with a developmental delay or disability, in order to support and maintain the primary caregiver relationship.



QUALITY EARLY EDUCATION AND CARE PROGRAMS AND SUPPORTS

- **The Early Childhood Program** supports licensed child care facilities to ensure healthy and safe environments, as well as early childhood education and care programs, to ensure high quality positive learning environments for children 0-6 years of age. The Early Childhood Program licenses and monitors all regulated early learning and child care providers in developing early childhood education and care programs. The Early Childhood Program also ensures high quality, research-directed early education and care programming. This includes research supported play-based exploratory environments that support children's development and, where required, enable parents to access employment or training opportunities. The child care centre operators are supported to develop programs that are community based and culturally relevant.
- **Regional early childhood consultants** liaise between the community and Child Care Centres and provide educational training to early childhood educators to help develop their skills, knowledge, and attitudes necessary to promote the well-being of children, families, and communities. The training is provided annually, and may also be provided on an ongoing basis based on the regional needs of children and families.
- **The Healthy Children Initiative**, a joint initiative with ECE and HSS, provides funding to support communities to enhance existing early childhood programs and services. Community organizations can use funding to expand programming targeted to young children, provide supports directly for parents, or to provide opportunities for communities to be involved in promoting healthy children in a variety of ways, such as: parenting education; nutrition programs; rehabilitation services; respite; toy lending; library resources; and home visiting programs.
- **Child and Family Resource Centres** - funded through the Healthy Children Initiative, consist of integrated and collaborative programs and services, such as: parenting education; nutrition; rehabilitation services; respite; toy lending; library resources; and home visiting programs.

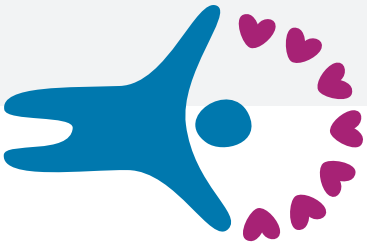


- **Family Literacy Programs** - The NWT Literacy Council, funded by ECE, develops and delivers family literacy training, develops resources, provides support to communities to develop and deliver family literacy programs, and promotes the importance of family literacy.
- **Language Nest** is an immersion-based approach where young children acquire their traditional Aboriginal language naturally in immersion settings. As older speakers of the language take part in an early childhood program, intergenerational language transference occurs. In the NWT, Language Nests facilitate language learning by promoting the language skills of community Elders, children, parents, and grandparents.
- **Early Development Instrument (EDI)** is a population assessment tool that provides a snapshot of groups of children's developmental health at school entry. The EDI is a population measure, like a census. The EDI data is issued to guide decision-making to support healthy child development in communities throughout the NWT.
- **Early Childhood Development Certificate Program** is a distance-delivered Aurora College certificate program that provides training for Early Childhood Development Educators. The program includes the National Occupational Standards and new research on early childhood development.



2.6 Recommendations from the NWT Public Engagements

While evidence and research play a key role in shaping the future for young people in the Northwest Territories, so too do the opinions and ideas of our residents. Between December 2012 and January 2013, the Government of the Northwest Territories engaged in public discussions on early childhood development, learning, and care. Through roundtable discussions, on-line surveys, webinars, home visits, regional meetings, focus groups, and sharing circles, parents, community members, elders, early childhood professionals and other stakeholders were given the opportunity to provide their opinions and ideas for the future of childhood development in the Northwest Territories.



Engagement with a wide range of people with an interest in early childhood development called upon decision-makers to create

an integrated, sustainable, and affordable system of supports for young children and their parents. That system needs to be

culturally sensitive and relevant, and delivered by a professional workforce of highly skilled and well-paid early childhood staff. And finally, stakeholders advised that early childhood

Public engagement and early childhood development research reaffirmed the relevance of existing NWT programs and services, and the framework for ECD.

Our efforts will be on refocusing and enhancing information, access to services, quality improvement, accountability, and sustainability.

programs should focus particularly on meeting the child's emotional and social needs.

Stakeholders called for an ECD Framework with renewed focus on, and commitment to, supporting children and families in the early years and ensuring high quality programs and services are accessible to people.

Spirituality is missing. Part of this is because of our disconnection with the land. If we live spiritually, we live in harmony. It is a foundation.

Survey Respondent



PHOTO: TESSA MACINTOSH

A Snapshot of the Recommendations from the NWT Public Engagements

- Build on the successes of existing programs.
- Ensure that high quality education and care programs are accessible and affordable to all families.
- Provide more programs that encourage and support parental involvement in children's learning and development, both at home and in early childhood education and care.
- Provide more programs aimed at the whole family, such as childhood development and family resource centres, community events and role models, and facilities for family activities and recreation.
- Support children's connections to their culture through involvement of Elders in early childhood education and care programs, immersion in their Aboriginal language, and on the land and traditional activities.
- Provide all ECD professionals with cultural awareness training.
- Address the infrastructure challenges of finding safe and appropriate locations to expand program offerings by looking at what is available in communities.
- Expand programs aimed at nutrition.
- Decrease wait-times and improve access to services such as occupational therapy, speech therapy, public health, and community counseling services.
- Early intervention programs should include consistent use of diagnostic and screening tools, and provide education on health, nutrition, and development.
- Build public awareness of early childhood development, including: information on programs and services; the importance of healthy early childhood development; and what parents and families can do to support children's healthy development.
- Continuity and coordination of services, intake and referral procedures, and service navigation must be improved, and programs must be sustainable.
- Improve access to high quality, affordable education and care programs that are run by qualified and appropriately compensated professional staff.





CHAPTER 3

OUR COMMITMENTS

CHAPTER 3

Our Commitments

Based on research, best practices, and public engagement, we have developed a 10-year framework that will guide future action plans and departmental business plans.

The strategy will refocus our efforts to improve access for children, their parents, families, and communities, to high quality, comprehensive, integrated ECD programs that are community driven, sustainable and culturally relevant.

A child's early experience and environments have long-reaching impacts. Children who are well cared for in the earliest years are healthier throughout their lives, are far more likely to be successful in school, are more productive at work, and have greater

financial success. A nurturing physical and emotional environment helps the brain form the right connections, in the right order, for healthy development.²⁴ Research is clear that the first and most influential teachers in children's lives are their mothers, fathers, and other significant caregivers. Research also indicates that there is a direct link between the quality of early care and early childhood development, and strong evidence that integrated child development programs improve outcomes for children.

The Departments of Health and Social Services and Education, Culture and Employment have made the following commitments to move us towards achieving our goals. Through the development of a detailed action plan, each of these commitments will be supported by specific actions, deliverables, and timelines. Reporting, monitoring, and accountability mechanisms will also be put in place.



Our Goals



1. Increased accessibility, affordability, and participation in early childhood development programs, services, and supports for children, families, and communities.
2. Enhanced quality of early childhood development programs, services, and supports.
3. Improved integration and collaboration at all levels of the early childhood development system.

PHOTO: TESSA MACINTOSH



OUR COMMITMENTS

1. Expectant mothers will have access to evidence-based services that support improved outcomes for mom and baby.
2. Early intervention programming aimed at infants, children, and parents will be expanded.
3. Early childhood assessment, intervention, and responses will be improved.
4. Coordination and integration will be improved across the continuum of ECD programs and services.
5. Promotion, awareness, and education initiatives related to early childhood development will be available to all families and communities.
6. Access to high quality, affordable early learning programs and child care services will be enhanced.
7. Monitoring, reporting, and ongoing evaluation for continuous quality improvement in early childhood development programs and services.

1 EXPECTANT MOTHERS WILL HAVE ACCESS TO EVIDENCE-BASED SERVICES THAT SUPPORT IMPROVED OUTCOMES FOR MOM AND BABY

Healthy childhood begins with healthy mothers, and an expectant mother's environment and behaviour have permanent effects on the health and well-being of her child. Expectant mothers should have access to the knowledge, skills, and supports required to provide a healthy prenatal environment. Prenatal care models should effectively incorporate opportunities for health promotion and disease prevention. This may include smoking cessation initiatives, promotion of breastfeeding and proper diet, monitoring existing mental health and addictions problems, monitoring fetal growth and development, and screening for conditions such as preeclampsia and diabetes. Providing birthing options closer to home decreases stress, restores community pride, improves culturally appropriate care, and increases continuity of care. In addition, universal newborn screening identifies babies who may have been born with any one of a number of rare disorders. When these disorders are found and treated early, the chances of serious health problems are prevented or reduced later in life. If not diagnosed and treated, these disorders can cause severe mental handicap, growth problems, health problems, and sudden infant death.

Areas for action:

1. Increase access to midwifery services and further integrate midwifery into perinatal care.
2. Standardize prenatal referrals for expectant mothers with addiction issues.
3. Improve outreach and support for expectant mothers and fathers in the areas of nutrition, breastfeeding, referrals to community groups and resources, education around smoking, alcohol and drugs, labour and delivery information.



2 EARLY INTERVENTION PROGRAMMING AIMED AT INFANTS, CHILDREN, AND PARENTS WILL BE EXPANDED

Infancy is the most critical period in life for healthy brain development. During the first year of life, the number of neural connections that form in the brain is at its peak. Programming for mothers and infants during this early stage of life will promote healthy brain development and in turn support healthy development of a child's sensory and language abilities, and higher cognitive functions such as exploring, learning, and problem solving.

Early intervention also promotes the importance of the nurturing parent-child relationship, aimed to increase the child's developmental opportunities through learning and play, and foster positive interactions for improved outcomes in the child's future. Promotion of this nurturing relationship between parents and their children is particularly important due to the legacy of colonization in the North and the profound impact of residential schools on the family unit. The screening required to identify developmental issues early on also provides a way to identify at risk families that may benefit from targeted support.



Areas for action:

4. Build on the strengths of the Healthy Family Program in all regions in the NWT.
5. Expand programs aimed at improving oral health and nutrition.





3 EARLY CHILDHOOD ASSESSMENT, INTERVENTION, AND RESPONSES WILL BE IMPROVED

When developmental impairments do occur, it is important that these issues be identified early on so that interventions can begin as soon as possible. While less than 5 per cent of children are born with developmental delays, by school age more than 25 per cent of Canadian children struggle and are behind where they should be in their physical, emotional, social, language, or cognitive development. This means that for every 20 children, five have developmental delays at kindergarten. One of the five is delayed at birth, and four of the five are delayed as a result of their experiences during their first five years of life. Environmental factors that contribute to delays in early childhood include trauma-related impacts of family violence, addictions issues in the home, neglect, malnutrition, and physical inactivity. Early intervention is important in preventing developmental delays, minimizing the negative effects of existing developmental challenges, and supporting children at risk.

Areas for action:

6. Standardize the use and implementation of universal screening tools and assessments aimed at identifying vulnerable or at risk families and children.
7. Ensure consistent, equitable access to Occupational Therapy, Speech Therapy, Public Health, and community counseling services, and follow up for children identified with developmental issues.



4 COORDINATION AND INTEGRATION WILL BE IMPROVED ACROSS THE CONTINUUM OF ECD PROGRAMS AND SERVICES

There are a number of rationales for integration and collaboration. One is the need for seamless or holistic service delivery, from the perspective of families, so that families do not need to deal with numerous agencies or duplicate time and effort in informing agencies of their needs. Collaborative and integrated services can also create efficiencies for staff, allowing them spend more face-to-face time with families and children, thereby improving the quality of care. Expanded roles for significant and trusted family workers such as nurses, teachers, social workers, and early childhood educators can improve the quality and accessibility of services for families. Improved integration and communication between agencies can also prevent families and their children from “falling through the cracks”, ultimately improving access to quality ECD programs, services, and supports.

Areas for action:

8. Strengthen the alignment between early childhood programs and services and the needs of communities.
9. Support communities to improve the coordination and alignment between early childhood programs.
10. Support at risk children and families using an interdisciplinary approach.



5 PROMOTION, AWARENESS, AND EDUCATION INITIATIVES RELATED TO EARLY CHILDHOOD DEVELOPMENT WILL BE AVAILABLE TO ALL FAMILIES AND COMMUNITIES

Health promotion and education activities provide mothers, fathers and other caregivers with information on healthy development and available programming for parents and children, and are an essential piece of a comprehensive early childhood development system. Some families are more likely than others to pursue support, and often those that do not are the most in need. Reaching out to people, through raising awareness and sharing culturally relevant child development knowledge, is an effective way of promoting services and communicating important health messages. The result of this outreach is that parents have the knowledge, skills, and resources to make healthy choices for their children, and that families and children most at risk are not left behind.

Areas for action:

11. Target campaigns to raise awareness about the importance of early childhood development, the impact of the early years, and the role of parents and those who work with children.
12. Use innovative mediums and technology to reach people with culturally relevant promotion and prevention tools, updates on available programming for parents and children, and health and education messages.
13. Strengthen preventative approaches to children’s health and well-being, and build understandings of healthy child development in children and youth.



6 ACCESS TO HIGH QUALITY, AFFORDABLE EARLY LEARNING PROGRAMS AND CHILD CARE SERVICES WILL BE ENHANCED

High quality early education and care programs directly impact children’s healthy development. High quality early childhood programs provide “climates of delight” for children, and support each child’s strengths, interests, and development using evidence-based approaches such as play-based learning as the foundation. Such programs also provide opportunities for parent engagement in children’s learning, and opportunities to build understandings of how to support children’s continued development at home. Early education and care programs promote peer relationship building, self-regulation development, and opportunities to explore the surrounding world. Research is clear that high quality early childhood education programs have a significant impact on children’s developmental outcomes.

Areas for action:

14. Address the infrastructure challenges of finding safe and appropriate locations for early programs and child care services, as identified by each community.
15. Restructure administration and finance processes for all ECD programs to promote equity, inclusion, quality, and program stability.
16. Provide access to high quality early education programs.
17. Support culture-based programs that foster Aboriginal language development in children, and involve Elders in those programs.
18. Develop cultural competencies of early childhood professionals.
19. Enhance program resources for early education and care programs.
20. Improve the quality of licensed early childhood education and care programs.
21. Increase the number of qualified early education and care professionals working in licensed programs.

7 MONITORING, REPORTING, AND ONGOING EVALUATION FOR CONTINUAL QUALITY IMPROVEMENT IN ECD PROGRAMS AND SERVICES.

Clear and appropriate accountabilities and reporting functions for ECD will ensure that credible and timely information on the ongoing relevance and performance of all ECD program spending is available, and is used to support evidence-based decision-making with respect to policy development, expenditure management, and program quality assurance.

Clear roles and responsibilities, and built-in performance monitoring indicators and evaluation measures, provide timely feedback and allow for adjustments along the way - ultimately increasing the quality of the program. The result will be improved quality of the programs, services and initiatives available to children and families.

Areas for action:

22. Develop a Monitoring, Evaluation, and Accountability (MEA) Plan for the renewed Early Childhood Development Framework and Action Plan.





APPENDIX A: Executive Summary of Success In Early Childhood:
How Do We Get There?



Appendix A:

Executive Summary of Success in Early Childhood: How Do We Get There?

Today's children will determine what society will be like in the future. They will shape the world! Our children are precious and full of potential. Yet they are also vulnerable, and deserve to grow up in a safe, nurturing and stimulating environment. Children who are well cared for in their earliest years are far more likely to be successful in school, more productive at work, have greater financial success and be healthier throughout their lives. Children with a good start in life are less likely to fall behind in school, get into trouble with the law, depend on social services, live in poverty, be homeless or have issues with addictions.

Early childhood is the time in a child's life from the prenatal period to when they begin formal schooling. This includes the infant, toddler and preschool years.

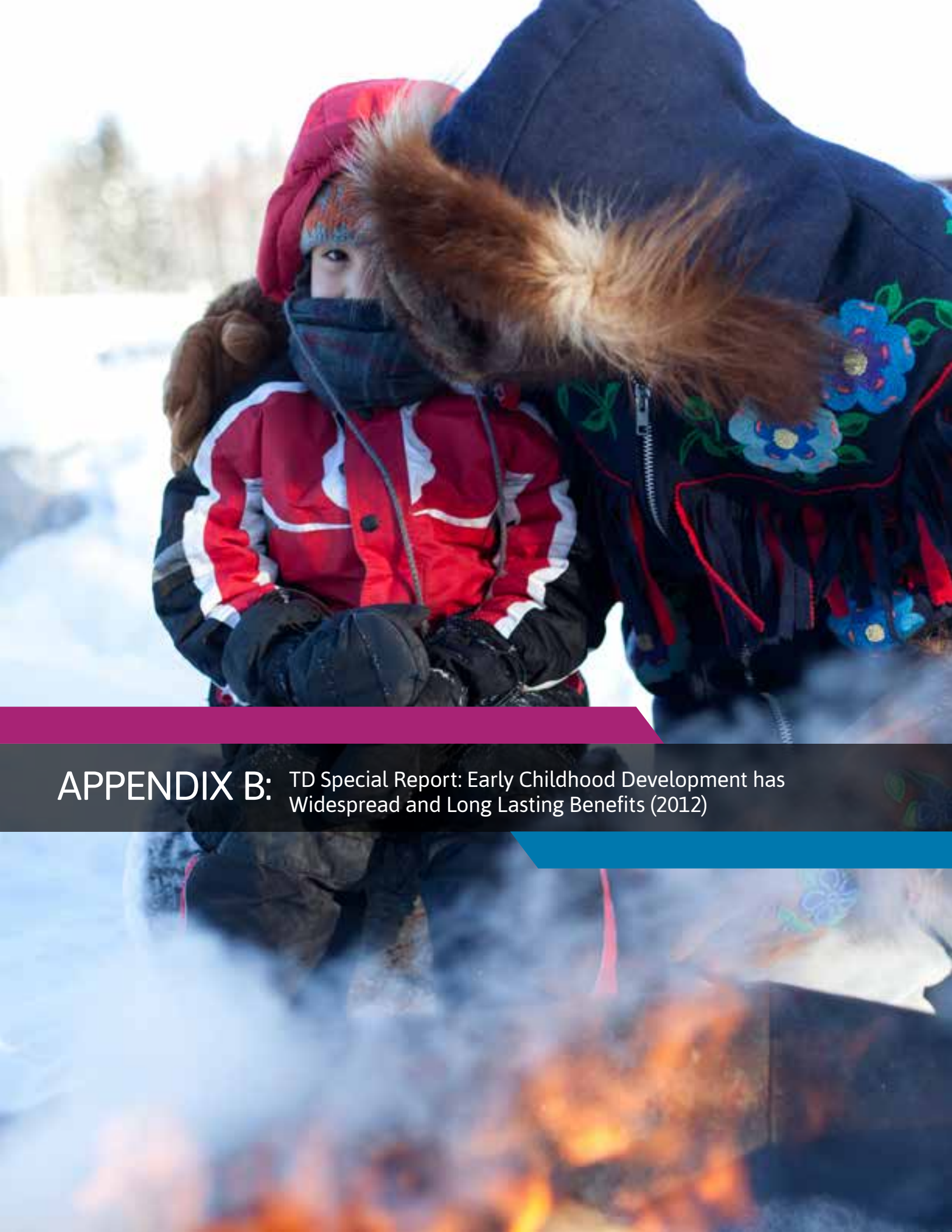
Early childhood development refers to the skills, abilities and milestones that children reach – or are expected to reach – by certain ages in their first years of life. These milestones include walking, talking, learning, sharing and caring about others.

WHY THE EARLY YEARS ARE SO IMPORTANT

- James Heckman, an economist and Nobel Prize winner has calculated that spending \$1 on early childhood programs pays the same dividends as spending \$3 on school-age programs and \$8 on education for young adults. How can that be? The answer has to do with the importance of early childhood development and its life-long impact.

RESEARCH ON BRAIN DEVELOPMENT TELLS US THAT:

- The child's capacity to learn, create, love, trust and develop a strong sense of self are determined early in life.
 - The brain grows most rapidly between birth and age three.
 - Brain development continues throughout life, but the brain is most open to change during the early years.
 - The brain responds and adapts to the child's relationships and environment.
 - Brain connections in early life are made that control different physical, behavioural and cognitive (thinking) functions, including hearing, vision, language, learning, problem solving and memory.
- Once brain connections are formed, they are more difficult to change.
 - What happens in early childhood helps prevent heart disease, diabetes, obesity, and social issues of crime, alcoholism, illegal drug use and abuse in adults.
 - The rate of teen pregnancy, delinquency and social services involvement is decreased.
 - Learning problems that keep children from reaching their full potential are reduced so the child can achieve his or her goals and dreams.
 - It is more effective and less costly to create the right early childhood development conditions than to address problems later in life.



APPENDIX B: TD Special Report: Early Childhood Development has Widespread and Long Lasting Benefits (2012)

SPECIAL REPORT

TD Economics



November 27, 2012

EARLY CHILDHOOD EDUCATION HAS WIDESPREAD AND LONG LASTING BENEFITS

The following is a literature review of the benefits and costs associated with high-quality early childhood programs. It is not meant to provide explicit policy recommendations, as it is a very complex sector and requires a more in-depth analysis before detailed recommendations can be made.

Highlights

- There is a great deal of literature showing compelling evidence of the benefits of early learning. Not only do high-quality early childhood education programs benefit children, they also have positive impacts on parents and the economy as a whole.
- Several studies show that the benefits of early childhood education far outweigh the costs. However, quantifying these benefits is not an exact science and results are likely subject to a large margin of error.
- Given the unquestionable number of benefits that early childhood education can provide, it follows that more focus should be put on investing in, and improving, the system. Indeed, in most parts of Canada, there currently exists a gap between parental leave and the start of formal schooling, and the limited child care spaces that are available are often very costly for parents.
- The federal and provincial/territorial governments provide some funding for early childhood education, and have taken some steps to improve the system. Still, public spending in Canada falls short of that in many advanced economies. While governments at all levels are in no position to boost program spending at this time given budget constraints, this is one area that they should consider making a high priority over the medium term, as their finances move back into balance.
- Ultimately, investment in early education can help to address core economic and social challenges facing Canada. It can help reduce poverty, address skills shortages, improve productivity and innovation, and a host of other national priorities.

Education and skills development unlock the potential of individuals and shapes the quality of their lives. Learning takes place in all stages of life, and the biggest impact happens early in life. While it is well acknowledged that primary, secondary and post-secondary schooling develops and enhances key life skills and abilities, the learning that occurs during the first few years of life can have important, long-lasting effects that are often underestimated. There is a great deal of literature showing overwhelming benefits of high-quality, early childhood education – gains not only for children, but for parents and the economy as a whole. A large number of studies estimate that the benefits of early learning far outweigh the costs. Indeed, the analysis shows that for every dollar invested, the return ranges from roughly 1.5 to almost 3 dollars, with the benefit ratio for disadvantaged children being in the double digits. One needs to acknowledge, however, that quantifying these benefits is not an exact science and a large margin of error

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likely exists. So, the benefit/cost ratio must be interpreted with caution. Nevertheless, with an unquestionable number of positive effects, it is evident that more focus should be put on investing in, and improving, the early learning system.

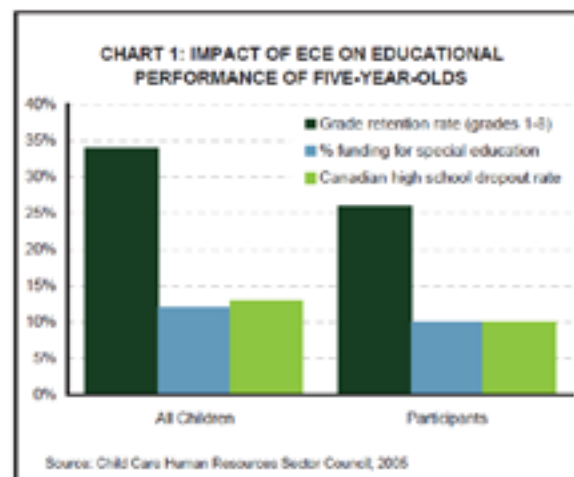
In Canada, early childhood education is provided in a piecemeal fashion. In most parts of the country, there is a gap between the end of parental leave and the start of formal schooling, during which parents are on their own to find care and education for their children. Oftentimes, where it is available, the cost for parents is prohibitively high. The quality of available early child care is also varied across communities.

While the federal and provincial governments do provide over \$11 billion of funding, spending on the early childhood education sector in Canada is lagging behind the majority of other advanced economies. This suggests that more fiscal dollars should be earmarked for early learning. To give a rough estimate, it would take an additional \$3 to \$4 billion of investment to bring Canada up to the average of other industrialized nations. It is also not evident why primary education starts at age 4-5. This seems to be a legacy of a policy that was in place before we understood the degree of learning that takes place early in life. Unfortunately, governments at all levels are in deficit reduction mode, and are therefore unlikely to take on large-scale new policy initiatives in the near term. As fiscal rebalancing occurs, the federal and provincial governments should give additional thought as to how to invest more, and how to invest more effectively, in early childhood education.

Ultimately, investment in early education can help to address core economic and social challenges facing Canada. For parents, it can help to foster greater labour force participation. But more importantly for children, greater essential skills development makes it more likely that children will complete high school, go on to post-secondary education and succeed at that education. It raises employment prospects and reduces duration of unemployment if it occurs. Investment in skills development can help to address future labour shortages and add to productivity and innovation. It can also reduce poverty and help to address income inequality. At the end of the day, investment in education is the great enabler that leads to a stronger economy and society.

Early learning has long-lasting impacts on children ...

The benefits of early childhood education are widespread, but they start with the children. There is scientific evidence showing that experiences during the first five years



of life have a material impact on economic and social success, including educational and career attainment, health and overall well-being. While it was previously thought that human abilities were driven largely by genetics and less by the environment, many scientists now believe that the opposite is true, with a person's outcome in life driven largely by what happens after birth. Some have argued that a person's abilities are roughly 80% determined by their environment and only 20% by genetics¹. Indeed, basic abilities can actually be altered early in life, allowing children to reach a higher potential. Babies are born with a set of genes, but experiences early in life can alter gene expression and also shape the quality of the brain architecture. The brain is more receptive to stimuli before the age of six, suggesting that it is more difficult to improve a child's learning abilities later in life.

The literature is overwhelmingly consistent in finding that exposure to high-quality education in the early years generally leads to improved cognitive and language development, as well as better numeracy abilities – all skills that are essential to succeed in today's society. In fact, research indicates that early math, reading and attention skills are the best indicators of educational attainment². Early language exposure impacts the extent of a child's vocabulary, as well as verbal and literacy skills later in life. Indeed, research in the U.S. indicates that weak verbal skills at the age of three tends to result in poor language and literacy skills once the child begins school, and poorer overall academic careers³. A Quebec study found that reading activities beginning at 18 months can contribute to a child's reading ability and, in addition to conversation, can help maximize a child's

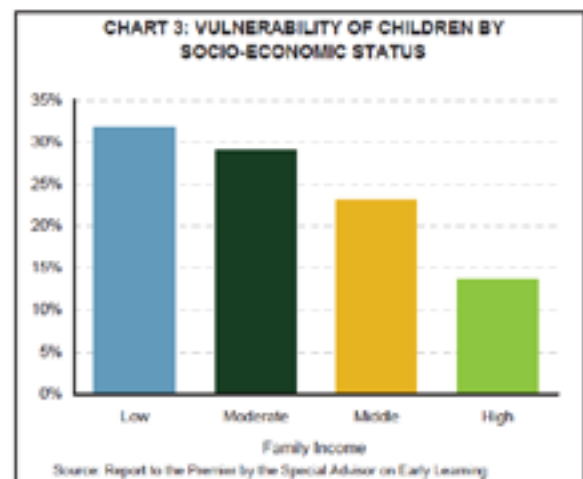
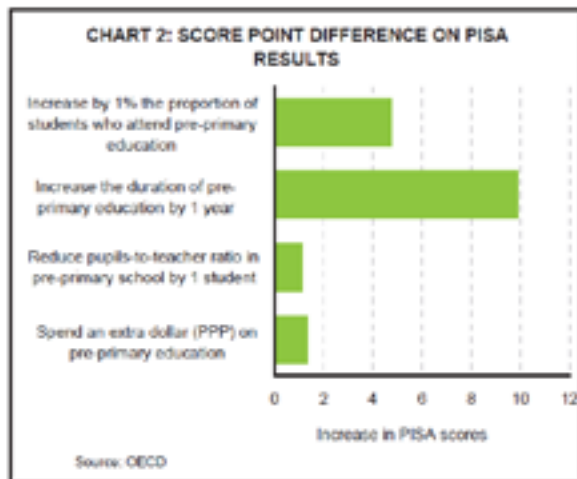


TABLE 1: ECONOMIC AND SOCIAL OUTCOMES

	Participants* (%)	Control Group (%)
Smoked	41.5	50.7
Used hard drugs	22.2	29.3
Used soft drugs	45.3	54.4
Treated for drug or drinking problems	22.2	33.9
Owned a home	36.7	26.6
Owned a car	73.8	60.9
Had life insurance	66.5	53.8

Source: Child Care Human Resources Council
 *Participants of the High/Scope Perry Pre-School Program

vocabulary⁴. Moreover, research in New Zealand found that after age eight, improving performance levels became much more difficult⁵. The benchmark for international comparison of youth skills development is the Programme for International Student Assessment (PISA) survey. The scores clearly indicate that children who participated in an early childhood education system tend to perform better than those that do not (See Chart 2).

In addition to building fundamental skills, early childhood education programs can help to identify learning or developmental delays at an early stage, and provide children and parents with appropriate support. Not only does early detection allow the child to receive specialized help sooner, addressing such issues at the onset can help to prevent an issue from intensifying and having to correct it at a later age, which could prove to be a bigger challenge – and more costly.

There is also compelling evidence that economic, social and health outcomes are better for children who were exposed to early education. The development that takes place

in a high-quality early childhood education program helps children to be better prepared for, and transition more easily into, kindergarten. Studies show that children who enter kindergarten with a higher skill set generally experience fewer grade repetitions, on time graduation, lower dropout rates and higher post-secondary attendance than those that enter with vulnerabilities. The more education and skills that people acquire, the more able they become, leading to higher productivity. In turn, job prospects are brighter and potential earnings are higher, ultimately reducing the likelihood of an individual ending up in poverty and/or on welfare. A U.S. study showed that participants of an early childhood education program were less likely to smoke, drink alcohol, and use drugs, while they were more likely to own a home and a car⁶. (See Table 1)

In addition to fostering cognitive development, early childhood education programs influence the socio-emotional development of children. Here, the literature is somewhat divided. On the positive side, some research shows that children enrolled in early childhood education programs have less behavioral problems, good relationships with their peers and better compliance with adults⁷. Other studies found no positive or negative effects, while few revealed that extended periods of time in child care led to increased aggression and lower quality of mother-child interaction⁸. That said, the studies that found negative implications noted that the quality of child care mattered, and that the findings may have been influenced by external factors, leading to biased results. Thus, of the research that was conducted with more credible methodology, the results were generally positive.

There is widespread agreement that disadvantaged

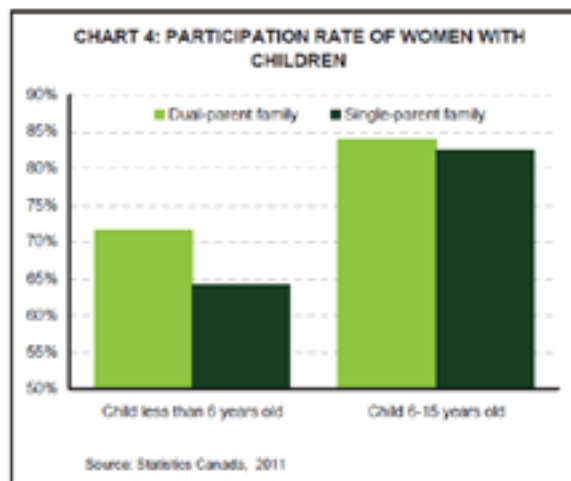
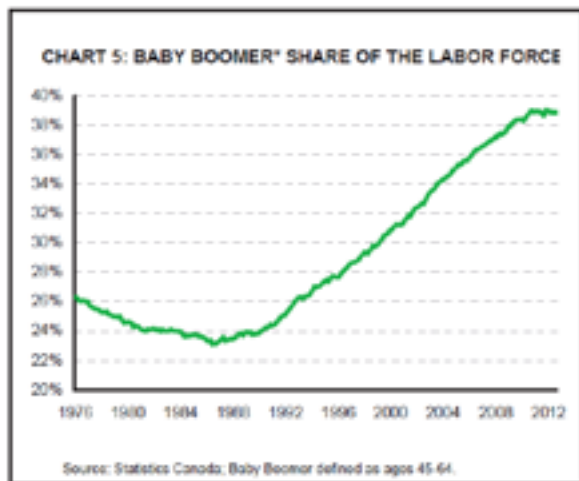
children – typically taken to mean those from low-income families – receive greater benefit from early childhood education, particularly with respect to social outcomes and future economic well-being. Still, early learning has been proven to improve the abilities of all children, even those from more affluent families.

...and allow parents to increase family income

Access to high quality, affordable childcare can generate further benefits for families, as it allows mothers (or fathers) to enter or return to the labour force, or to upgrade their skills through schooling or other personal development programs. For low-income families or single parents, the ability to work while children are young can mean the difference between living off of welfare or rising above the poverty line. And, this isn't just an inflow of money in the short-term. The more one works or becomes educated, the higher the potential salary throughout their lifetime. Moreover, it can impact decisions on whether to have children, and if so, how many.

Higher family income is beneficial for children too, as it can give them access to a higher quality of life, both through health and nutrition, as well as through increased opportunities to engage in extra curricular activities that parents may otherwise not be able to afford.

While there are clearly benefits of increased family income, there have been some findings that point to negative effects of parents working rather than staying home with a child. These include more hostile and less consistent parenting, a lower quality child-parent relationship and behavioural issues with the child, such as aggression⁹. However,

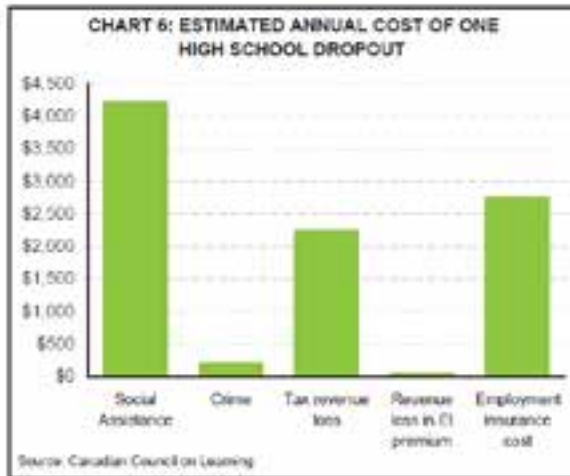


researchers note that benefits from the increase in income may offset this negative parenting outcome. Moreover, the study was based on short-term findings, suggesting that the negative impacts could be transitory and that outcomes could be better in the long run. As well, there was no control group, suggesting that the results could be biased.

Better educated children leads to a better educated workforce

Widespread use of high-quality early childhood education programs not only benefit the children and their families, but can have a positive effect on the economy as a whole. While increased participation of mothers in the workforce would have positive near-term effects – such as higher government revenues through higher income taxes, and perhaps fewer families on welfare or in poverty – the literature provides persuasive evidence that shaping the country's future workforce now will prove to be extremely beneficial down the road.

Building human capital through better educated children means that the country's future workforce will be more highly skilled – an important fact considering that changes in demographics are likely to result in a shortage of high-skilled workers around the world. Moreover, workers will be more productive, innovative and earn higher wages, while fewer will be in poverty. Together, these factors can boost the overall standard of living in the country. What's more, demand for social and healthcare costs would decline – due to lower high school drop out rates, fewer instances of drug and alcohol use, smoking, teen pregnancies, and criminal behaviour – allowing governments to allocate funds else-



where. Indeed, the Canadian Council on Learning estimates the annual cost over the lifetime of one child who does not complete high school is \$7515 due to lost income revenues, and higher social and criminal justice costs¹⁰.

Compared to other industries, investment in early childhood education can provide a large return for the economy. According to Statistics Canada, the GDP multiplier – which measures the change in overall output in Canada from a change in output of a given industry – for child care outside the home is among the highest of all industries at 0.90, behind only financial services, education, retail trade and non-profit institutions industries¹¹ (See Chart 7). Moreover, the employment multiplier for the sector – which measures the number of jobs created per million dollars of increased output in a given sector – at 36.92¹², is by far the highest across all industries, suggesting that early childhood education does not only provide significant benefits to children, families and the economy, but it provides a better return on investment than many other sectors. (See Chart 7)

The benefits outweigh the costs

With all the benefits of early childhood education, it begs the question of why we don't have more programs in place and why it is not a high priority for policymakers. The obvious answer is that high-quality programs are very costly. That said, there are countless studies that suggest that the benefits of early childhood education far outweigh the costs.

Taking into account the increase in government revenues from income taxes of parents who would not otherwise be able to work, plus the reduction in social costs, special education costs and healthcare costs associated with better



educated children, many analysts have come to the conclusion that the program pays for itself. In fact, Canadian cost-benefit analyses indicate that for every dollar spent on early childhood education, the benefits range from \$1.49 to \$2.78. American studies estimate benefits to be as high as \$17 for every dollar spent, although the programs analyzed were solely for 'disadvantaged' children¹³.

While the cost-benefit analyses provide consistent results, any policy claims that initiatives will pay for themselves will naturally be met with skepticism. The estimates are just that – estimates, and calculating these estimates is not clear cut. Costs can be much higher than anticipated, as projects can easily run over budget (i.e. construction, training, etc.), and operating costs can rise faster than expected.

The benefit side is even more complex. Quantifying benefits is a difficult feat, which requires making many key assumptions. This alone suggests that the margin of error can be quite large. For example, researchers assume

TABLE 2
STUDIES OF COST-BENEFIT ANALYSIS OF ECE PROGRAMS

Study	Benefit / Cost (\$)
Economic Consequences of Quebec's Educational Child Care Policy, by Fortin, Godbout & St-Cerny, 2011	1.49
Better Beginnings, Better Futures, by Peters et al., 2010	2.00
Workforce Shortages Socio-Economic Effects, by Fairholm, 2009	2.42
Child Care as Economic and Social Development, by Prentice, 2007	2.78
The Benefits and Costs of Good Child Care, by Cleveland & Krashinsky, 1998	2.00

Source: Early Years Study 3

that the labour force participation rate will rise, generating increased income from more working mothers. This assumes that mothers do in fact choose to return to the workforce once they enroll their children in a child care program. While some programs, such as the one in Quebec, have been shown to increase the female participation rate, the participation rate in the rest of Canada increased during the same period suggesting that there were external factors that incited women into the workforce as well. Furthermore, the participation rate for women in the 25-54 age group in the country is already quite high, at 82%, so it doesn't have much room to grow (the equivalent rate for males is 90%). This analysis also assumes that these mothers will be able to find a job, and meet the average hours worked. As well, it assumes that workers are paid the median or average salary. There probably isn't a better method to gauge income levels, but the realities of what these women actually earn can have a large impact on the outcome – particularly if the majority of the women returning to work are in low-wage, low skilled jobs (higher income mothers are more likely to return to work in absence of a publicly funded program).

Longer-term benefits are also difficult to quantify, as there are many unknowns about the future. Hence, estimates regarding development, education and social abilities are more suggestive rather than a sure thing.

Another issue is that both the experimental and control groups may be influenced by external factors that can lead to biases, skewing the results. For example, changes in parental involvement can influence outcomes. Research shows that the more a parent is involved, the more the child will benefit.

Of the cost-benefit analyses done, many have focused on specific early childhood education programs in specific locations, suggesting that the results may not be replicated elsewhere. For instance, if the program that Quebec implemented was applied nationally, it would likely have different impacts in different areas of the country. Moreover, the way a program is implemented can influence the final outcome. So to get the results that the analyses indicated, the programs would have to be executed in exactly the same way across the country. Hence program design and the type of families served can have a considerable impact on the overall outcome.

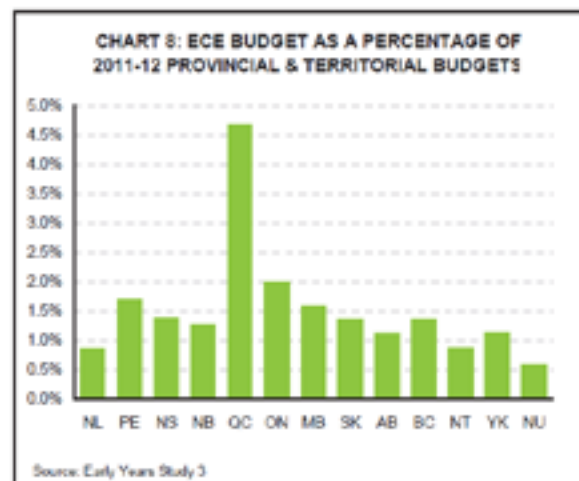
Some efforts have been made to improve the system

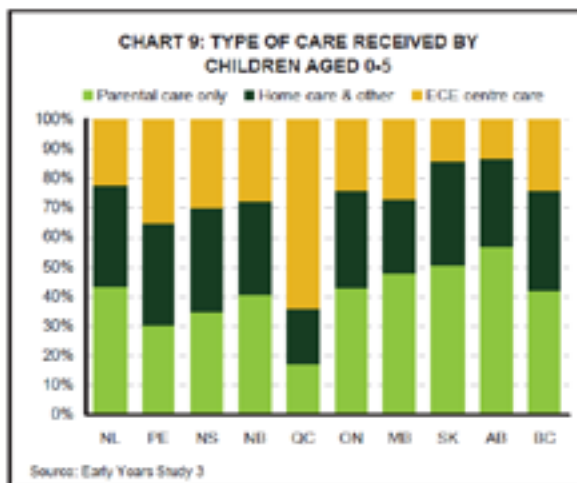
While there is a great deal of subjectivity in the cost-benefit analysis, the fact that they all show benefits exceeding

costs suggests that this is a sector that does indeed generate a great deal of benefit and thus more focus should be put on investment in, and improving the outcomes from, the sector.

In most parts of Canada, there currently exists a gap between the end of parental leave and formal schooling, providing a challenge for parents who wish to work, or have to work, to find care for their children. Indeed, in several areas, accessibility is an issue for parents, as wait lists for daycare centers are quite long, while the costs are out of reach for some families. Moreover, the current system is fragmented, as parents have to piece together programs to meet their work and family needs. Given the analysis on cognitive development, it is not evident why schooling starts at ages 4-5.

While education and child care both fall under provincial legislation, the federal government has been providing funding for child care and/or early learning programs for over four decades, through transfers to individuals and provincial/territorial governments. Federal spending on the sector amounted to about \$1.2 billion in the 2011-12 fiscal year¹⁴, plus about \$2.5 billion through the Universal Child Care Benefit¹⁵, in which the government transfers \$100 per month per child under the age of six directly to families. Provincial and territorial investment in the sector is much larger, tallying about \$7.5 billion during the same period. Spending is uneven across the country, with an average of 1.53% of total provincial/territorial budgets allocated to early childhood education, ranging from a low of 0.59% in Nunavut to a high of 4.67% in Quebec¹⁶. It should be stressed, however, that any evaluation of provincial/territorial programs must reflect factors beyond the allocation of





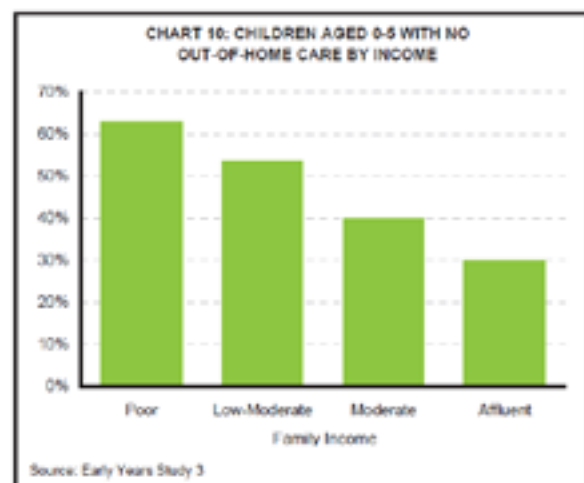
resources, such as: demand for childcare in each region, private investment and services, as well as the effectiveness and efficiency of the current programs. This goes beyond the scope of this paper, but is critical in assessing adequacy of public investment.

Given the differences in governing bodies and investment levels throughout the nation, it is not surprising that there are differences in the services and care provided in each province and territory. Quebec has the most comprehensive program, as it universally provides \$7 per day child care for children aged 0-12 (including before and after school care). Studies show some positive effects following the implementation of the program, including a rise in the female participation rate from lowest to highest in Canada, moving above the national average on standardized test scores, an increase in fertility rates and a 50% reduction in poverty. Quebec also has the lowest share – by a large margin – of 2-4 year-olds who receive parental care only compared to other provinces. (See Chart 9)

Elsewhere in Canada, some action has been taken to improve early learning. Six provinces, including P.E.I., New Brunswick, Ontario, Saskatchewan, Northwest Territories and Nunavut have taken steps to merge the education and child care programs. Ontario, B.C. and P.E.I. have added full-day kindergarten, while Newfoundland and Labrador, Manitoba and Saskatchewan are considering doing so. Some jurisdictions have expanded access for at-risk 3- and 4-year-olds as well. While federal and provincial governments provide some funding for the industry, it is still largely run

by the private sector, with government involvement limited to health and safety regulations in most regions. Indeed, unlike the formal education system, child care centers in many regions are not required to follow a defined curriculum.

Funding has been on the rise in most provinces and territories with many increasing the number of child care spaces in recent years, while some raised subsidy ceilings (Saskatchewan, Nova Scotia, Yukon, Newfoundland and Labrador, Alberta) and/or revised eligibility requirements in order to increase affordability for parents (Ontario, Quebec, Nova Scotia, Newfoundland and Labrador, Yukon). However, even with these efforts, parents are still finding it challenging to find accessible, affordable child care. The public programs that currently exist are well utilized. Kindergarten for 5-year-olds is available in all jurisdictions and even in areas where it is not mandatory, over 99% of children attend. Similarly, Ontario offers kindergarten for 4-year-olds, with a participation rate of over 80%. In fact, demand exceeds supply in several areas. In Quebec, there are not enough \$7 per day spaces to meet demand, forcing some parents to pay a larger amount for child care. Even where fees are high, demand also appears to outstrip supply in many regions – the Prairie Provinces in particular. Meanwhile, there is still a gap between the amount of the subsidies and the cost of child care for parents, forcing some low-income families to use less regulated care centers. This is evidenced by the fact that over 60% of children under 6 years of age from poor families do not participate in out-of-home daycare compared to only 30% of children from affluent families. (See Chart 10)



Public spending in Canada lagging behind

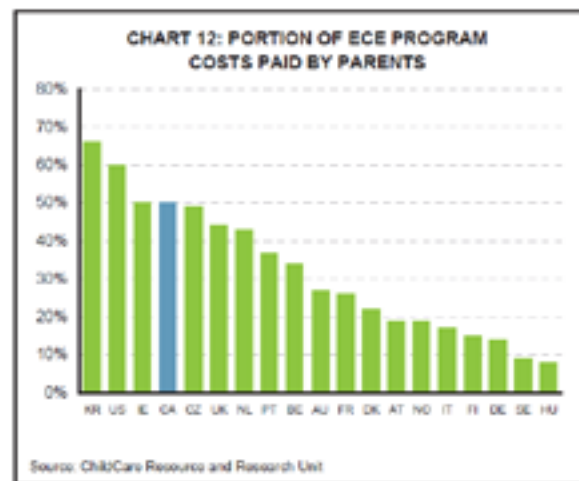
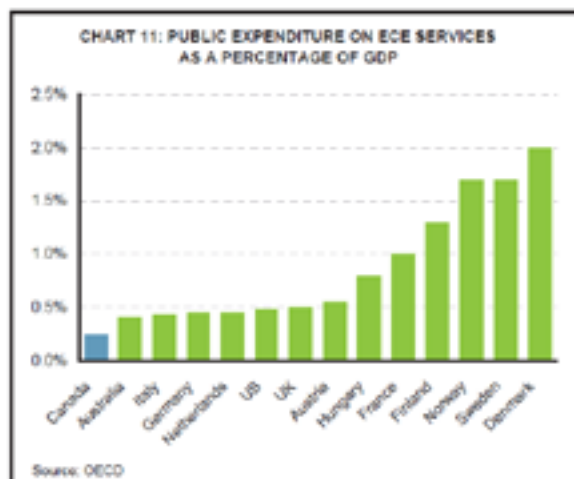
While steps have been taken to improve the early childhood education system across the country, it is clear that there is demand for much more. And further government investment would go a long way helping achieve a better system. In truth, total public spending in the sector in Canada has fallen short of many of its peers. At 0.25% of GDP, Canada ranks last among comparable European and Anglo-speaking countries. (See Chart 11) Even looking at family support, including child payments, parental leave benefits and child care support, public spending in Canada is 17% below the OECD average¹⁷. Meanwhile, parents, on average (except in Quebec), cover 50% of program costs – the fourth highest rate among select OECD countries. (See Chart 12) Hence, one could argue that Canada has been under-investing in early childhood education.

In order for public spending on early learning programs in Canada to be more in line with the average seen in OECD countries, public investment would have to rise by roughly \$3-4 billion. Unfortunately, with governments at all levels currently in deficit fighting mode, increasing spending on large-scale new programs is not in the cards.

Still, given such persuasive evidence of the widespread benefits that early learning promotes, there is scope for further investment and reform in the industry. Hence, once government balance sheets are back in order, they should consider placing investment in early learning as a high priority.

Conclusion

Few would argue the benefits of early childhood educa-



tion. In Canada, however, many parents are having trouble finding a spot in daycare for their children, and the cost is extremely high (with the exception of Quebec). While public investment in the early childhood education sector in Canada is lagging behind that of its peers, the current period of fiscal restraint makes it difficult for governments to boost program spending. Overall, having an efficient, high-quality early childhood program in place, which is accessible for all children and affordable for parents, would be beneficial for children, parents as well as the broader economy. Education is the ultimate tool to address many economic and social challenges. Increased education leads to improved skills development, which is the great enabler that allows individuals to unlock their potential. It creates a wider option for careers, raises employment, lowers unemployment and reduces the duration of unemployment. This leads to a higher standard of living for individuals. A more skilled workforce creates a more innovative and productive economy. It can address future pressing issues, like skills shortages. Stronger skills development can also reduce social ills, like poverty. While governments are in no position to take on new spending programs at the moment, over the medium term, they might consider focusing more attention on improving the early childhood education system.

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Endnotes

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APPENDIX C: 2001 ECD: A Summary of Findings from the Review of the ECD: Framework for Action (2001-2013)

Appendix C:

2001 ECD: A Summary of Findings from the Review of the ECD: Framework for Action (2001-2013)

Context	Challenges	Successes	Gaps/Barriers
<p>Population Growth The birth rate in the NWT is twice the national average. The child population will continue to increase over the next 20 years.</p>	<p>To meet an increasing demand for the entire range of programs and services for young children and families.</p>	<p>ECE implemented the Early Development Instrument in February-March 2012 to establish a baseline of Early Childhood Development outcomes in the NWT.</p>	<p>The complex nature of childhood development mixed with the complexities of Northern communities present new challenges and creates a more difficult service delivery spectrum.</p>
<p>Population Distribution The geographic distribution, with over 40 per cent of the population living in Yellowknife, over 20 per cent in three regional centres and the remaining 32 per cent living in small communities with populations less than 2,400 results in economic and social inequities.</p>	<p>To provide more equitable availability of, and access to, programs and services.</p>	<p>The Healthy Family Program is expanding across the North.</p> <p>The NWT Literacy Council follows a community development approach with a reach into all communities of the NWT.</p>	<p>Population distribution and geography makes creating access to all programs and services a challenge in the North. Availability of services and the realities of Northern communities create challenges; therefore many communities do not have access to early childhood services. Currently there are many programs and services only available in Yellowknife and Regional Centres.</p>
<p>Language and Culture There are eleven official languages and many cultural identities in the NWT. Several of the Aboriginal languages are in danger of disappearing.</p>	<p>To ensure that all programs and services are developed and delivered within the culture, worldview and teachings of the population served.</p> <p>To initiate, support, and expand programs designed to support the revitalizations of Aboriginal languages.</p>	<p>The Language Nest program has reached 22 communities in the NWT, with the majority of them having fluent Aboriginal speakers available for specific periods of time on a daily or weekly basis.</p> <p>The NWT Literacy Council uses culturally relevant resources and tools that build and sustain community capacity for family literacy work.</p>	<p>Children participating in the Language Nests are not emerging as fluent speakers of their Aboriginal language because they require full immersion to be effective.</p>

APPENDIX C:
2001 ECD: A Summary of Findings from the Review of the ECD:
Framework for Action (2001-2013)

Context	Challenges	Successes	Gaps/Barriers
<p>Effects of Historical Experiences Many families and communities are experiencing the intergenerational effect of residential schools, family violence, abuse and addictions on parenting as well as rapid modernization and cultural change.</p>	<p>To support the access of families to healing, addiction and mental health services so that the communities in which children are raised are moving toward wellness.</p>	<p>Through the work of the Truth and Reconciliation Commission (TRC), the healing process has been able to begin in the North. This process will take many years and many forms, and the GNWT will continue to support the access of families to healing, addiction, and mental health services.</p>	<p>Programs designed for “at-risk” and marginalized populations have difficulty engaging the populations they are intended to reach.</p>
<p>Prevalence of Health Risk Behaviour High rates of health risk behaviour of youth and adults of childbearing age have been documented in various studies. Rates of alcohol consumption, tobacco use, sexually transmitted diseases, and teen pregnancies are higher than in other jurisdictions.</p>	<p>To reduce these behaviours through prevention strategies that stresses the effects of such behaviours on child development and parenting.</p>	<p>In more than one Healthy Family Program site, when the program was co-located with another prenatal program, utilization was reported to have increased dramatically. Cross referral between programs promotes both programs in a positive light and avoids stigmatization.</p>	<p>Families who are the target audience of the Healthy Family Program (as well as other early childhood development programs and services) often decline the services when approached and do not seek out help.</p> <p>Not all communities have programs and services meant to proactively avoid health risk behaviour available to them. There is a significant lack of education regarding health risk behaviour in the North.</p>
<p>Staff Shortages and Turnover Service delivery is often hampered by shortages and turnover, particularly at the community level. Primary care and crisis intervention are the imperative in short-staffed situations and therefore prevention may not receive the attention needed. Consistency of programs and services suffers with staff turnover. New staff requires training.</p>	<p>To recruit and retain qualified staff in health, social services and education.</p> <p>To build community capacity through training and support to deliver programs and services.</p>	<p>Aurora College offers a distance Early Childhood Development Program. This program appeals to a broad variety of students, there is transferability of credits and the instructor/tutoring support system is identified as a significant strength of the program.</p>	<p>There is a general undervaluing of the Early Childhood Development sector in the NWT. The supply of trained Early Childhood Educators in the NWT does not meet the demand. There is little incentive for young people to choose a career in the early education and care sector because of low wages and job security.</p>

APPENDIX C:
2001 ECD: A Summary of Findings from the Review of the ECD:
Framework for Action (2001-2013)

Context	Challenges	Successes	Gaps/Barriers
<p>Focus on Intervention Many community-based programs focus on intervention and prevention of secondary disabilities.</p> <p>Program and service availability for young children is community-dependent.</p>	<p>To provide resources sufficient to implement key universal programs and services to support for optimal child development: including early identification, assessment, and services for children with developmental disabilities and for their families.</p> <p>To encourage parents to take advantage of early intervention programs and services before the child enters school.</p>	<p>The GNWT has invested significantly in early childhood development under the 2001 Framework. Within ECE, the annual budget for early childhood development and care has doubled over the past ten years while the amount dedicated to children with challenges has increased by approximately one percent.</p>	<p>Services for children under age six with challenges, disabilities, or developmental delays did not receive funding under the 2001 Framework.</p>
<p>Service Delivery Model A “siloed” approach to service delivery, where service providers and program management operate in a linear manner in parallel “silos”. Barriers to sharing information impede cooperative development, delivery and management.</p>	<p>To provide education about, and facilitate the development of, a collaborative, integrated service delivery model at the community, regional, territorial and national levels.</p>	<p>Based on research done for the 2001 and 2013 frameworks, a universal, integrated service delivery model has been identified as the most effective and positive approach to early childhood development and care.</p>	<p>Coordinating services to and between the service providers has proven to be a challenge.</p>
<p>Complexity of Funding Sources and Criteria The multiplicity of funding programs and the complexity of management relationships often act as a disincentive to communities to implement early childhood programs and services. Some federal funding levels are based on a per capita approach, which works against the small widely dispersed NWT population.</p>	<p>To provide coordinated funding to early childhood programs in order to facilitate development of an integrated service delivery model for Early Childhood Development programs and services at the community level.</p> <p>To offer assistance to communities in program planning and proposal development.</p>	<p>The multiplicity of funding programs gives the North and different programs and services many venues through which to be funded.</p>	<p>Funding sources to some early childhood programs and services are multi-source, proposal-based, year-to-year funding whereas others are funding on an on-going basis. This makes administration and tracking difficult.</p>

Other successes and gaps identified by the review of the 2001 Early Childhood Development: Framework for Action:

SUCCESSSES

- Four of the seven originally funded Framework actions continue: the Nipissing Development Screening Tool, the Healthy Family Program, Family Literacy Project and the Aboriginal Language Nests.
- Although the Healthy Family Kits and Family Learning Kits were discontinued, the success of the outreach was shown through the requests for their reinstatement. The face-to-face interaction and explanation about the contents of the Family Learning Kits helped parents become knowledgeable about how to use the contents to support their child's literacy development. The NWT Literacy Council has taken the demand

for these resources and developed a much more extensive Family Literacy Project to reach the many areas of family literacy in the North.

GAPS

- Early Childhood Development needs more focus in the NWT.
- Families need help with parenting.
- Most programs (Healthy Family Program, Nipissing, etc.) did not build in supports to monitor performance, nor was there consistent and regular reporting from all programs. This gap in the data made it difficult to determine utilization and program impacts.
- A lack of thorough program planning and design has made determining utilization and outcomes a

challenge. Monitoring and accountability gaps need to be addressed in all programs.

- The Nipissing is geared towards the parent's responses, which were not always an accurate indicator of the child's ability and skill. It is not possible to determine if the Nipissing is effective or whether it is being administered consistently and effectively. It is also a challenge to ensure that all children are screened until Kindergarten.
- Dental health programming is a prime example of the lack of parental involvement and education. ECE and HSS should utilize every opportunity to present public (parental) and professional educational campaigns on the importance of many areas, such as health

and wellness, and brain development in the early years for lifelong learning and well-being.

- Early childhood programs are challenged by the limited staff capacity and lack of trained early childhood practitioners, specifically those who are fluent in their Aboriginal language and have specialized education training for children suffering from trauma or developmental delays.



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A FRAMEWORK FOR

EARLY CHILDHOOD DEVELOPMENT

IN THE NORTHWEST TERRITORIES

ACTION PLAN



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Commitment 1:

Expectant mothers will have access to evidence-based services that support improved outcomes for mom and baby

Areas for Action

1. Increase access to midwifery services and further integrate midwifery into perinatal care

Rationale

Healthy development begins with a healthy pregnancy. To support a healthy prenatal environment, expectant mothers should have access to knowledge, skills and supports. Providing birthing options closer to home decreases stress, restores community pride, improves culturally appropriate care, and increases continuity of care.

Deliverables

Deliverables:

- Midwifery services available in Hay River and the Beaufort Delta region

Targets:

2014-2015

- Revise program standards related to perinatal care and implement revised *NWT Prenatal Record* forms
- Initiate midwifery services in Hay River
- Begin consultation on Midwifery in the Beaufort-Delta region
- Develop and implement a data collection and reporting strategy for midwifery services

2015-2016

- Based on consultation, develop a plan to make Midwifery services available in the Beaufort Delta region

Accountability

HSS



Areas for Action

2. Standardize prenatal referrals for expectant mothers with addiction issues

Rationale

There are many factors that affect a healthy pregnancy and healthy development such as the mother's state of mental health during pregnancy, high-levels of nicotine exposure before birth, and the consumption of alcohol during pregnancy.

Providing timely access to services and treatment can help improve outcomes for mother and baby.

Deliverables

Deliverables:

- Standardized referral protocol ensuring that expectant mothers with mental health or addictions issues have priority access to treatment

Targets:

2014-2015

- Implement protocols to ensure priority access to addictions and mental health treatment for expectant mothers that request it

- Develop and implement an integrated case management approach for pregnant women with addictions or mental health issues
- Provide training to all primary care providers on using the new *NWT Prenatal Record* forms
- Implement a data tracking mechanism

2015-2016

- Evaluate the integrated case management approach to allow for ongoing quality improvement
- Monitor and report on the implementation of screening and priority access protocols for addictions and mental health treatment

Accountability

HSS

Areas for Action

3. Improve outreach and support for expectant mothers in the areas of nutrition, breastfeeding, referrals to community groups and resources, education around smoking, alcohol and drugs, mental health labour and delivery information

Rationale

A healthy pregnancy will strengthen the growing baby, and prevent physical and mental health problems from manifesting later in the child's life. The Healthy Pregnancy Group, operated by the Yellowknife Health and Social Services Authority, aims to improve birth experiences and outcomes of pregnant women who travel into Yellowknife from NWT communities for labour and delivery services. This group can also provide education and information on the effects of smoking, alcohol, drugs, mental health, nutrition and breastfeeding.

Evidence supports that breastfeeding is the ideal method of infant nutrition. A collaborative approach is needed to support women

through education and awareness of the importance of breastfeeding in early childhood development.

Deliverables

Deliverables:

- The NWT health and social services system delivers improved programs that support healthy lifestyles in pre and post-natal periods for residents from all communities

Targets:

2014-2015

- Continue to provide support to community-based breastfeeding programs
- Research standards for breastfeeding and proper growth based on best practices, guidelines and standards

- Provide education and training related to pre/post natal healthy life style choices through community-based programs including expanding the Healthy Pregnancy Group to women who give birth in Yellowknife
- Through the expansion of the Midwifery Program, expand the model of prenatal care to include women who give birth in Hay River and the Beaufort Delta
- Identify steps and timelines for Baby Friendly Initiative accreditation to be completed for all NWT hospitals and health centres
- Develop and implement a data collection and reporting strategy to track program utilization and effectiveness

2015-2016

- Implement accreditation of hospitals and health centres that provide birthing services through the Baby Friendly Initiative
- Ongoing monitoring and reporting on data set to support future evaluations
- Monitor progress on improving outreach and support for expectant mothers

Accountability

HSS



Commitment 2:

Early intervention programming aimed at infants, children and parents will be expanded

Areas for Action

4. Build on the strengths of the Healthy Family Program in all regions in the NWT

Rationale

A nurturing parent-child relationship is key to a child's healthy development. Children's ability to manage emotions and cope with stress is nurtured through healthy relationships with parents and caregivers. A happy secure child can develop trust, self-esteem, self-control and positive relationships. Building on the Healthy Family Program in all regions of the NWT will strengthen supports available to parents and their young children.

Integrated programs and services for families can provide quality programming, attend to community-driven priorities, focus on promotion and prevention, engage and empower parents and respond to the specific development needs of children. Integrated and responsive services provide a more holistic approach that:

- Improves collaboration and communication between agencies in order to coordinate client care,
- Eliminates systemic and professional barriers,
- Provides services in convenient locations,
- Connects services by offering two services in one location; and,
- Expands the roles of existing service providers so that multiple issues can be addressed in one visit.

Deliverables

Deliverables:

- Improved access, availability and outreach for evidence-based programs aimed at improving the lives of children from 0 – 5 by promoting the importance of the role that families play in child development
- Increased integration of programs and services available to families through the expansion of the Child and Family Resource Programs and Services (CFRPS) model

Targets:

2014-2015

- Provide funding to NGOs to deliver ECD programming aimed at mothers living in transitional housing such as Betty House and Rock Hill Apartments
- Continue to fund the HSS Authorities to ensure each region is appropriately funded for training and support for the effective delivery of the Healthy Family Programs (HFP) in all regions in the NWT
- Develop and implement standards for the HFP to ensure consistency in program delivery and include information on oral health, nutrition, information on services and supports, and the risk and protective factors for child development
- Evaluate HFP implementation to ensure consistent program delivery and compliance to standards.



- Complete program evaluation for the two CFRPS in Ndilo and Tulita
 - Develop plan to increase the integration of CFRPS at the community level
 - Develop and implement options for cost effective service delivery of the HFP program to all communities in the NWT (including those with low birth rates)
 - Integrate early intervention programs and services with the CFRPS model
- 2015-2016
- Develop and implement a data collection and reporting strategy for HFP to support future outcome evaluation and ongoing compliance to standards

Accountability

HSS
ECE

Areas for Action

5. Expand programs aimed at improving oral health and nutrition

Rationale

Dental decay in children is the most common chronic childhood disease. It is a health crisis among Canadian Aboriginal children. Oral health affects all dimensions of a child's wellbeing (functional, psychological and social). Oral pain affects children's sleep, growth, behavior, communication, learning and self-esteem.

Early childhood nutrition affects proper growth and development. Lack of proper nutrition in the early years can cause adverse effects on body weight/height, brain development as well as dental caries, failure to thrive/

learn, stunted growth, bone deformities, as well as chronic diseases later in life.

Deliverables

Deliverables:

- A sustainable model for oral health delivery in the NWT and strategies aimed at improving nutrition

Targets:

2014-2015

- Based on the 2013/14 review of best practices in other jurisdictions, develop a sustainable model of oral health promotion in the NWT and identify resource requirements

- Document success and share practices across programs such as the Healthy Family Collective Kitchen, Healthy Beginnings and other prenatal nutrition programs that improve prenatal nutritional intake and support
- Enhance education, support and promotion of breastfeeding
- Identify training programs for front line workers in the delivery of community-based programs related to pre/postnatal nutrition, breastfeeding and healthy nutrition for children 0 – 5 and oral health

- Develop and implement a data collection and reporting strategy for oral health and nutrition programs

2015-2016

- Implement a new model for promotion of oral health in the NWT within available resources
- Ongoing monitoring and reporting on data set to support future evaluations

Accountability

HSS



Commitment 3: Early childhood assessment, intervention and responses will be improved

Areas for Action

6. Standardize the use and implementation of universal screening tools and assessments aimed at identifying vulnerable or at risk families and children

Rationale

Developmental screenings identify developmental issues early and provide a way to identify at risk families that may benefit from targeted support. The earlier the need for interventions and supports are identified, the more effective they will be.

Deliverables

Deliverables:

- One-time comprehensive assessment of all 5 year olds in the NWT to include: sight, hearing, speech, developmental readiness for school
- Standardized screening to monitor children's developmental milestones from 0 – 5 to improve responses to developmental needs
- Protocol for appropriate sharing of information

and improved lines of intra-departmental communications, between agencies and professionals, related to screening outcomes to inform resource allocation decisions

- Results of baseline assessment and Early Development Instrument (EDI) used to inform decisions to improve ECD programs and services for 0 – 5

Targets:

2014-2015

- Complete the one-time assessment of 5 year olds: sight, hearing, speech, developmental readiness for school and evaluate the use of the standardized screening tool
- Building on the results of the one-time assessment, standardize the implementation and use of

age appropriate screening tools/instruments and monitoring approaches for the routine assessment of children 0 – 5

- Develop appropriate training and communication for screening tools, as well as an implementation plan to deploy these tools NWT-wide
- Develop and implement mechanisms for electronic data capture, validation, analysis and reporting at the community, regional and territorial levels, including protocols for appropriate information sharing between Departments and communications for individual and aggregate level data
- Identify gaps where additional focus is required to address healthy development in the 0 – 3 age range

2015-2016

- Continued roll-out of NWT standardized screening tools for 0 – 5, and electronic data capture/management
- Preliminary evaluation of new screening tools and data capture/management approaches in order to fine-tune tools, procedures in light of frontline and expert feedback
- Evaluate outcomes of first year of data for NWT screening tools to inform next steps and related program and policy development

Accountability

HSS
ECE



Areas for Action

7. Ensure consistent equitable access to Occupational Therapy, Speech Therapy, Public Health and community counseling services and follow up for children identified with developmental issues

Rationale

Given the rural and remote context of the NWT, improving access and developing a sustainable community-based model for “between appointments” follow-up on recommendations and treatment plans is critical. This model will need to incorporate the role of parents, families, and community-based staff in carrying out ongoing treatment plans.

The current NWT model for early childhood screening, identification of developmental delays and intervention has known gaps. There is currently no consistent mechanism for the identification and screening of children age 2 to 3. For those children that are screened and identified as having developmental delays, the method of referral is not consistent and is often reliant on parents to seek a referral for their child. Often, parents are not adequately informed of the importance of early childhood development and appropriate interventions and do not advocate for the referral. A more direct link between screening results and referrals to early intervention services would greatly improve outcomes for vulnerable at risk children and families in small communities.

Deliverables

Deliverables:

- NWT families and children have improved access and follow-up care for Occupational Therapy, Speech Therapy, Physiotherapy and Audiology services

Targets:

2014-2015

- Complete an assessment of the service delivery model for Rehabilitation Services (Occupational Therapy, Speech Therapy, Physiotherapy and Audiology) to identify gaps in access to services and community-based follow-up on recommendations and treatment plans
- Undertake an evaluation of the effectiveness of Telespeech as the delivery model for Speech Therapy in small communities
- Develop a plan to reduce gaps and improve rehabilitation services and follow-up through a sustainable community based model

- Develop an early intervention service delivery model that includes early intervention services such as:
 - child identification for screening and assessment (0 – 5)
 - information for parents on child’s growth and development
 - referral to appropriate intervention programs
 - assistance to parents and caregivers through outreach and follow-up “between appointments” to ensure consistent follow-through on recommendations and treatment plans identified by rehabilitation services
- identification of community based child care programs and

connection to community based resources

- and liaison with school staff to facilitate a smooth transition to school

2015-2016

- Identify required resources to improve access to rehabilitation services and follow-up
- Implement early intervention services
- Develop and implement data collection, analysis and reporting mechanisms to support future program evaluations

Accountability

HSS
ECE



Commitment 4:

Coordination and integration improved across the continuum of ECD programs and services.

Areas for Action

8. Strengthen the alignment between early childhood programs and services and the needs of communities

Rationale

The Early Development Instrument (EDI) is a population-based measure of children's development at school entry. The EDI provides information to guide decision-making to strengthen programs and services. Programs, services and supports available for children and families vary between Yellowknife, regional centres and small communities.

Access to programs and services involves not just availability but also family awareness of what is offered.

Aligning HSS and ECE programs on a continuum will provide opportunities to enhance the awareness supports for children and families.

Deliverables

Deliverables:

- Continuum of early childhood programs and services better aligned with the needs of communities and easy for families to navigate:
- Annual collection, analysis, and an online Geographic Information System (GIS) mapping of the Early Development Instrument (EDI) data
- Online interactive information system of mapped programs, services and supports by community
- EDI data informs decision-making related to early childhood programs and services

Targets:

2014-2015

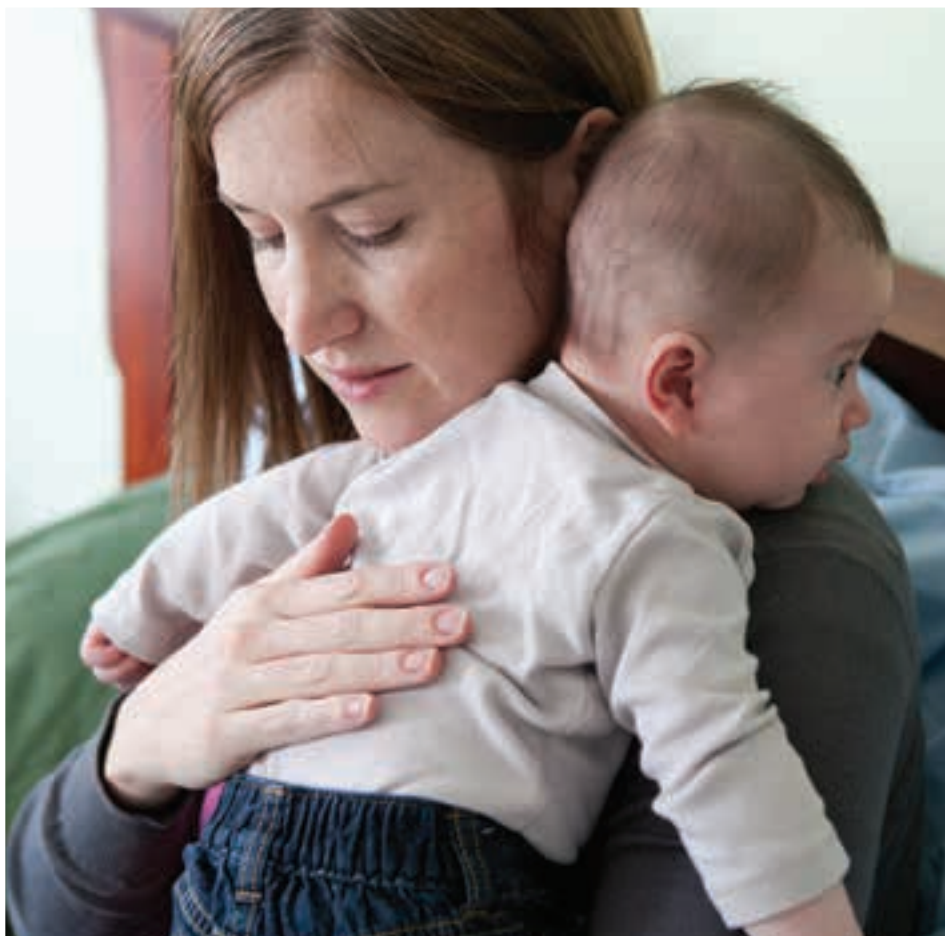
- Collect, analyze and report data using the EDI
- Create the initial GIS map of EDI data by region
- Use EDI data as a part of ECD monitoring, evaluation and accountability measures

2015-2016

- Ongoing EDI data collection for continued ECD monitoring, evaluation and accountability measures
- Report on trends in the cumulative EDI data collected

Accountability

ECE
HSS



Areas for Action

9. Support communities to improve the coordination and alignment between early childhood development programs

Rationale

Access to a wide variety of coordinated services is important for optimal child development. By strengthening coordination between programs and services and simplifying and streamlining processes we reduce the barriers that affect a family's ability to access a range of programs and services. This approach also supports the community's role in establishing priorities and effectively meeting the needs of its residents.

Deliverables

Deliverables:

- Community-driven initiatives to strengthen the alignment between early childhood programs and services

Targets:

2014-2015

- Provide support to communities to facilitate community level discussions around coordinating early childhood development programs to build on the success of existing programs
- Provide support to the interagency committees in identified communities to strengthen the sharing of resources and information across early childhood development programs
- Work with interagency committees to enhance supports for parents to assist in referrals and program navigation

- Ensure appropriate accountability of wellness plans results through contribution agreements and reporting

2015-2016

- Ongoing accountability reporting on wellness plans
- Collaborate with communities to ensure the successful implementation of early intervention services such as:
 - child identification for screening and assessment (0 – 5)
 - information for parents on child's growth and development
 - referral to appropriate intervention programs
- assistance to parents and caregivers through outreach and follow-up "between appointments" to ensure consistent follow-through on recommendations and treatment plans identified by rehabilitation services
- identification of community based child care programs and connection to community based resources
- liaison with school staff to facilitate a smooth transition to school

Accountability

HSS
ECE

Areas for Action

10. Support at risk children and families using an interdisciplinary approach

Rationale

Early intervention is important in preventing developmental delays, minimizing the negative effects of social and environmental stressors and supporting children at risk. Yet social supports and early interventions in isolation do not adequately respond to the complex challenges facing many children and families across the NWT.

The integrated team approach is a proven way of reaching at risk children and families, reducing barriers to wellness, achieving better outcomes, and helping to prevent children and families from "falling through the cracks." A team approach reduces stress on children and caregivers trying to navigate disconnected systems and services.

An integrated approach involves a team that could include: local governments, elders, community-based agencies, ECE, HSS, NWTHC, Justice, and MACA to provide "wrap-around" services for children and families identified as vulnerable or at risk. Support through wrap around supports from an integrated team will help at risk children and families respond to challenges, including those related to poverty, education, employment, mental health and addictions, health status, housing, homelessness and family violence.

Deliverables

Deliverables:

- Integrated team-based "wrap-around" services that are coordinated, individualized, holistic, and geared to the strengths of children and families

Targets:

2014-2015

- Develop an implementation plan for integrated team-based "wrap around" services
- Identify potential communities to implement the "wrap-around" services plan
- Develop key messages that focus on the basics of healthy child development, to inform all communications campaigns

2015-2016

- Develop and support initiation of "wrap around" integrated services teams in identified NWT communities
- Build capacity at the community level
- Expand the integrated team approach to more communities
- Continue to build capacity across the NWT

Accountability

ECE
HSS

Commitment 5:

Promotion, awareness and education initiatives related to early childhood development available to all families and communities

Areas for Action

11. Target campaigns to raise awareness about the importance of early childhood development, the impact of the early years, the role of parents and those who work with children

Rationale

Consistent campaigns to all identified audiences will help realize the vision of the *Early Childhood Development Framework* by making the NWT “a place where children are born healthy and raised in safe and respectful families and communities.”

In order to target those most vulnerable, it is critical to incorporate the importance of early childhood development into ongoing foster parent training.

The Parenting Resource for Information, Development and Education (PRIDE) program is designed to strengthen the quality of family foster care and adoption services. This is accomplished by providing a standardized, consistent, structured framework for the competency-based recruitment, preparation, and selection of foster parents and adoptive parents, and for foster parent in-service training and ongoing professional development.



Deliverables

Deliverables:

- Parents, families, and caregivers are informed on the importance of early childhood development

Targets:

2014-2015

- Continue awareness campaigns targeted to parents, families, and caregivers on the role of

parents and caregivers and the importance of early years (0 – 3)

- Aligning Healthy Choices pillars with *Right from the Start* wider initiative – creating micro campaigns, i.e. healthy pregnancy, interaction, nutrition, mental health, etc.

- Cross promotion with Healthy Choices – leveraging *Right From The Start* with Healthy Choices Framework

- Continue to provide ECD education, promotion and awareness training as part of ongoing NWT Foster Parent training (PRIDE)

2015-2016

- Develop a mechanism to measure the reach and relevance of existing social marketing campaigns

Accountability

HSS
ECE

Areas for Action

12. Use innovative mediums and technology to reach people with culturally relevant promotion and prevention tools, updates on available programming for parents and children, and health and education messages

Rationale

Supporting all NWT parents and caregivers with information, tools, and options for programs and services to support their children’s healthy development is a priority.

Providing increased access to information and resources will enhance stay-at home parents’ options for supports.

Access to appropriate and relevant resources through modern technology will provide mothers and fathers additional options to support their child’s healthy development.

Deliverables

Deliverables:

- Provision of a range of information sources that may include items ranging from baby bags and /or resource filled electronic tablets

Targets:

2014-2015

- Develop a prototype for baby bags and identify resources for electronic tablets to be shared with new parents in their home communities.
- Develop a teaching resource guide with input from the Healthy Family Program and early childhood experts for inclusion in the baby bags for parents
- Develop resources for electronic tablets that will help mothers track developmental milestones, provide immunization information and highlight the importance of early childhood development

• Develop the *Right from the Start* website to provide parents with a variety of resources to choose from including:

- Online toolkits for parents
- Apps for downloading related to parenting and child development

• Provide specific apps like immunizations that would provide information, serve as a reminder and maintain a permanent record of the child’s immunization

• Social media-based support network – through the existing NWT *Right from the Start* Facebook page, and other existing GNWT social marketing campaigns (i.e., Moms, Boobs & Babies; Choose NWT.ca; etc.)

• Report on web analytics from the *Right from the Start* Facebook page, website and other technological mediums

2015-2016

- Distribution of the baby bags and electronic tablets to new parents in their home communities
- Develop and implement a satisfaction questionnaire for new parents to assess their satisfaction of the baby bags
- Build and further develop *Right From the Start* website to include current and expanded family based resources
- Grow the reach of the *Right From the Start* Facebook page

Accountability

ECE
HSS

Areas for Action

13. Strengthen preventative approaches to children’s health and well-being and build understandings of healthy child development in children and youth

Rationale

The roots of health and well-being are in the early years. Daily practices related to oral health, nutrition, and physical activity help build habits that last a lifetime.

Senior secondary students are the NWT parents of the future. Building their understandings about their own health and well-being and of child development in general is a proactive approach to impacting future generations.

Deliverables

Deliverables:

- Strengthened oral health, nutrition, physical activity components across NWT early childhood development programs
- Senior Secondary early childhood development course that has dual credit value and builds knowledge of child development in future parents

Targets:

2014-2015

• Support early childhood development programs in the areas of child health and well-being that include:

- Nutrition, oral health, staying active, oral language and healthy relationships

• Domains of child development: social, emotional, physical, cognitive, and language

• Develop a dual credit Senior Secondary early childhood development course

2015-2016

- Review and ongoing support of early childhood development programs
- Pilot dual credit Senior Secondary early childhood development course

Accountability

ECE
HSS

Commitment 6:

Access to high quality, affordable early learning programs and child care services are enhanced

Areas for Action

14. Address the infrastructure challenges of finding safe and appropriate locations for early childhood development programs and child care services as identified by each community

Rationale

A foundational step to increase access to high quality early childhood education and care programs in all NWT communities is to find safe and appropriate sites for program delivery.

Overcoming the barriers related to ensuring all families have access to an early childhood program will require partnerships with stakeholders and policies to allow for innovative approaches to addressing issues of space.

GNWT owned buildings such as schools provide one possibility that ECE will explore for expansion of programs.

Deliverables

Deliverables:

- Develop a policy to guide partnerships, capital projects and public investment in early childhood development
- Ensure infrastructure is adequate for Junior Kindergarten in schools

Targets:

2014-2015

- Identify and develop policy to guide partnerships, capital projects and public investment in early childhood development programs
- Address identified infrastructure challenges in schools to facilitate adding Junior Kindergarten

2015-2016

- Ongoing monitoring of partnerships, capital projects, and public investments in early childhood development programs
- Ongoing monitoring of infrastructure during continued expansion of Junior Kindergarten

Accountability

ECE



Areas for Action

15. Restructure administration and finance processes for all early childhood development programs to promote equity, inclusion, quality and program stability

Rationale

Early childhood development programs that promote equity must be accessible and affordable to all families. The administrative requirements attached to the funding are time consuming for program managers.

There is a need for a renewed approach to funding early childhood development programs. By cutting the red tape and simplifying the financial processes, programs will be less weighed down by administrative expectations.

Deliverables

Deliverables:

- Cohesive and aligned governance and administrative processes for ECE's Early Childhood Program (ECP)
- Simplified and clear funding processes for ECP

Targets:

2014-2015

- Review how other jurisdictions provide funding to early childhood development programs
- Conduct a review of the ECP administrative and funding processes
- Realign the internal ECP governance structures and administrative systems

2015-2016

- Develop and implement revised ECP funding processes and related criteria to support inclusion, quality and equity of access within early childhood development programs

Accountability

ECE

Areas for Action

16. Provide access to high quality early education programs

Rationale

In the NWT, baseline data from the Early Development Instrument (EDI) suggests that over 32% of children are vulnerable, meaning they are behind in their development at 5 years old. Vulnerabilities in development, according to the NWT baseline EDI findings, are significantly higher in smaller communities where access and quality varies widely.

The research consistently shows that high quality education programs for 4 year olds positively impact children's development. High quality early childhood development programs affect everything from graduation rates to health and well-being outcomes. The research shows that high quality preschool programs make the most difference for vulnerable children.

Many NWT families, most especially those in small communities, do not have adequate access to early childhood programs.

Deliverables

Deliverables:

- Junior Kindergarten (JK) for 4 year olds phased in beginning with small community schools

Targets:

2014-2015

- Complete program evaluation of 2013/14 Junior Kindergarten demonstration sites
- Complete plan to address infrastructure challenges for transitioning of Junior Kindergarten into school system that considers the needs of all stakeholders including families and existing early childhood program providers

- Initiate the process to amend the Education Act to include 4 year olds
- Implement Phase 1 of Junior Kindergarten in 29 small communities
- Provide transition support to Education Authorities and early childhood programs who have had to adapt to changes
- Pilot the NWT play-based kindergarten curriculum in classrooms with junior and senior kindergarten children together
- Provide training and program support for all Junior Kindergarten sites
- Evaluation of Phase 1 Junior Kindergarten implementation
- Develop communication package for families and communities

2015-2016

- Implement Phase 2 of Junior Kindergarten in regional centres
- Provide transition support to Education Authorities and early childhood programs who have had to adapt to changes
- Evaluation of Phase 2 Junior Kindergarten implementation
- Ongoing training with a focus on high quality programming
- Prepare for Phase 3 Junior Kindergarten implementation (Yellowknife) for 2016-2017

Accountability

ECE

Areas for Action

17. Support culture-based programs that foster Aboriginal language development in children and involving Elders in programs

Rationale

Promoting children’s Aboriginal language development in the early years is a priority in the NWT Aboriginal Languages Plan. The early years provide an important window for learning language and a child’s connection to their Aboriginal culture and language contribute significantly to their healthy development.

Language Nests are an early childhood immersion approach to Aboriginal language revitalization that originated in New Zealand and has had considerable success in revitalizing the Maori language. Immersion programs work by tapping in to the way brains develop and people learn new languages. Language is not directly taught; instead, the child is fully immersed and surrounded by the language in real, natural and every day ways.

Funding to support Language Nest programs has been available to licensed child care facilities since 2003. The number of Language Nests varies each year, but has hovered around 20 for the last few years. Although good work has been done in the Language Nest programs, many challenges limit the programs ability to meet the intended goal of young children fluently speaking in their Aboriginal language. Reviewing the Language Nest programs and building on the strengths of communities are required to strengthen the program.

Deliverables

Deliverables:

- Restructured Aboriginal Language Nest programs to better align with the needs of communities
- Link developed between the Elders in Schools program and early childhood programs offered in schools

Targets:

2014-2015

- Conduct a scan of all NWT Language Nest programs
- Conduct a scan of Language Nest programs and related early childhood Aboriginal language acquisition programs used across Canada and internationally

- Restructure the Aboriginal Language Nest programming and funding to better align with the needs of communities and the goal of supporting Aboriginal language development in young children
- Identify opportunities to strengthen connections between early childhood programs in the schools and the Elders in Schools initiative

2015-2016

- Implement the restructured Language Nests program funding model
- Strengthen connections between early childhood programs and the Elders in Schools initiative in Aboriginal Language Nest programs
- Collect data on children’s language development in Aboriginal Language Nest programs

Accountability

ECE



Areas for Action

18. Develop cultural competencies of early childhood professionals.

Rationale

Culturally competent practitioners engage in ways that are respectful and responsive to the diverse needs of children, families and communities.

Research proves the strong connection between the cultural understandings and competence of practitioners with the effectiveness of programs and services.

The goal of “cultural competency” is to create a service environment that is culturally appropriate for the communities and people of those being served.

Deliverables

Deliverables:

- Cultural competence training available to early childhood professionals working with children and families

Targets:

2014-2015

- NWT cultural competence training to be included as part of the early childhood development course available to staff working in early childhood programs
- Cultural competence materials and information developed
- Cultural competence materials disseminated

- Training and support options for culture competence training provided

2015-2016

- Ongoing training and support
- Program evaluation

Accountability

ECE

Areas for Action

19. Enhance program resources for early childhood development programs

Rationale

The Organization for Economic and Co-operative Development (OECD) is an internationally recognized body focused on raising quality in early childhood education and care. In a 2011 review of early childhood programs in 18 countries, including Canada, the OECD recommended a systematic approach to raise quality in early childhood programs. Specifically, five evidenced-based policy priority areas were identified as critical: (1) setting out quality goals and regulations; (2) designing and implementing curriculum and standards; (3) improving qualifications, training and working conditions; (4) engaging families and communities; and (5) advancing data collection, research and monitoring.

Deliverables

Deliverables:

- An early learning curriculum framework for early childhood programs
- Program resources to support high quality early learning and care in ECD programs

Targets:

2014-2015

- Develop and implement an early learning framework to provide an overarching guide to all early childhood programs, including Junior Kindergarten
- Provide training and readiness planning for early learning framework implementation in licensed child care centres
- Provide optional training for family day home providers to learn about the early learning framework as it applies to their early childhood programs

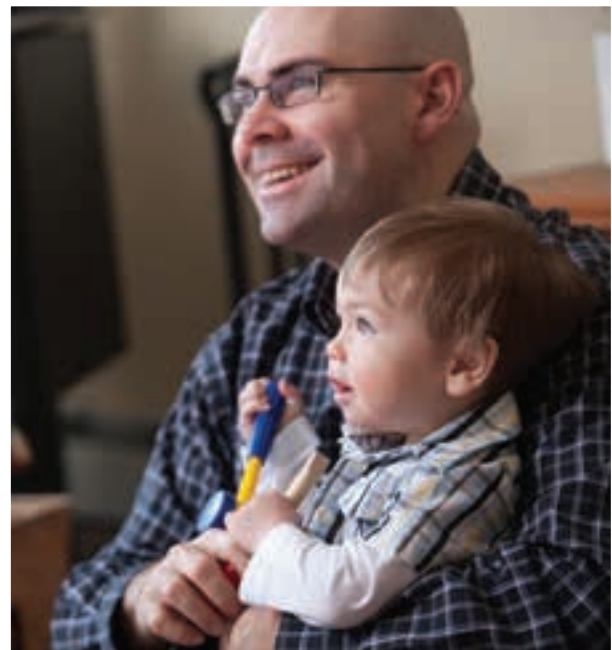
2015-2016

- Data collection over time of children’s developmental outcomes to measure and monitor impacts of learning framework implementation

- Provide ongoing training and support for early learning framework implementation in licensed child care centres

Accountability

ECE



Areas for Action

20. Improve the quality of licensed early childhood education and care programs

Rationale

Raising quality in early childhood development programs requires a focused effort on growth and improvement over time. Continuous feedback and support, opportunities for reflection, and identifying next steps learning from examples of evidence-based best practices all contribute to greater quality in early childhood programs.

Guiding documents and support tools give programs valuable information about evidence-based best practice, while still allowing for the flexibility for

diversity in cultures, contexts and program structures.

Deliverables

Deliverables:

- Development of training and tools to improve the quality of early childhood development programs in the NWT
- Strengthened program quality via Early Childhood Environment Rating Scale (ECERS) and Infant Toddler Environment Rating Scale (ITERS)

- An NWT ECD demonstration site: a proposed teaching and learning “ideal model” centre for early childhood development educators

Targets:

2014-2015

- Develop a plan to build on the use of ECERS and ITERS in the NWT to focus on continuous quality improvement of programs
- Develop an “ideal model” centre demonstration sites

2015-2016

- Provide ongoing support for quality improvement in early childhood development programs
- Provide ongoing support for the proposed demonstration site

Accountability

ECE

Areas for Action

21. Increase the number of qualified early childhood development professionals in licensed programs

Rationale

High quality early childhood programs require well-trained and knowledgeable educators. Capacity in the early childhood development workforce varies widely.

Some early childhood development staff have a one-year ECD certificate, with many having no post-secondary education whatsoever.

Another capacity related issue is the problem of low income earning potential in the ECD field, even for those who do complete certificate and diploma programs. ECD staff want the importance of their profession recognized, valued and reflected in their income earning potential.

Deliverables

Deliverables:

- Promotion of the ECD profession
- Credentialing system for ECD professionals
- Tiered wage top-ups for ECD professionals
- Scholarship fund as an incentive and support for Northerners to complete ECD diploma and degree programs
- Incentive and support system to encourage students of the Aurora College ECD certificate program to complete

Targets:

2014-2015

- Support all existing early childhood staff to have the required minimum post-secondary education and ongoing annual professional development, as specified in the *NWT Child Daycare Standards Regulations*

- Strengthen the certificate program available through Aurora College
- Provide Aurora College ECD certificate students with incentives, supports and mentoring to complete the program
- Develop and implement an NWT wage top-up plan
- Review the credentialing practices in other Canadian jurisdictions
- Provide access to an online introductory early childhood development course that will be recognized for wage top-up purposes
- Amend the *NWT Child Daycare Act and Regulation Standards*, as necessary
- Develop and implement a plan for scholarships to incent and support Northerners to complete ECD diploma and degree programs

2015-2016

- Provide ongoing support to early childhood staff to obtain continuing post-secondary education and ongoing professional development
- Provide ongoing support to Aurora College ECD programs
- Develop an NWT credentialing system for ECD staff
- Deliver a public awareness campaign to promote the profession of early childhood development
- Collect data and measure impacts of actions to support the early childhood educator profession on programs in the NWT

Accountability

ECE

Commitment 7: Monitoring, reporting and ongoing evaluation for continuous quality improvement in early childhood development programs and services.

Areas for Action

22. Develop and implement a Monitoring, Evaluation and Accountability (MEA) Plan for the renewed Early Childhood Development (ECD) Framework and Action Plan

Rationale

Clear roles and responsibilities, and built-in performance monitoring indicators and evaluation measures provide timely feedback and allow for adjustments along the way, ultimately increasing the quality of the program. The result will be continuous quality improvement of programs, services and initiatives available to children and families.

Deliverables

Deliverables:

- Monitoring, Evaluation and Accountability (MEA) Plan for *Early Childhood Development Framework* commitments

Targets:

2014-2015

- Complete and implement the MEA Plan
- Report on progress of 2013-14 activities

- Carry out specific program evaluations, as determined by the schedule
- Building on the work from the MEA Plan, data sources and other resources to support evaluations need to be identified

2015-2016

- Develop and implement a mechanism for continuous quality improvement
- Report on progress of 2014-15 activities

- Carry out specific program evaluations, as determined by the schedule
- Implement and report on the implementation evaluation on the ECD action plan

Accountability

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ECE





If you would like this information in another official language, call us.

English

Si vous voulez ces informations en français, contactez-nous.

French

Kĩspin ki nitawihtĩn ē nĩhĩyawihk ōma ācimōwin, tipwāsinān.

Cree

TŁIČHŦ YATI K'ĚĚ. DI WEGODI NEWŦ DĚ, GOTS'O GONEDE.

Tłıchŧ

ŦERIHTŁ'ÍS DĚNE SÚLINÉ YATI T'A HUTS'ELKĚR
XA BEYÁYATI THEŦA ŦAT'E, NUWE TS'ĚN YÓŁTI.

Chipewyan

EDI GONDI DEHGÁH GOT'IE ZHATIE K'ĚĚ EDATŁ'ĚH
ENAHDDHĚ NIDE NAXETS'Ě EDAHŁÍ

South Slavey

K'ÁHSHÓ GOT'INE XƏDƏ K'É HEDERI
ŦEDİHTL'É YERINIWE NÍDÉ DÚLE.

North Slavey

Jii gwandak izhii ginjik vat'atr'ijahch'uu zhit
yinothan jì', diits'at ginohkhì.

Gwich'in

UVANITTUAQ ILITCHURISUKUPKU INUVIALUKTUN, QUQUAQLUTA.

Inuvialuktun

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Inuktitut

Hapkua titiqqat pijumagupkit Inuinnaqtun, uvaptinnut hivajarlutit.

Inuinnaqtun

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