

- ▶ **Building A Relationship:
Perspectives From One First Nations
Community**
- ▶ **Nouer une relation : le point de vue d'une
communauté des premières nations**

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KEY WORDS

COMMUNITY DEVELOPMENT

CULTURAL SAFETY

RELATIONSHIP

FIRST NATIONS

Abstract

Community development and cultural safety models are helpful in describing services that developed in one First Nation. These models can guide professionals towards a place of shared learning and meaning in working with Aboriginal peoples. When professionals build genuine relationships, the open dialogue that emerges can lead to the development of services that are relevant and responsive to community needs. Eight community members in one British Columbia First Nation were interviewed and asked to identify information they felt was important and helpful for a non-Aboriginal professional to know before working with their people. Community members shared their personal experiences and suggestions to assist non-Aboriginal professionals wishing to develop connections in their community. In the process, interviewees also pointed to specific information that they wanted professionals to know about their community's past and current situation to help them support and work with families and the broader community. Professionals who want to engage in a respectful and mutually beneficial collaborative learning process with Aboriginal people may wish to consider the ideas and insights provided.

Abrégé

Les modèles de développement communautaire et de préservation culturelle sont utiles pour expliquer les services mis sur pied dans une communauté des Premières Nations. Ces modèles peuvent amener les professionnels à l'apprentissage mutualisé et à un sens commun dans leur travail auprès des Autochtones. Quand des professionnels nouent de véritables relations, le dialogue libre qui en découle peut mener à l'élaboration de services pertinents et réceptifs aux besoins de la communauté. On a demandé à huit membres d'une communauté des Premières Nations de la Colombie-Britannique de déterminer, selon eux, l'information qu'il était nécessaire et utile de posséder pour qu'un non-Autochtone puisse travailler avec leur peuple. Les membres de la communauté ont partagé leur expérience et des suggestions pour aider les professionnels non autochtones qui souhaitent tisser des liens avec leur communauté. Cet exercice a mené les personnes interrogées à cibler des renseignements précis qu'à leur avis les professionnels devraient posséder au sujet de l'histoire et de la situation actuelle de leur communauté. Ces renseignements pourraient aider les professionnels à soutenir et à travailler avec les familles et la communauté. Les professionnels voulant mener une démarche d'apprentissage mutuellement bénéfique et respectueuse avec les peuples autochtones pourraient examiner les idées et points de vue présentés dans cet article.

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INTRODUCTION

Research data in Canada suggest that Aboriginal children show a higher prevalence of language delay than non-Aboriginal children. According to a survey of children in Aboriginal Head Start programs, a diagnosis of 'language delay' made up the largest category of special need by a wide margin (Public Health Agency of Canada, 2001). A recent investigation of First Nations dialects leads us to question the relevance and validity of traditional tools and methodologies used to identify language delay and disorder in Aboriginal children (Bernhardt, Ball & Deby, 2006). Nonetheless, health, education and First Nations organizations are increasingly interested in the services of speech-language therapists.¹

Non-Aboriginal service providers, however, are not always prepared for cross-cultural care and may find it difficult to form partnerships with First Nations people to support the hopes and dreams they have for their children, family and community. Cultural safety and community development models offer useful starting points and frameworks for professionals committed to building partnerships in Aboriginal communities.

COMMUNITY DEVELOPMENT

Social models of health focus on well-being and emphasize the importance of the individual's and the community's experience and knowledge in improving health related outcomes. Such models are particularly relevant in the Aboriginal context as the traditional Aboriginal concept of health is holistic and incorporates mental, physical, spiritual, emotional and social aspects. The health and well-being of individuals and communities are viewed as interdependent and equally important (National Aboriginal Health Organization, 2007).

Speech-language pathology services have traditionally been rooted in a biomedical model where 'health' is defined as the absence of disease. Services may be offered on a continuum of care which can range from services narrowly focused on assessment and intervention provided to an individual to services which are more inclusive and family-centered. Health promotion activities are generally related to the specific training and skills of the profession and may be aimed at such areas as the development of communication skills or the reduction of risks for developing communication difficulties. For speech and language professionals, as for other health and education specialists working in Aboriginal communities, the challenge is to expand the scope of services and approaches so they become community-focused and community-centered.

Community development is a process where community members come together to take collective

action and generate solutions to common problems (Frank & Smith, 1999). In this model, top-down 'expert' driven change is replaced with community driven control and decision-making. Professionals may successfully participate in a community development approach and build capacity when they commit to working in a broader way to support the Aboriginal community's strengths and goals. According to this model, the health professionals engage in a collaborative process where they listen to and consult with the community before responding to a need.

CULTURAL SAFETY

For therapists and other service providers who are committed to working with Aboriginal peoples, there are a multitude of terms and ideas (e.g., cultural awareness, sensitivity, responsiveness and competence) that may guide or confuse those seeking to bridge cultural gaps. Cultural safety is a concept that originated in New Zealand in the 1980's in response to Maori people's negative experiences with health care and issues with access to health services. The work of a Maori nurse, Irihapeti Ramsden (Papps & Ramsden, 1996), provides an important foundation for this idea, which "moves beyond the concept of cultural sensitivity to analyzing power imbalances, institutional discrimination, colonization and relationships with colonizers, as they apply to health care" (p. 1, National Aboriginal Health Organization, 2006.) Ball's (2007) discussion of cultural safety describes five principles that are key to working toward the development of shared knowledge and respect. These principles have particular relevance to speech and language professionals. They are paraphrased below:

1. Knowledge of protocols. What do we know about the culture and cultural forms of engagement? How do we show respect for them?
2. Personal knowledge. Are we aware of our own cultural identity and socio-historical location? How do these affect our thinking and interactions with Aboriginal partners?
3. Partnerships. Are we dedicated to collaborative practice and do we value the knowledge and skills of our partners?
4. Process. Do we place value on mutual learning and encourage ongoing dialogue to ensure that the direction and goals are appropriate?
5. Positive purpose. Can we be sure that what we are doing will have a real benefit for the people we work with?

A definition of cultural safety developed by Williams

(1999) highlights the importance of shared knowledge and the relational aspect in “an environment, which is safe for people; where there is no assault, challenge or denial of their identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience, of learning together with dignity, and truly listening” (p. 213).

THE IMPORTANCE OF RELATIONSHIP

Based on the data from a survey, speech and language professionals with practice experience among Aboriginal peoples in Canada called for “an altogether different approach” (Ball & Lewis, 2005). Respondents were consistent in recognizing “the importance of establishing positive and trusting relationships with Aboriginal caregivers of Aboriginal children, and with people who are trusted within the Aboriginal community to which the child belongs” (Ball & Lewis, 2005, p. 33). However, historical and current realities for Aboriginal people may present significant barriers to developing a genuine relationship and there may be hesitation or reluctance on both sides - from community members as well as professionals. While it is clear that a new approach is needed, there is no set formula because peoples and communities are unique. Consequently, even professionals who are genuinely motivated to ‘do the right thing’ and want to build partnerships and trust with Aboriginal people may be uncertain how to move towards the goal of helpful partnerships within communities.

SETTING THE STAGE

This paper reports insights gained from interviews conducted with community members from one First Nation, Mount Currie, in British Columbia. Mount Currie is the fourth largest on-reserve community located in a rural and mountainous area north of Whistler, B.C. First European contact came over 200 years ago when Alexander Mackenzie arrived overland at the Pacific. Miners, traders and settlers continued to arrive “without an invitation” (p. 3, Lil’wat Nation: A Fact Book 2005). The Lil’wat were stripped of their land, rights and resources and confined to 10 tiny reserves that amounted to a mere .004 percent of their traditional territory.

The Lil’wat are a resilient people with a strong commitment to their language and traditions. Supporting the health and development of the Nation’s children and families is a priority to them. Established in 1996, the Mount Currie Health Centre is an important hub for community services and includes the Pqusnalhcw Daycare, Elders’ services, Community Health Nurses, dental services and other health and wellness practitioners. The Xit’olacw Community School is Band-

operated with over 248 students from K4 to Grade 12 and offers an early immersion program in Ucwalmicts. The Cultural Centre, co-located in the community school, is a resource centre that develops and implements a wide variety of initiatives to support the revitalization of the Lil’wat language and culture in the traditional territory.

As part of their commitment to children and families, the Band contracted the services of a speech-language therapist, a physiotherapist and an occupational therapist over a decade ago. Therapists in these three professions have provided services to the Xit’olacw Community school, the Pqusnalhcw daycare, as well as to Elders, children and families in the wider community. Connections between the therapists and the community were built gradually over a period of years. Today, an early intervention team consisting of Aboriginal early childhood professionals, social service and school staff, community health nurses, a speech and language therapist and a physiotherapist meets regularly to collaborate and support individual children and families as well as focus on broader community initiatives. The specific activities and services evolve in response to ongoing discussion with colleagues and community members. Written materials on cross cultural issues and training in areas such as cultural safety are relatively recent developments and were not as easily accessible a decade ago to support professionals working with First Nations.

“For fourteen years, I have had the opportunity to work with and learn from community members of the Lil’wat Nation. When I first arrived in Mount Currie in 1995, First Nations issues were not widely reported in the press and I was unaware of the history of First Nations people. I did not initially understand the level of distrust and lack of acceptance for a therapy process that seemed to work elsewhere. There was little information to guide and assist in establishing connections. Relationships were gradually formed through a long-term commitment to the community. The shared learning is an ongoing process and dialogue with community colleagues continues to guide my professional practice.” (Author)

This paper is intended to provide the opportunity for therapists and other professionals to hear the voices of the Lil’wat people, to give them a chance to think about the points that community members raise and to consider whether these same issues may be reflected in their own personal interactions with Aboriginal people.

METHOD

Participants

Semi-structured interviews were conducted with eight community members of the Lil'wat Nation in Mount Currie, B.C. Many of the individuals who agreed to participate had extensive experience working with non-Aboriginal professionals both in and out of their community. They provided written consent to have their perspectives included anonymously in this publication. Interviewees were all women. Seven participants were siblings, parents or grandparents of children who have required ongoing support from health and education professionals. The professional roles of these women in the community were maternal child health program staff member (one participant), early childhood educators (four participants) and staff members of the First Nations Xit'olacw Community School (two participants). Participants ranged in age from 24 to 65 and had between 3 and 35 years of experience in their current professions. Since these participants were co-workers of the author, they are referred to as colleagues in this paper.

Data Collection and Analysis

The semi-structured interviews took place at various locations in the community over a period of 1 month. They were conducted individually, and in one case, in a small group. Respondents were advised of the questions prior to the actual interviews, which ranged from 20 to 45 minutes in length. Interviewees were asked two questions:

1. What would you want a professional who is new to the community to know about your community that would help them to develop connections?
2. What quality do you think is most important in a non-Aboriginal professional wanting to work in your community?

The questions selected arose from ideas that were implicit in many conversations that had occurred over the years. Participants were invited to expand on points that were raised in their responses. All interviews were audio-recorded, transcribed and shared individually with the participants to ensure that the interpretation was reliable and accurate. The comments were then organized thematically and distributed to participants who were invited to provide feedback and further elaboration.

The themes and categories that were derived from the semi-structured interviews were generated using qualitative data analysis strategies that have their basis in ethnographic research and grounded theory (Agar, 1986; Strauss & Corbin, 1990). Through this process, interview responses were broken down into relevant

properties and dimensions for the purpose of identifying and interpreting major themes in the data. Once the main themes were identified by the researcher, respondents were invited to verify and elaborate on them, providing important information regarding the validity of the results. In the presentation of the results, each of the themes that characterized the data will be discussed and supported through illustrative quotes. In the citations below, each colleague's comments are numbered in Ucwalmict's, the language spoken by the Lil'wat people, to ensure anonymity.

RESULTS

Connect with the People and the Place

All the Aboriginal colleagues agreed that professionals should start by listening to people in the community. Connections may not develop quickly and professionals should be patient, comfortable in silence, and not so focused on their own goals that they miss the opportunity to connect in ways that are meaningful for community members.

"Don't just come in and tell me what you know, work with me and listen to me." (xw7útsin)

"The person that is coming in is obviously someone who would want to be here. That would be their number one thing. And in order to want to be here they want to know more about us, so that's the start. As soon as you see that connection you know that this person is here and wants to be here with us and you would know it and that's how you would build relationships." (t'áqemkst)

Wanting to know who the people are is the first step for a professional who is new to the community. A genuine desire to find out about the people and the place creates a level of comfort in interactions and lays the foundation for respectful relationships. As one colleague recounted, individuals who are unable or unwilling to learn about the people and their ways do not 'connect' and often leave.

"Because over the times, I have come across people that came, at least for me anyways, I could feel that there was no connection and you would know soon enough and then that person just moves on because they know it's not their place, they don't fit in, and it's hard for them. Because they're used of the way they live and they can't get used of the way we live. Kind of like two different worlds." (t'áqemkst)

Professionals need to take the time to listen and get to know the people in the community and the community as a whole. A willingness to change and adapt to the community if needed is essential.

Be Aware of the Impact of Past Experiences

As is the case for many Canadian Aboriginal communities, the legacy of the residential school system continues to impact families and community. One colleague recalled how the knowledge and history of residential schooling impacted her and affected the efforts of therapists to support her child and family.

“They need to know our background - where we came from. Even though it’s been generations for residential school, it’s still affecting our kids. (ánwas) You guys were trying to come into my home but I am scared to let you in because I am scared you were going to take my kids away... You probably wouldn’t think that but we watch it left and right and so even our parents were taken away to residential schools. It goes back... We still really watch ourselves on reserve because it’s always non-native people taking native kids away. It always has been and that’s the big picture.” (pala7)

Several colleagues stated that it was critical that professionals not only know about the history of residential schools but also become more sensitive to the way these and other experiences continue to affect families.

“Some people take longer to speak to and choose their words or they’re unsure how to put it into words - the kind of information that they’re going to give you because, with a lot of people on reserve, the fear is judgment. Scared they’ll get in trouble for doing something wrong when they think they’re doing something wrong or they’re afraid that they’ll get in trouble because there’s so much children getting taken away - so that’s a huge fear.” (pál7upst)

Non-Aboriginal outsiders may be viewed with distrust as a result of activities that are unrelated to the services they deliver. The impact of traumatic events in the community may be so pervasive that even families without any direct experiences may still find it difficult to connect with non-Aboriginal health and education professionals.

One colleague suggested that families may become more comfortable accessing services when professionals clearly and explicitly communicate their purpose.

“You kind of have to set it out clear to who you’re working with that you’re not going to take the kids away. Right from the day one. I’m not here to judge you. Make it clear. That way you might be welcomed into the home.” (pala7)

Many families are uncomfortable with outsiders in their home. Community colleagues have assisted by accompanying professionals to home visits. Alternatively,

they have arranged or encouraged family visits in neutral and ‘safe’ locations such as a school, health centre meeting rooms, or during regularly scheduled wellness clinics or events in the community.

Learn about The History and Traditions of the People

Responses of all Aboriginal colleagues were consistent in emphasizing the need for non-Aboriginal health professionals to know about the history and culture of the people before starting to work in the community. Colleagues’ comments reinforced that it is not just general knowledge of the history of Aboriginal people that is important. They also want professionals to know about their community today. Professionals should pay particular attention to the events, the places, the families and the relationships that have shaped the present.

“I would like them to know our history.” (ánwas)

“And they also need to know our traditions.” (t’áqemkst)

“...be aware of the cultural background and the traditions, I think. Not meaning just cultural traditions but what generally the community is about - understanding where the community is coming from. I think that’s very important.” (tsilkst)

Knowing what the community is about goes beyond knowing only the past. The professional who is able to listen and learn is able to contribute to the current plans and aspirations of the community.

Take Time and Let the Community Know Who You Are

All colleagues recommended that professionals should have a patient attitude. Rather than focusing immediately on the ‘work to be done’ they should slow down in interactions with community members and remember that it takes time to make connections that lead to positive relationships.

“Professionals should not jump right into business but start to earn the community’s trust. And you know not poking and prodding on certain things they do - like a health nurse wouldn’t just go in and say your child needs immunization shots, see you - but building that relationship first.” (tsúlhaka7)

“Just get out into the community - like even not having to do with anything professional that’s going on and just let people know okay, I’m here. This is how I am and this is what I do...” (ánwas)

Several colleagues recommended that professionals ‘be present’ in the community beyond their job and

participate in community activities. Traditional gatherings and celebrations of culture, sporting events and other activities provide opportunities to be involved in the wider community. Invitations to take part may emerge slowly over time. A long-term commitment to the community supports the development of trust and understanding that is necessary to working effectively together.

Learn from Colleagues to Understand Families

A real or perceived lack of interest in understanding how each child or family's personal history affects their current situation can lead to misunderstandings or misinterpretations that affect the ability to work together. Community colleagues know and understand family circumstances, and while respecting family confidentiality, may be able to provide critical support and information for non-Aboriginal professionals.

"If a new staff, for instance, comes on board and doesn't really know the background of staff or students and then they're wondering why they can't connect or there's a breakdown of relationship because the new person doesn't understand where they're coming from. For us that have been here and live here, we know." (t'áqem'kst)

"I think for us as Aboriginals, it's like knowing background and some parents may not always be willing to give that background and be on the defensive side or the denial side. It goes right back to... all the trauma that these parents have gone through and they don't want to dig up these past issues... For people to come into an aboriginal community, I can see the families parents shutting down because of that." (kalhás)

Listening and learning from colleagues in the community is essential for professionals who want to make positive connections with individual children and their families. Community members know the people in their community and their personal histories and they expect professionals to possess an openness to understanding "the struggles of each family and the community" (xw7útsin).

Know the Community Before Providing Assessments

Several colleagues recommended that professionals establish a relationship with a family before attempting to move forward with assessments or interventions. Making connections with community colleagues, attending community events and just spending time around families is important to the development of a relationship of trust, confidence and understanding.

"Just try and build a relationship with a parent before actually trying to make a diagnosis or an assessment." (ánwas)

"I didn't know you and I guess too I didn't know what you were supposed to be doing... I just felt that you didn't understand our native children and that's what I guess upset me." (xw7útsin)

Without an underlying relationship and mutual understanding, assessment and intervention services may be unnecessarily stressful. Community members expressed an interest in knowing more about professional roles and services, but equally important is getting to know who that professional is – as a person.

The trust that develops by building relationships heightens community awareness, and makes services and interventions more relevant and appropriate as families are more confident in partnering and providing real input.

Assessment processes can have unintended and lasting harmful effects. Aboriginal people are frequently confronted with negative statistics and information about their well-being and their ability to parent and to live healthy lives. Professionals need to be sensitive to the effect that diagnostic labels, such as those that speech-language therapists would apply to describe children's language skills, can have on family members. Developing a critical and self-reflective attitude about what we have been trained to do, and what we believe we know, is necessary if we are to make positive contributions in the community.

"Back then I always think of how upset I was. Even today I would really feel like they were labeled and to this day I feel they were struggling because of that. I still get upset about it." (xw7útsin)

Be Community-Centred

"Listen to the community... not only thinking of the child but the community and the family." (kalhás)

This colleague's recommendation to listen to the community is echoed in many responses. In Mount Currie, the speech and language therapist participates in a team that is involved in planning and delivering events that are of interest to the broader community. *Celebrating our Children* is one example of a community event that brings together school, daycare, health and wellness centre staff, Elders and others to promote culture, support children's health and recognize the importance of families. Professionals involved in this event get to know and talk to families and become known by the community in a non-threatening venue. The yearly themes (from family literacy to healthy eating with a focus on traditional

foods) are the result of a collaborative process that reflects community goals for families and children as well as the community's aspiration to support the personal growth and development of children.

"I think the children will be more successful if we are working towards that all children get equal services, not just people at risk or special needs or a single child – not narrowing it down. But have the same for everyone." (tsúlhaka7)

Several colleagues mentioned the value of collaborative efforts that will support all children in the community. Therapists and other professionals often have limited time but the importance of general health promotion activities should not be underestimated. While the participating colleagues knew and understood that some children require individual supports, there was a stated need for better opportunities to work together and explore ways to share knowledge benefiting all children.

Support Traditional Culture and Language

Professionals were encouraged to show respect for and interest in the traditional language and culture.

"The main thing is to... focus on the culture." (xw7útsin)

Professionals who want to incorporate traditional language in a variety of activities, general as well as child and family focused, can partner with community members who are fluent and knowledgeable. Speech and language therapists, in particular, with specialized training in communication and language development can support traditional language in both specific and general ways. For example, families can be shown that language strategies that support development of English may be equally helpful in supporting traditional language learning. Child specific speech and language materials may be developed for traditional language targets. When non-Aboriginal professionals encourage traditional language and make an effort to learn and use it, this shows respect for the culture and the people.

Maintain a Supportive Attitude and Develop Genuine Understanding

When colleagues were asked about community-specific information that should be shared with professionals who were new to the community, responses often focused first on the personal characteristics that they valued in service providers. Professionals were expected to maintain confidentiality, be reliable and "keep their word" (táqemkst). Compassion, caring and kindness were also highly valued, but all the Aboriginal colleagues stated that the most important quality in any professional was a non-judgmental and unbiased attitude.

"Compassionate, understanding and not quick to judge and that they have good listening skills and that they have a lot of patience." (tsúlhaka7)

"Trustworthy would be my biggest one. If you don't have that there is nothing to build on." (táqemkst)

"Non-judgmental. Kindness and be willing to accept whatever comes forward." (Pál7upst)

Historical and current experiences contribute to feelings of mistrust and suspicion, which need to be overcome. This requires a non-judgmental and accepting attitude on the part of the non-Aboriginal professional.

Merely knowing about the history, culture, traditions and current situation of Aboriginal people is not enough. There is the expectation that this knowledge will result in a deeper understanding of the difficulties and hardships as well as the successes and achievements that the community and families have experienced and may continue to experience. Colleagues stressed that it is the move to genuine understanding and acceptance that is fundamental to establishing relationships of respect and recognition. Without understanding and acceptance, few insights into the past or the present are available and the future hopes of the people for their community and children may not be shared.

"Understanding of how we're trying to bring back our culture. How we are struggling with not knowing our language. There are a lot of things going on... The main thing is to be understanding of our people. (xw7útsin)"

CONCLUSION

This paper brings together the perspectives of eight community members from the Lil'wat Nation and outlines points that may guide professionals who want to deliver services that are meaningful and relevant to the Aboriginal community. Many of the ideas expressed in the interviews have been heard in conversations between the author and colleagues over a period of years. Established relationships have facilitated an openness and willingness to ask and respond on both sides, which might not have been possible a decade earlier. The interview process provided the opportunity for open discussion with community members and their views on the essentials for fostering productive relationships with non-Aboriginal professionals working in their community. While the responses provided by the participating colleagues may have some limitations in terms of their generalizability to other Aboriginal communities who may be experiencing different challenges related to service delivery, they nevertheless provide important directions for the establishment of

collaborative, community-based speech and language and other therapy services.

Past experiences, institutionalized discrimination and power imbalances have and continue to impact Aboriginal people and create barriers for non-Aboriginal professionals trying to make connections and develop relationships in the Aboriginal community. In contrast, culturally safe services may develop through the process of relationship building. In Mount Currie, safety in accessing services is enhanced by the relationships of respect and trust that have developed between the professionals and the community. Professionals in Mount Currie have had the opportunity to participate in community development initiatives, which have included mentoring, and supporting a variety of early childhood programs as well as advocating for social support projects designed for children with special needs in the community.

All the Aboriginal colleagues who participated in the interviews agreed that relationships of trust and genuine understanding are necessary for mutually beneficial partnerships and services. Within trusting relationships, professionals come to know the community and are able to move forward in partnerships that are in keeping with the aspirations of the people in the community. Speech and language professionals may have to adjust their service delivery model and move beyond the traditional focus on parents and children to the advancement of community-identified goals.

Building a relationship may be challenging and takes time but along the way “you begin to understand each other and become family” (*pál7upst*). Listening and sharing with community members shapes and challenges ideas about who we are as individuals and our assumptions around people from different cultural backgrounds. Authentic relationships built on trust and understanding are not just the key to establishing professional services that contribute positively to children, families and community. They are fundamental if we are to move together towards social change and greater social equity and justice.

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ENDNOTE

¹It is standard practice in Canada and elsewhere to refer to professionals trained in speech and language as Speech-Language Pathologists. However, the emphasis on “pathology” created a barrier to access in the community. Speech and Language Therapist is a title that more accurately reflects the helping services and partnering that are provided.

AUTHOR'S NOTE

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