

A Home Visiting Early Learning Supplementary Curriculum for families of children age 3-5 years old

Utilizing Cultural Foundations & Adaptation



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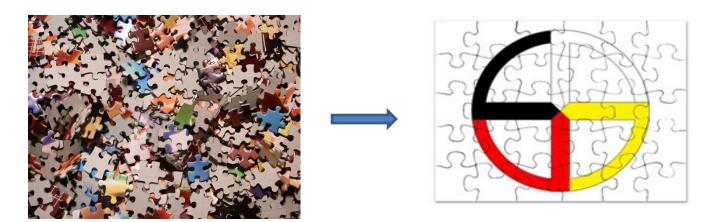
Other Programs

Michigan State University: University Outreach and Engagement

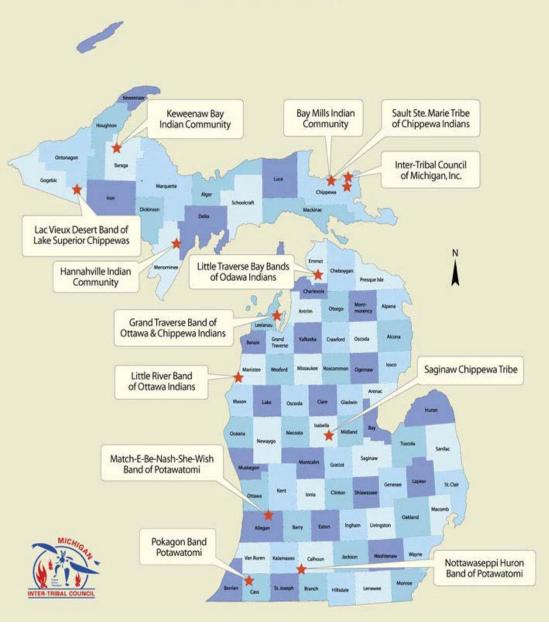
National Center on Cultural and Linguistic Responsiveness: Office of Head Start Objective: To provide an overview of the process we undertook to create a tool that met the needs of our program and communities, that is centered in our way of life, and that translates to work with a federally funded program

OR IN OTHER WORDS...

To tell you how we took 4000 pieces of a puzzle and figured out how they could fit together.



Michigan's Federally Recognized Tribes



Inter-Tribal Council of MI:

- -Consortium of 12 MI Tribes and 1 Urban Tribal Program
- -Scope of work and services provided include Public Health and Disease Prevention, Maternal and Child Health, Environmental Health, Substance Abuse and Prevention
- -We DO NOT act on behalf of Tribes, we provide services to Tribes when they are interested in partnering on grant opportunities and projects

Gikinawaabi



Gikinawaabi:	Observation	as the	Foundation	for	Learning

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III. Reference Section

- Creative Curriculum Milestones
- PICCOLO behaviors to role model
 Medicine Wheel Overview Sheet
- Teaching the Medicine Wheel
- Book Appreciation Home Visitor Reference Sheet Math Home Visitor Reference Sheet
- Math Home Visitor Reference
 Learning to Write and Draw
- Anishinaabemowin Animal Names
- Online Resources for Parents

Gikinawaabi

- Intended for use as a home visiting early learning supplemental curriculum for families with children ages 3-5
- 13 Lessons with supporting materials (Books, Tip Sheets, Games, Coloring and Counting Resources)
- Lesson focus:
 - Math
 - Language
 - Literacy
 - Significant focus on providing materials for families after the home visit is provided
- Intended dosage one (1) Lesson per Month

Gikinawaabi Development Process



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Utilizing Cultural Foundations & Adaptations Recipe: From the Kitchen of: <u>Inter Tribal Council of MI</u> -Cultural Foundations/Way of Life Current Program Strengths/Needs/Challenges -Tribal Community Needs/Guidelines -Federal Needs/Guidelines -Staffing Strengths/Challenges -Strength Based Approach -Timelines -Available Data -Partnerships -Other Relevant Resources







Team Approach & Communication

Team Approach:

- Phone
- Webinar
- Zoom
 Meeting/Skype
- In Person
 Marathon
 Meetings

Team Characteristics:

- Selfless
- Not just doing it for the publication
- Worked above and beyond what was required of them in their job
- Had trust developed within Tribal Communities through previous work
- Were open minded and flexible
- Believed in the critical nature of our work
- Respected each others input and expertise
- Willing to look outside current knowledge and established ways of doing things

Considerations

- Our children have the right to THRIVE not just to SURVIVE
- LONG waiting lists for early learning services for children age 3-5
- NEED early learning resources for a Home Based Education Structure delivered by Nurses, Social Workers, and Community Health Representatives
- UTILIZATION of the BEST existing and partner data
- NOTHING available just for us
- UTILIZE "rooting" approach instead of an "add-on"
- START with Cultural Lifeway at the beginning



THE NATIONAL CENTER ON

Cultural and Linguistic Responsiveness

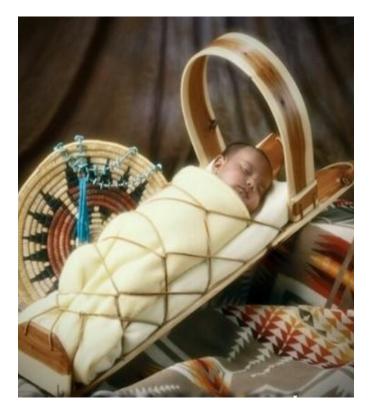
Making it Work

Making It Work! is a tool every tribal and native community can use to connect their own unique traditional cultural skills, values, beliefs, and lifeways to school readiness and the research-based Head Start Child Development and Early Learning Framework (HSCDELF



Slide courtesy of Deborah Shuey, National Center on Cultural and Linguistic Responsiveness

Implementation Fidelity



- Fidelity first to the wisdom and methods that tribes have affirmed as valuable, effective and meaningful
- Fidelity to Tribal Self
 Determination— the basis has to be a partnership rather than authority
 - Understanding that you can't lump all tribes together and say this is what you should do

Implementation Fidelity: Working with Multiple Tribes

Variations:

Language Dialects Local/Regional Teachings

Similarities:

Identifying Colors

Counting

Reading

CURRICULUM CORE: SUPPORT PARENT AND CHILD RELATIONSHIPS WHEREBY YOU SUPPORT LEARNING AND THE LEARNING ENVIRONMENT

KEY CONCEPT FOR BOTH TRIBAL AND WESTERN METHODS OF SUPPORTING EARLY LEARNING

Implementation Fidelity

 Often fidelity is understood as "adherence", and precise or exact replication of essential program elements to ensure that the desired outcomes are achieved

Examples:

1) Family Spirit Lesson structure (tracked through QA Observation)

2) Visit schedule – delivery of Gikinawaabi lessons is integrated into an overall protocol of monthly visits which also include assessments, ASQ activities and Family Spirit "make up" lessons (tracked through Visit Encounter forms)

3) Lessons are presented in order from 1-13, using standardized materials

4) Home Visitors review leave behinds and check in with parents on "work folder"

CHALLENGE: When the essential elements are cultural in nature and necessarily vary by community and individual family, how can you approach fidelity? Language, referrals to and connection with cultural leaders, and use of materials by the family will vary

Program Fidelity in Gikinawaabi

Essential methodological elements:

- 1) Culture as the lead: provide aids, materials and prompts to facilitate parents exploration and connection (which will vary significantly between families & communities)
- Elevate the home and community environment as offering rich & valuable learning opportunities
- 3) Demonstrate supportive child interaction skills then transition to coaching parent
- 4) Use leave behind materials and activities

Initial Fidelity Explorative Measures

- Presentation of the lessons is tracked
- Follow up use of materials by parents with child is tracked
- Referrals to community teachers, events, cultural resources is tracked
- Demonstration and coaching is observed during QA Supervisory visits

Approach to Documenting the Intervention

Study Design: Stepped Wedge Cluster Randomization - Tribal site used as the randomization unit (similar to the wait listed approach)

	Observations/ points of measurement	"Scaled up" Family Spirit Home Visiting services intervention	Observations/ points of measurement	Observations/ points of measurement	"Scaled up" Family Spirit Home Visiting services intervention	Observations/ points of measurement
	T1 (baseline)		T2	Т3		T4
Program Sites randomly assigned in Group 1						
	0	X	0	0	x	0
Program Sites randomly assigned in Group 2						
	0		0	0	x	0

Measurement: Outputs and Outcomes

- Outputs:
 - Client Records
 - Visit Encounter Forms: Completed at every visit by Home Visitor to document what w
 - Family Leave Behind Recording Sheet
 - Quality Assurance Observations: 2 Times per year
- Outcomes:
 - LOLLIPOP (Child)
 - PICCOLO (Parent)

Gikinawaabi Lesson Example

Lesson 2/Niish

LANGUAGE LESSON OVERVIEW: Medicine Wheel Book Home Visitor Lesson Overview

INDIVIDUAL LEVEL

To prepare for lifelong success in understanding Receptive and Expressive Language, children ages 3-5 should be developing the following skills.

Keep in mind:

- The expected progression of the development of each skill is listed in order starting at (a.).
- Every child will develop skills at their own pace.
- If you find a child has mastered one skill, begin to move on to the next.

Comprehends Language

- a. Identifies familiar people, animals, and objects when prompted
 - · Goes to sink when told to wash hands
 - Touches body parts while singing, "Head, Shoulders, Knees, and Toes"
- b. Responds appropriately to specific vocabulary and simple statements, questions and stories.
 - · Finds a favorite illustration in a storybook when asked
 - Responds using gestures to compare the sizes of the three leaves
- c. Responds appropriately to complex statements, questions, and vocabulary stories.
 - Answers appropriately when asked, "How do you think the car would move if it had square wheels?"
 - Builds on ideas about how to fix the broken wagon

Uses and Expanding Expressive Vocabulary

- a. Names familiar people, animals, and objects
- b. Describes and tells the use of many familiar items
 - . When making pancakes, says, "Here is the beater. Let me beat the egg with it."
- Incorporates new, less familiar or technical words in everyday conversations
 - · Says, "I'm not sure I can put it together. It's complicated."

Engages in Conversations

- a. Initiates and attend to brief conversations
 - Says, "Doggy. " Parent responds, "You see a doggy." Child says, "Doggy woof."
- b. Engages in conversations of at least three exchanges
 - Maintains the conversation by, responding, repeating what the other person says or by asking questions
- c. Engages in complex, lengthy conversations (five or more exchanges)
 - · Extends conversation by moving gradually from one topic to a related topic

LANGUAGE LESSON PLAN: Medicine Wheel Book

Home Visitor Lesson Plan



Target Domain LANGUAGE: Receptive and Expressive Language

Objectives

Parent Skills>	Child Skills>	Domain Concepts:	
Aware of child's engagement in the story	Listens, looks and follows a story related to the medicine wheel	The child will attend to language during conversations, songs, stories, or other learning experiences.	
Labels objects and actions for the child	Points to specific aspects (colors, directions, etc.) on the wheel		
Talks to the child about characteristics of objects in the story	Uses language to express concepts and aspects of the medicine wheel		
Waits for child's response after making a suggestion	Uses words introduced through the telling of the medicine wheel		
Demonstrates active listening, waits for child's response	story		
Encourages child to clarify meaning rather that saying "right or wrong", "tell me more"			
Asks child for information]		
Repeats or expands child's words			

Materials Needed

- Medicine Wheel Overview
- Medicine Wheel Preschool Book
- Tip Sheet: "How to Read to a Child"
- Leave-behind materials (see wrap-up section)

Time Required

Each lesson should be around 15-20 minutes in length, to leave an appropriate amount of time to complete the rest of your home visit. However, you may adjust the time you need to complete the lesson if need be.

How to Know Skills Are Being Learned

Child:	LOLLIPOP (Color, Shape, Number & Letter Recognition)
Parent:	PICCOLO (Encouragement, Teaching), Parent/Child Activity Folder



Warm-Up

The goal of any warm-up is to make the parents feel more comfortable, secure, and open to asking questions. You can start the visit by engaging the participant in an informal conversation about how she/he is feeling and how things are going in their life. Take as much time as you need to answer their questions and listen to their concerns, keeping in mind that these lessons can be completed in about 15-20 minutes.

Review Previous Lesson and Follow-Up with Referrals

If this isn't the first lesson with this family, take time to review the previous lesson(s). Ask if she/he has any questions remaining from the previous session, and probe to find out if she/he remembers the teaching points – or better yet, if they have been practicing the skills at home and in the community.

Ask the following questions and document on the Medical Chart Tab on the Visit Encounter Form:

- o "Since our last visit, have you had any changes to your health insurance?"
- o "Since our last visit, have you had any changes to your medical home?"
- "Since our last visit, have you or your child been to the doctor or hospital for any medical appointments or emergencies or other care?" If, in a previous visit with this family, any referrals were made to any services (medical, community, social services, etc.) follow-up and document that the referral was completed.

Introduction to Today's Lesson

Introduce the lesson and skills that you will be focusing on today:

- Use the Objectives as a guideline for introducing the specific domain concepts.
- If necessary, review the Teaching the Medicine Wheel Tip-Sheet before introducing Medicine Wheel teachings.
- Remind the family that the Medicine Wheel can be used to teach us about life, language, and even math and literacy.

"Today we are going to read the Medicine Wheel Book! Reading is a fun activity a parent and child can do together and is an important step in helping your child learn to read."



LANGUAGE Activities and Interactions: Medicine Wheel Book

Here are the steps for completing the activity. Keep in mind that each lesson will begin with the home visitor role-modeling the activity with the child then transitioning to the parent leading the activity with their child.

1. Review the Tip Sheet "How to Read to Young Children" and the "Medicine Wheel Overview".

- Interactively read the first few pages of the Medicine Wheel Preschool Book to the child while modeling parent skills and tips.
 - During the reading, point to the colors, shapes, animals, directions and other aspects on the page. ("That's a circle")
 - Encourage the child to demonstrate receptive language by pointing to the aspects on each page of the book when the reader asks ("Where is the color red?", etc.)
 - c. Encourage the child to demonstrate expressive language by saying the colors, shapes, animals and other aspects on the page when pointed to by the reader. ("What color is this?")
 - d. Ask the child an open ended question such as: ("Tell me what you see on this page?") and; (" What do you think they are doing?")
- Transition to parent reading to the child, allowing them to demonstrate the skills you modeled.
- 4. Provide encouragement and any guidance if needed.
- Note child's receptive and expressive language skills, point out to parent.
- Identify opportunities to reinforce concepts and practice in the home environment and community.

Lesson Wrap-Up

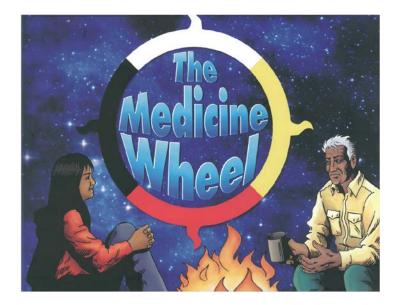
- Ask the parents:
 - 1. What was your favorite part of today's lesson?
 - 2. How could you continue practicing these activities after I leave today?

This may also be a good time to discuss any upcoming community events such as Baby Celebrations, Powwows, or health education classes.

Leave-behind Materials

Provide the parents with the following resources and any other hand-outs they may need to support their family's learning after today's lesson:

- · Medicine Wheel Overview Sheet
- Medicine Wheel Preschool Book (if not given at first lesson)
- · "How to Read to Young Children" Tip Sheet
- Creative Curriculum Learning Games #109, 125, 136, for 36-48 mos
- Creative Curriculum Learning Games #159, 161, 175, 200 for 48-60 months
- Parent/Child Activity Folder: Encourage parent to continue recording activities between home visits on the Activity Log



What we have learned so far:

- It is helpful to star with cultural values, teachings, lifeways, etc. and work with those who know them to identify the functions and needs that they cover and then look for parallels to academically-defined needs/content areas
- It is helpful to convene a multi-disciplinary team that values and is dedicated to ensuring "space" for each other's perspective and particular discipline
- It is helpful to affirm the value of "more than one way to get to the top of the mountain", and knowing that RCT, and published research is not the only valid way to affirm the value or effectiveness of something on the front end

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