

Inunnguiniq
Parenting Support Program for Nunavummiut



EVALUATION



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Summary of Findings

Eight communities completed pilots of the Inunnguiniq Parenting Support Program between January and April 2012.

Areas of Success:

- Overall, parents reported that they enjoyed the program, particularly learning about traditional Inuit perspectives on childrearing and healthy parenting.
- Inunnguiniq pilots that regularly involved Elders the sharing Inuit parenting practices and traditional lifestyle had the greatest success.
- Parents and facilitators found the session on healing had the strongest response, often continuing into 1-2 more sessions.
- Strengths-based, group format was very successful. Facilitators reported that listening and sharing stories with others made them feel better about themselves and supported. They reported transferring this into their family life.
- Observations highlighted that participants were most comfortable with and responsive to material when they were active and working on something with their hands.
- When men participated, it was observed that they participated more readily when activities were on the land.
- The food and nutritional components of the program were very well received.

Areas for program improvement in next phase:

- The amount of material in the curriculum made it difficult for community facilitators to work with.
- The reading and comprehension material of the curriculum materials is too advanced.
- Reading and writing activities in the curriculum had little response
- Some of the curriculum elements that were developed to provide structure to the session were too complex and confusing for many facilitators

Recommendations for next phase of pilots:

- The curriculum will be revised into 2 streams: a) a course to be developed for the Nunavut Arctic College and b) a stream-lined version that will be used for community parenting program facilitators
- Revise the reading level of the materials for the parenting program
- Remove some of the more complex curriculum structure and add-in more activity-based discussion
- Re-visit the healing component with Parenting Working Group to develop a plan for addressing this need.

Introduction

History

Qaujigiartiit is an independent, non-profit community research centre governed by a volunteer board of directors. Qaujigiartiit Health Research Centre enables health research to be conducted locally, by Nunavummiut, and with communities in a supportive, safe, and culturally sensitive and ethical environment, as well as promote the inclusion of both Inuit Qaujimatugangit and western sciences in improving the health of Nunavummiut.

Mental health and wellness is the number one priority of the research centre. In 2010, Qaujigiartiit Health Research Centre was granted 5 years of funding for a programme of research entitled Child and Youth Mental Health and Wellness Intervention, Research and Community Advocacy in Nunavut. The purpose of this project is to research, develop, implement and evaluate child and youth mental health and wellness initiatives in Nunavut that focus on Northern and community-based ways of understanding and knowing about healthy children and youth. Funding for this programme of research is provided by the Public Health Agency of Canada.

The development of an evidence-based parenting support program is one component of the Child and Youth Mental Health Intervention, Research and Community Advocacy Project in Nunavut. The driving force behind this parenting programs research component has been to respond to the need identified by communities for a culturally relevant model for supporting Nunavut parents. Qaujigiartiit is working with many partners to fulfill this need, including the Nunavut Dept. of Health and Social Services, Nunavut Tunngavik Inc., Health Canada, community wellness centres, and community organizations.

The *Inunnguiniq* Parenting Support Program is the result of 2.5 years of research and consultation with many organizations and communities. QHRC plans to pilot, evaluate, and modify this evidence-based, culturally relevant parenting program over 4 years prior to releasing it for use in Nunavut.

This report outlines the evaluation data from the first pilots conducted in Winter 2012 in collaboration with the Government of Nunavut's Department of Health and Social Services (GN DHSS). DHSS provided support and oversight for the development of the Nutrition Module as well as funding and program support for eight additional community pilot sites (Cambridge Bay, Cape Dorset, Clyde River, Coral Harbor, Gjoa Haven, Igloolik, , Kimmirut, and Rankin Inlet). Two of these communities were unsuccessful in implementing a pilot of the program (Igloolik and Kimmirut). QHRC provided funding and support for two communities, Iqaluit and Arviat. QHRC provided program support to Iqaluit and Arviat, as well as for the two Kitikmeot communities, and conducted the data collection and evaluation for all communities. The results of the data collection are presented here.

Inunnguiniq

The basic structure of the *Inunnguiniq* Parenting Support Program is as follows:

- Facilitator pairs offer the program together in English, Inuktitut and/or Inuinnaqtun as they desire.
- The format is a strengths-based group discussion design. Each session begins with a central theme that is explored through a range of activities and dialogue over the course of 2-3 hours.
- The target audience is parents/care-givers/foster parents/extended family. Anyone who cares for children full- or part-time. This is NOT a program for ‘high-risk’ parents, but ALL individuals who care for children. Group size should be approximately 8 people.
- *Inunnguiniq* is not a counseling program.
- The program consists of 6 modules taught over 18 sessions (offered 1-3 times/week depending on facilitator comfort/availability)
- Each session is to include an elder if possible. In some cases, dvds of elders speaking or telling stories were incorporated into sessions where elders were not available or were not comfortable speaking on a topic.
- Each program is to incorporate land components in a minimum of 1 session, but can expand to more.
- The parenting program must provide childcare at each session to support parents who wish to attend.
- Each session must incorporate a food component (a snack break). The snack must be nutritious and should be country food when availability allows. Recipe ideas are included in the curriculum.

The resources provided to each program included:

- Each pilot program received 2 copies of these documents in English and Inuktitut at the training:
 - *Inunnguiniq* Parenting Support Program Curriculum (Modules 1-5 and a separate volume for Module 6)
 - *Inunnguiniq* Parenting Support Program Handbook (additional material for parents and facilitators which included additional stories from elders; additional activities; and an appendix of recipes from community cooking programs in Nunavut)
 - *Inunnguiniq* Evaluation Booklet
- Each pilot program received a bin of resources, such as food guides, dvds, cd, posters, pamphlets, and more to complement the activities in the curriculum.

Evaluation Approach

Information was gathered from each of the communities via the following:

1. Weekly telephone calls from support coordinators to facilitators. Calls lasted approximately half an hour each; notes were recorded on a computer by the project coordinator.
2. An Evaluation Materials book was given to each facilitator at the training. This included written evaluation questions for facilitators to complete after each session (questions were the same for each session); a pre and post Nutrition Module questionnaire for facilitators to ask parents; and a parent exit questionnaire to be completed by parents.
3. Teleconference: During the last week of February all facilitators were invited to join support coordinators for a conference call. Eight facilitators and two program leads called in. Seven communities were represented. Agenda included a sharing of program successes and ideas for overcoming challenges. Support coordinators listened allowing facilitators to provide peer support.

Weekly Phone Calls

This was the primary mode of data collection and generated the most data. Facilitators shared perspectives, successes and challenges during the phone calls than was expressed in the written documents that were collected.

Evaluation Materials Booklets

Booklets were submitted from seven of the eight communities. Many facilitators did not answer the questions as asked; they used the pages to record their thoughts and what they did in the session. It became evident that evaluation paperwork was a difficulty for many facilitators. Phone calls proved a more effective method of information collection.

Parent Exit Questionnaires

The parent exit questionnaire could be administered one-on-one by the facilitator or a parent could fill it out individually. Low literacy and writing skills were reported by some facilitators so they gathered the exit data either in interviews, by conversation, or by observation (See Appendix A for results).

Measuring Success

The idea of success in this evaluation is based on the following:

- Number of participants / repeat participants
- Involvement of Elders
- Level of facilitator engagement and enthusiasm with program
- Level of participant responses/interaction with others and material

Recruiting Parents

Each community implemented a recruitment strategy that was most appropriate for them. The methods for recruitment included:

- Flyers/posters
- Radio announcements
- Word of mouth
- Canadian Prenatal Nutrition Program (CPNP) contacts
- Social services/Public Health referrals

Many facilitators began by inviting people to register. Most programs eventually opened participation to anyone who wanted to attend. Recruitment was often ongoing throughout the program via radio and word of mouth.

Messaging about program content that was distributed by the facilitators in each community varied from community to community: some noted that it was simply a parenting program and did not mention that it was about support as well. Some did not mention the cultural content while others championed this part noting it was about learning traditional Inuit ways. One facilitator noted it was not only about parenting but about better futures. Many mentioned that the teachings were from the Elders.

The Spectrum of Parents (low risk to high risk)

The target audience for this program is anyone who has children in their care full- or part-time, and has been described to be a cultural revival program as much as a parenting program. This program was developed for participation by parents, guardians, foster parents, and/or extended family. Parents/care-givers who are interested in leadership and learning about Inuit perspectives on childrearing, healthy meals for families, communication strategies and child development are the key audience. This messaging was not clear in many communities during parent recruitment. There may have been a misconception that high-risk parents were the target audience in some communities. Some facilitators developed their own guidelines for recruitment by only advertising for couples, excluding extended family or single parents, which was not the intention.

Single Parents

One community was overwhelmed with phone calls from single mothers wanting to participate in the program. Many participants of the Inunnguiniq program in all communities were single mothers.

Fathers/Men

The few men who came to the program enjoyed it and often returned. On a number of occasions the men who came spoke to their friends/relatives and invited them to the program. Sessions that included men tended to have fuller discussions delving deeper into the core content.

One community planned to have a men/fathers only session where they would show the National Collaborating Centre for Aboriginal Health (NCCA) DVD *With Dad*¹; they had an experienced male facilitator lined up but were unable to follow through.

Radio

In communities who had active community radio stations, this was an effective way to share information about the program. Radio was also used to recruit childcare workers and Elders and notify the community if a class was cancelled. One community used the Inunnguiniq materials to conduct radio shows on Parenting. They offered prizes and reported this was well-received and increased program participation.

General Program Comments

Program Planning

At the training, facilitator pairs were encouraged to meet either in Iqaluit with the Inunnguiniq Coordinators or upon return to their home communities to begin planning the implementation of their pilots. Facilitators that planned well in advance proved to have lasting programs with better attendance. Most facilitators scheduled a weekly planning time; those who followed through saw greater success.

Introducing the Program

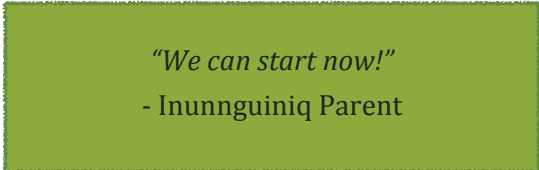
Each community created their own introduction to the program and most did not start with module one session one. An introductory recruitment open house format provided a common first meeting and often involved food, games and prizes. One

community implemented a 2-day introduction to the program over a weekend focusing on the healing component of Module 1. Elders and parents were invited to come and learn about the program and were provided opportunities to share their stories. This weekend was well attended and provided a strong foundation upon which to start the program.

Most communities expressed the program had a slow start. After the first module was completed, most facilitators described a better cohesiveness and responsiveness among the group.

Childcare

It is essential that childcare be provided as part of the program and has been included in the program structure. It was recommended to facilitators that childcare be made available in all communities; some communities did not think this was necessary but discovered it helpful. When the children and parents were in the same building, this allowed for



"We can start now!"
- Inunnguiniq Parent

¹ a resource provided to facilitators with their program materials

parent-child interaction as needed/wanted. A few other community groups joined parents and children to enjoy their snack break together. One community decided to leave the parent and child rooms open to each other.

Childcare workers were often difficult to find and reliability was low. Best practice was to have a number of workers on call; this was helpful when a large number of children were present and two workers were needed. Facilitators who called to remind the childcare workers had best results. Childcare workers with child-related education/certification were ideal.

One community planned their session during the times that the Aboriginal Head Start program was in operation. This allowed their pre-school age children an opportunity to learn traditional teachings at the same time as the parents.

It was recommended by a facilitator that childcare workers submit a criminal record check before attending to children alone.

Land Component

Most facilitators were keen about this aspect of the program and many started planning and talking with their group about land excursions early on. Participants became engaged during planning; some offered to contribute personal belongings and equipment (sleds, snow machines, camping/fishing gear, etc), as is natural in most communities.

Child: "mom, how come you are so calm when you come home from parenting?"

Mother: "It must be working"

- Reported by Inunnguiniq Facilitator

One program saw a group of mothers attend with one man participating. It was observed that he especially enjoyed being able to contribute to the land component of the program. He volunteered to guide, made equipment and planned for additional equipment to be available from community members on the day of the excursion. This may be one approach to attract men into the program, and has proven successful with other parenting initiatives in Nunavut². It was noted in one of the NCCAH DVDs that the group was successful in involving fathers by saying they needed things done. When they identified a need for assistance it was easy to bring men into the program under the auspices of helping, but not participating. Once at the program the participants and facilitators would keep them working on projects while they inadvertently received the benefits of the program.

Due to the weather and time constraints only a few groups were successful in leaving their communities to enjoy the plans they made for the land. Many improvised and had a celebration including fun, food and games at their local community hall where all family members and friends were invited to join in.

² 'Fathers and Sons on the Land' program developed and run by the Clyde River Ilisaqsivik Centre

Elders

Sessions that involved an Elder in the planning of the session that they would later attend were most successful. Often when Elders were brought in without prior involvement in the planning for the session, there was a lack of understanding of roles and of their purpose in the program. This was especially so when communication barriers created additional challenges, for example if the Elder was unilingual or had limited abilities with English and the facilitators had limited Inuit language abilities.

"I'm noticing that young people are wise and want to hear from us. They are very welcoming of us and want to learn from us."
- Guest Elder at Inunnguiniq Parenting Pilot

Food

Planning for a snack break was done differently in each community. It was found that country foods were a favorite but difficult to find; facilitators often asked how they could get country food from coordinators or other communities.

Additional 'Checklist' Resource for Facilitators

It became evident in the first few weeks that facilitators were overwhelmed by the amount of material and were not sure how to get started. A trial one-pager summarizing the curriculum for the first session was created and sent out to the QHRC and Kitikmeot communities. This 'checklist' was reported to be useful for planning. Checklists were created for each of the 19 sessions. Each community was made aware of this resource and had access upon request. It is available in Appendix B.

Participation Levels

During the first sessions, facilitators reported that parents were hesitant to contribute. As familiarity grew among participants and with the program content, so did discussions and parent engagement. toward the end of the program pilot more parents provided support to one another; and facilitators used words such as 'teamwork' and 'eager to help' when describing interaction. This reinforces the considerable evidence for the strengths-based group setting for parenting support programs. With time and the establishment of a sense of belonging, facilitators reported that many of the parents in most communities became more open and shared '*what they really needed to talk about*'; they '*let go of some long held hurts*'.

"When the parents were quiet, body language spoke to us and told us that the parents were receptive"
- Inunnguiniq Facilitator

TABLE 1: FACTORS AFFECTING PARTICIPATION LEVELS

Factor	Comment
Self-esteem	Facilitators identified that some of the participants appeared to lack confidence or have low self-esteem. When these individuals did share their voices were so soft they were difficult to hear.
Quiet times/no response	Facilitators reported that they would often ask questions and receive no response or experience periods of quiet.
Elders	Most communities noted that parents were keen to listen to and ask questions of the Elders. Participants were very interested in hearing and learning about how life was lived in the old ways. Communities who involved Elders had greater success with parent participation.
Energizers	Many communities reported using games and other energizers. This had the effect of relaxing the group and in turn facilitated discussion.
Activity	There was a high level of participation reported from all programs during the cooking components. Participation increased with program delivery that included experiential active learning.

Facilitator Perspectives

Two facilitators from each of the ten identified pilot communities attended the Inunnguiniq Parenting Support Program Training in Iqaluit, November 2011. Thirteen were successful in completing the program. Despite challenges, most facilitators enjoyed delivering the Inunnguiniq Parenting Support Program and many expressed interest in providing this service again. The most common themes are reported below. Additional facilitator and parent requests and comments can be found in the appendices.

"We are learning a lot when we are teaching. We are both learning so much from participants. "
- Inunnguiniq Facilitator

Group Type & Number

Many facilitators wanted to market the program to a particular demographic (open, closed, couples only, single parents, etc.), which was not the intent. However, these facilitators also were uncertain about what kind of group they wanted. Discussions and time revealed that open groups were most effective, where participants came and left the group over time. Initially, facilitators were concerned that there may be too many participants but this was never an issue. It is worth noting that the most successful group had a very close core group of parents with high attendance, participant retention, and little turnover.

Elders

Sessions were more engaging when Elders participated and contributed. It was reported that their presence had a relaxing effect on parents and facilitators making classes more enjoyable. Parents were more engaged when Elders were teaching and sharing stories; they had many questions for the Elders and were keen to learn from them.

"When Elders speak, it makes everyone feel good."
- Inunnguiniq Facilitator

For some communities it was difficult to find and retain Elders. Reasons included:

- Elder was sick
- Weekends were not good for Elders
- Elder became tired – session was too long
- Elder did not want to read stories
- The Elder remembered the story differently and this caused concern for

facilitators³

- Elder was unsure of their role
- Language barriers
- Difficulty finding translators

Facilitators noted it helped when they contacted the Elders prior to class as a reminder and when the Elder knew they were not expected to stay for the whole class.

Arviat Meeting Elders

Elders involved with *Inunnguiniq* who were/are part of the Arviat Elders Advisory Group⁴ brought an incredible amount of significance to the program. Each time Moses Koihok, participant in Arviat Elders Advisory Group for many years, attended an *Inunnguiniq* session and shared stories, participants shed tears (this was interpreted by facilitators as tears of healing and a release of long held hurts). Moses said he was grateful to be asked to come and share his knowledge.

Healing

Many facilitators identified the need for healing (often both for themselves and for the parent participants) and wanted to offer a healing session but did not know how to approach this. It was recommended by The GN and QHRC program coordinators they bring in local professionals (mental health workers, counselors, wellness/addictions workers, social workers, etc.). Facilitators noted that Elders who come to the program may also need to heal⁵.

Food

The food components of the program were well received by facilitators and participants. Some facilitators reported it was the food component of the program that kept parents coming. Snacks, leftovers, and in some communities take home items in the form of a door prize, etc., provided additional food resources in the community that were evidently needed. Country food was sometimes difficult to obtain but always appreciated. Activity around food preparation was reported to provide respite for the more strenuous, internalized parts of the program. Participants

“Eating together with family and Elders helps with family communication.”
- Inunnguiniq Facilitator

³ Facilitators were reminded that the textual stories provided in the curriculum were only to be used as guides and that ideally the Elder would recall and tell their own stories; however, this message did not seem to alleviate this perceived challenge for some facilitators.

⁴ Group created by the GN Department of Education to gather information about traditional Inuit life. They have been convening since Nunavut became a Territory (1999). Many of the stories and teachings in the *Inunnguiniq* program were derived from recordings of the meetings of this group.

⁵ Given the opportunity, Elders who have not been through a healing period may wish to form an Elder support/healing circle.

talked more openly during periods where they were preparing food as a group.

Reading and Writing

Most facilitators reported difficulties regarding the amount of reading associated with the program material. Parents were observed to feel uncomfortable; facilitators provided the following reasons:

- They worry there is a right and wrong answer
- They are not confident in their writing skills
- They do not know how to write well in English or Inuktitut.

When they asked parents to write, facilitators were often unsuccessful in getting the responses they were aiming for.

Facilitation and Group Skills

A considerable amount of time was spent on facilitation and group skills during the Inunnguiniq Facilitator Training workshop. The group of facilitators implementing this series of pilots possessed a range of skills and abilities. Attributes of facilitators who felt successful and those who experienced greater challenges are identified below.

TABLE 1: ATTRIBUTES OF FACILITATORS WHO FELT SUCCESSFUL

Attribute	Comment
Age	Young Elders - people who have been through the parenting process and have adult children.
Elder(s)	It was requested by an Elder that a male and female Elder team is most effective; an Elder buddy approach is useful as it provides internal peer support to the Elders.
Men	To create balance it is best if there is at least one man on the facilitation team; when males were involved with the group they were always well received.
Group facilitation experience	Knowledge of group dynamics and the importance of observing and responding to group needs.
Counseling skills and/or experience:	Successful groups tended to disclose feelings around serious issues; facilitator teams need to be ready for this and able to offer individual follow up themselves or provide appropriate referrals to community professionals.
Self-confidence	Ability to handle a group on their own if other facilitators are unable to attend.
Teamwork	Prior experience working together is an asset; facilitators who know and are comfortable with each other produced the best results.
Translation	Facilitator teams that include one bilingual person who is comfortable translating as needed.
Cooking experience	Confidence in reading and following recipes and leading a group in healthy cooking and nutrition related content.

TABLE 2: ATTRIBUTES OF FACILITATORS WHO EXPERIENCED CHALLENGES

Attribute	Comment
Appointed to act as facilitator	Facilitators who were ‘appointed’ to the program (i.e. those who did not volunteer or self-nominate) proved ineffective.
Planning	Facilitators who did not spend time planning their program sessions in advance, with each other and/or with guest speakers (elders), experienced more challenges.

Challenges

Low Literacy: Too Much Writing/Reading/Text-based Resources

Low literacy levels among facilitators and participants was the most frequently reported challenge for facilitators. Almost every facilitator commented on the amount of reading required to prepare for each sessions; most, at some point, felt overwhelmed.

“Many of our parents are drop-outs and have difficulty reading and writing; some can’t read or write [in any language]”
- Inunnguiniq Facilitator

Facilitators reported that parents were reluctant to read and write and that this took them out of their comfort zone and created a barrier to communication and progress through the program. Many facilitators became creative with the delivery of their program to move away from the reading/writing components (such as self-reflection, journaling, etc.) and felt they successfully adapted program content. This, however, created more work for those facilitators and they reported a sense of overload and burnout. Some facilitators did not have sufficient facilitation skills to modify the curriculum; this resulted in a lot of reading from the book which proved ineffective (poor retention and attention among participants). Many participants and some facilitators reported not understanding the material because the language level of the curriculum was higher than their literacy level.

Information gathering tools that were placed throughout the curriculum, such as the ‘Observation Challenge’ and ‘Ticket out the Door’, were often misunderstood.

The need for healing

Universally the need for healing was highlighted among facilitators and participants. Wanting to be responsive to parents, but not having the resources available (i.e. counselors or trusted professionals) to refer participants to, contributed to challenges for facilitators. One facilitator recalled a session that naturally turned into a healing session where everyone was touched, including the facilitator (see text box next page), but also

noted that this was not the intent of the program and no one in the room was equipped with the skills to support a seriously distraught person in the event that this was needed (it wasn't).

Communication or Language Barriers

Some facilitators reported that they experienced difficulties with resources that were not available in Inuktitut or in their specific regional dialect. These are common reports among all programs offered in Nunavut, and regional dialect differences are a common discussion point both within our organizations and in Nunavut as a whole.

On occasion GN and QHRC program support coordinators experienced challenges with communicating with Inuktitut-speaking facilitators. In these cases program leads were contacted, though their level of involvement was minimal.

Some facilitators were difficult to contact and slow to respond to messages for follow-up and teleconference calls.

Cancelled Classes

Most programs experienced a high number of missed classes due to the following reasons:

- Illness
 - Facilitator/medical travel/family illness
 - Parents with sick children
 - Community illness (ex. Flu going around and everyone staying in)
- Weather
 - Storm days (at least two in each community)
 - Weather too cold (no taxi in community)
- Death(s) in community
- School closed (in-service)
- Community events (winter games, trade shows, etc)
- No one, or only one person came so they decided not to have class
- Facilitator away
 - Travel commitments (i.e. work or medical)
 - Having to attend to family concerns (some felt it took too much time away from their family)
 - Some facilitators were not comfortable managing a session alone so if the other could not make it the session was cancelled
 - Two facilitators left the position to take on other full time jobs (both reported to enjoy this job but needed the extra income and could not commit to both)

Timeline

Facilitators reported that the amount of material in the program was too large for the time

period provided. Some sessions ran longer than the planned two hours and a few facilitators were unhappy with extra time commitment.

Resource Bins

Due to a number of factors: lack of organization within the bins; short time frame of program; and facilitators with other full-time jobs; the resource bins were reported to be as much of a hinder as a help. Many facilitators did not know where to start, were confused by the many papers, and had difficulty finding the right books. Some reported that resources mentioned in the curriculum were not included in their bin.

Technical Difficulties

Some pilot programs experienced unavoidable infrastructure or technical difficulties while implementing the pilots.

- Internet down
- No email address
- Low computer literacy for email communication (power point presentations)
- Fax machine in another office
- DVD & TV unavailable or difficult to access

Successful Approaches

The implementation of each specific pilot became unique to each community as the facilitators were responsive to the needs and resources available to them. Successful delivery was dependent on facilitator literacy level and teaching style, comfort level in leading groups, community resources, and parent needs. There was a wide spectrum of delivery methods: one community read the curriculum directly from the book and, on the other side of the spectrum, one community chose a module topic such as “Living the Good Life” and then asked an Elder to come and share on this topic. GN and QHRC support coordinators continued to recommend that facilitators follow the curriculum as much as possible while remaining sensitive to parent needs.

Soft starts

Some groups opened with prayer and took time to do a ‘round table’ check-in about how each was feeling and if anything was bothering them or their children. It was reported that this allowed participants to ‘get things off their chest’ after which they were more clear-minded, not as pre-occupied, and ready for new learning. One group started each session with food and slowly eased into the discussion of program content.

Group work - Circle discussions

Facilitators noted that participants were more comfortable staying together in a large group. Many chose not to break into smaller groups and discussed things as a whole. This was reported to benefit group unity.

“Go out, eat outside, walk and talk, berry picking and chatting...let the kids play while parents talk in a natural relaxed setting”

- Inunnguiniq Facilitator recommendation

Working while talking – Active hands

It was noted in almost every group that activities naturally fostered communication and group dialogue. Participants felt more at ease while cooking, interacting with their children, or doing other kinds of activities. This mirrors ‘traditional’ or familiar modes of learning in Inuit communities, where a knowledgeable individual would share knowledge, such as the role one plays in a family, to younger members of the community while simultaneously teaching an activity, such as sewing clothing.

“When they were busy working, they were also busy talking”

- Inunnguiniq Facilitator

Recognizing and acting on opportunity

When wellness professionals arrived from out of town, some facilitators invited them in as guest speakers. In all instances, guests were well received by participants.

Partnering with professionals

Participants enjoyed visits and information provided by local professionals: CHRs, Social workers, Mental Health and Wellness workers, CPNP workers, Addictions specialists and Counselors, Nutritionists, etc..

The importance of a safe and comfortable space

One community group felt awkward in the meeting space they were allotted, so they partnered with the CPNP Program, which facilitators and participants were familiar with. This also helped with attendance. Another community responded to low attendance by partnering with another successful program. The benefits of collaborating with other community programs was noted as helpful not only to provide a safe a comfortable space for participants, but also increased comfort level and made participants feel at ease in a familiar space.

Elders

Elders who understood the purpose of the program and who were comfortable sharing traditional stories were essential to the program. Parents were significantly more engaged during these sessions and valued the links to traditional practices and ways of knowing.

Food

The inclusion of food was a critical component for success for a number of reasons including: participants needed the food or the meal (possibly because they had not eaten

in some time); when the opportunity arose, they took food home to their families; sharing food is a traditional Inuit custom that is about harvesting, accomplishment, and celebration - sharing food at sessions made participants comfortable and contributed to increased participant retention.

Responsive to needs of the parents

Facilitators reported that when they were responsive to parent needs and flexible with the program material, the order of the sessions and the mood of the group on any given day, the group was more unified which resulted in a greater sense of belonging and increased participation.

Facilitator sharing & honesty

A facilitator for the most successful pilot, while leading a group on her own, shared her own feelings about her difficult week telling participants that '*[she] almost did not come, but did so because of the people in the class and that [she] knew [she] would feel better after the group*'. Parents were very responsive to her honesty and the facilitator reported that they "felt like a little family" as a result.

Door Prize / Incentive

Many communities provided a door prize or other incentive to recruit and retain participants. Most often this prize was healthy foods/groceries which parents were always grateful for. One community chose to always have a fruit basket door prize; this was very well received and had the added benefit of introducing new fruits to the homes.

Recognizing accomplishments of participants

"One instance where a woman was experiencing a particularly difficult time in her life, the group asked to just have a sharing session to support this one person (this was a close-knit group). The facilitator (who was on her own that week) knew of a visiting counsellor who was well-known and received by the community. She called to see if he was available to come and help. He was not available at that time but asked if he could see the woman in need later in the day.

*When the facilitator offered a gentle reminder to return to the planned program, one participant said, "We **are** talking about parenting: healing, residential school...it's all parenting." The parents were clear that they felt that this discussion was what parenting was all about, "living life and getting through hard times". They continued to share and support the woman and finally all hugged her. It was reported that the discussion involved overcoming grief associated with suicide, residential school abuse, sexual abuse, arranged marriage, and children born to women who experienced sexual assault. The parents left the session reporting feeling much 'better and lighter' than when they arrived. By creating a safe and supportive space and being responsive to group needs, parents were able to begin a healing process within themselves that they associated with being a better mother/father.*

- reported from most successful group

The most successful group finished the program with a formal sit down dinner open to all family members. Their Elder said a prayer and read out a thank you note in their language. This note was laminated and presented to each participant as a keepsake. Parents were also presented with certificates of appreciation. Some gave a little speech and spoke from the heart. Each participant received a bag with health promotion items to take home with their thank you notes and certificates.

"I'm telling him after the classes and he's doing better now as a father, spouse."

- Inunnguiniq Parent

Curriculum Specific Feedback

General Comments

The depth of the material as presented in this curriculum was noted to be somewhat difficult for parents. One reason that was identified was that many parents had not been exposed to this kind of traditional learning before and they were not sure how to digest and react to it.

The parent exit questionnaire responses showed that each module was liked either "quite a bit" or "a lot".

Facilitators who did the parent evaluation as a group exercise also noted the following comments: "really liked the modules, good advice, helps a lot, more interested in Elders, healthy food, and kept me sober".

A number of facilitators used the sessions in the modules loosely and wove their way through the material as they felt best-addressed parent needs.

Below are the highlights reported from facilitators for each of the curriculum modules.

Module 1: Living a Good Life

It was reported that module one would be better placed later in the program after the parents had established a sense of connection with the group as well as an understanding of traditional ways of learning through story. Module two was recommended to be a good starting point and Rhoda Karetak's egg/rock/Inuk parenting analysis was recommended as a good introduction to help bridge into traditional teachings.

Favourite Activities

- Creating family agreements in the home
- Inunnguiniq child development pamphlets
- Stories

- Inuit Values
- Inuit Maligait

Koihok Story

This story was received with mixed feelings among different groups. Some found it too emotionally difficult. Facilitators who were uncomfortable delivering the story were facilitating without Elders. Some participants also noted it made them feel uncomfortable (it was recommended they bring in an Elder to explain). Other groups were moved by the story. In one group it was reported to be emotionally touching; this worked to bring a sense of cohesion to the group.

PATH Activity

Many groups were not receptive to this tool. Some reported liking the idea of creating a path and goals, but there were difficulties around the PATH format. Some groups committed to continue working on it throughout the modules despite the confusion.

Inuit Qaujimajatuqangit (IQ) Principles

The Inuit Qaujimajatuqangit Principles as outlined by the Government of Nunavut were part of the curriculum. Some parents had not heard of the IQ principles before and participants were interested.

Inuit Values cards

One group, who were slow to engage with other content, responded very well to the Inuit Values. They began speaking to each other in their language and expressed interest in learning how the values related to the pictures. In this group when parents were asked “What does it mean to have a good life?” facilitators noted responses were mostly material; however after the values cards were introduced, the direction of the discussion changed and the parents were able to look deeper.

Module 2: Relationship Building

Session two was reported to be well-liked by parents as they became more engaged. Discussion highlights included: memories from childhood, what they want to pass on about their culture, discipline – how they were and how they want to be, and teaching respect in the home.

Rhoda Karetak’s Fragile egg and hard rock:

This was a favorite all around and generated good discussions; parents could relate. Many enjoyed the drawing activity and showing where each family was in this continuum.

Naming

This session was well liked by most participants and often initiated in-depth discussions.

Many expressed how they had never been taught the naming tradition, and now that they understood it, felt its' significance and wanted to make it a part of their lives. One community felt that it may be too early in the program and that it may be better after the group is more comfortable with each other (this community did not have an Elder). When an Elder shared personal stories about naming, participants were engaged and moved, Elders speaking to this greatly deepened understanding.

Ages and Stages Questionnaire

This tool was reported useful in communities who tried it, though time did not allow for most communities to do so. One community brought in the children and facilitated parents while they worked through the questionnaires with their child(ren). This was fun and reported a great success.⁶

Inunnguiniq child development pamphlets

These were well received in all communities. Parents were engaged and conversing over the text. Parents commented that the pamphlets would be useful as their children grow and develop.

Rhoda's Dream – Story of Burying the Baby

Participants related well to this theme. Some communities had deep discussions about their culture dying; parents opened up to share personal difficulties with this. An Inuinnaqtun community noted the DVD was in Inuktitut and found it inaccessible.

Parenting Styles

This tool was useful for promoting discussion. Parents liked to talk about where they were, and where they wanted to be in this continuum.

Eating Together as a Family

This poster was used in some communities and generated discussion around eating practices. It proved very useful in one community where it sparked a positive conversation about how this is still a common practice and healthy way for families to spend time together. Discussion followed regarding using mealtimes as opportunities for family communication.

Elder Stories

One community, who was struggling and did not have Elder support, noted that the stories in the curriculum are now much better received as they are further into the program and have a context through which to make sense of things. They gave the example that Rhoda's dream was heavy but that the parents understood now and could appreciate and

⁶ Parent-child interaction during or after parenting sessions was noted as a valuable practice in parenting program research. Qaujigiartiit Health Research Centre (2010). *Parenting Support Programs in Nunavut: A Review*. Iqaluit, NU: Qaujigiartiit Health Research Centre p. 24.

relate to the deeper meanings. They noted that this was the first session they had parents laughing, talking and telling stories.

Module 3: Teaching to the Heart

Child's 'puuq/sack'

Participants found this interesting; they could understand and relate well to this idea. Good discussions ensued.

Favorite Child

This concept was most often misunderstood.

Inutsiapagutit

These were well received, especially when shared by an Elder. Some parents remarked how well they remembered these from their childhood and commented that they are not using them with their children and how they would like to do so. One community linked this into to the CBC Legend radio show recording of “The Two Sisters and the Orphan Shaman”; this was very successful in generating in depth discussion about the importance of teaching children.

“When we teach our children something, like correcting them when they are bad, this melts their heart because we show them we care.”

- Inunnguiniq Parent

Module 4: Pilimmaksarniq

Kiviuq Story

Some of the younger parents had not heard of this story before and enjoyed it. In one community a facilitator re-wrote it in their own dialect and participants recognized and enjoyed hearing the story again. Another community read out the story; parents were interested and a good discussion followed. In a community without Elder support, this story was not well received.

Maslow's Hierarchy of Needs

Many had no previous exposure to this idea and were interested.

Household Responsibilities:

This section was welcomed and enjoyed in all communities who presented it. It was evident that most homes do not share responsibilities equally and that most of the work is put onto the mother. Parents began to think about how they could include others in their family.

Budget Planning

This was appreciated and found useful. One group noted liking the part about identifying wants versus needs; they had not thought of this before.

Other

One community created a little book for each participant that the participants chose to call a “Plan of Care Agreement”. In this book were the Inunnguiniq principles, the household responsibilities worksheet, and the budgeting worksheet. This group understood the concept of sharing responsibilities, and liked the idea, but was uncertain of how to go about making this happen. The facilitator and guest instructor jumped into a role-play: One said, “I’m the mom and I’m good at cooking and cleaning so these will be my jobs”. The guest said “I’m the dad and I’m good at hunting and fishing so I will supply our meat” (this started the group laughing). The ‘parents’ labeled the participants as their ‘children’ and modeled by going around the circle asking each ‘child’ what they were good at (strengths), or what they liked doing. Each participant ‘child’ replied “I’m good at...” and then the mock parents replied, “then your job will be to ...”. The participants thoroughly enjoyed this activity. It brought them understanding of how they could do this in a fun way with their family, how it would identify and bring out individual strengths, and how it would help in the home by sharing responsibilities. The role-play made it fun and easy to understand. The parents were pleased with this and looked forward to working with their families on their ‘Plan of Care Agreements’ standing by the Inunnguiniq principles.⁷

Module 5: Communication

Storyboard / Book-making

At this point in the program, facilitators were aware of literacy levels; many who reached this part of the curriculum incorporated creative methods included acting stories without words (mime), modeling how to tell stories without books, and telling stories from books using only the pictures.

One community had well-known story-teller Donald Uluadluaq come in and talk about his storytelling experiences. He talked of his ability coming from hours of lying in the iglu at night listening to his parents tell stories. Participants were mesmerized. Donald’s storytelling creativity came from the oral tradition; he spoke about strengthening language and how sharing personal stories builds relationships and connections with children and improves family communication. This motivated parents to share their own stories and life experience. This energy was transformed into storybooks that were shared with the group and brought home for families. The typical ‘story builders’ that looked for the elements of plot, setting, character, etc. were not used; instead, Donald and the oral tradition inspired participants.

Focused Discussion: Four Scenarios

The scenarios were well-liked and created discussion; suggested delivery format was adapted.

⁷ Role-plays have been identified as a successful tool in parenting programs. Qaujigiartiit Health Research Centre (2010). *Parenting Support Programs in Nunavut: A Review*. Iqaluit, NU: Qaujigiartiit Health Research Centre p. 25,28.

Connector - How Does Language Develop

In a small group who had challenges getting discussions going, the facilitators role-played the different ways communication can be received and expressed. It was reported the group ‘had a lot of fun’ with this.

Observation Challenge:

Little feedback was provided about these in the community circles. One community reported that when they tried to explain these ‘it went over their heads’; in this group language was often a barrier.

Other

A woman was invited to come to this session with her two year old and five month old. Her two year old was reported to ‘speak like an old man’ and was very strong linguistically. Participants were amazed by this child’s ability to communicate. The mother then used her five month old to demonstrate how she speaks to her children in the early months to foster language development. This was an excellent conversation starter. The demonstration proved very effective.⁸

Module 6: Healthy Family Nutrition

General Comments

In general, the Nutrition sessions were very well received by both parents and facilitators. A number of facilitators noted that parents loved to cook together; it was as a convenient break from the content that some participants felt was more emotionally taxing; and that it was relaxing. Parents were talkative and shared stories more easily when their hands were busy with food preparation.

- One pilot decided to group their regular parenting class with their regular weekly community cooking class (participants were identical for both groups except that the parenting group was beginning to decline in numbers). The result was that parents became more comfortable talking about the material.
- A nutritionist from the Government of Nunavut visited one community and helped out with a Nutrition session. It was reported that the nutritionist left suggestions for improvements in the nutrition lesson plan book. Suggestions included ideas on formatting, clarity, and a few best-practice nutrition-related concerns. At the time of this report, we have not received this data.

Timing and length of sessions

In a community where parenting sessions were held only once a week, the Nutrition sessions were held on weekends in order to offer the complete program in the time frame

⁸ Throughout the program, instances where demonstrations or role-plays were incorporated proved significantly more effective than talking about a subject.

allotted. Other communities made up lost sessions by arranging for cooking sessions on weekends; this practice was well received. Some facilitators found it useful to incorporate one of the Nutrition sessions in between each of the regular modules, instead of offering it as one separate module.

Cooking classes often went over the two-hour time period. Most communities did not have time to do the learning activities and only completed the cooking part.

Most communities had enough food for participants to cook and eat on-site as well as bring home leftovers to share with their families. Participants reported back that their families enjoyed and valued the home cooked meals. This process provided a group-family link. Some participants used it as a conversation starter with their families about the parenting class.

One community, whose participants were regulars of the wellness weekly cooking class, were 'a bit bored' by the stir fry and pizza recipes and noted that they knew how to make a better pizza dough than the 'no-yeast' recipe provided. An idea came forth to build in multiple levels to the recipes so that more advanced cooks can be challenged. Another community used flour instead of cornstarch as they believed cornstarch would give them heartburn.

Nunavut Food Guide

Most communities shared this and participants were reported to be interested in learning about what was offered in the guide. The portion sizes were found interesting and helpful.

Nutrition Budgeting

This section was an 'eye opener'; many parents believed that healthy food was more expensive than fast food. One noted this was the most helpful of the Nutrition modules.

What I ate yesterday

This was a fun activity enjoyed by participants who tried it.

Hygiene

One community, experienced at running cooking classes, added in an additional hygiene component that included hand, and fruit and vegetable washing.

Char

One group started with a fresh/frozen char and demonstrated how to prepare/butcher it for cooking. Many in the group had not seen this done before.

Pizza

For many participants this was the first time making pizza from scratch. Others with more experience did not follow the lesson plan but enjoyed making and eating the pizza. Some participants were happy to learn about whole-wheat flour and that this could be

mixed with white flour to make a more nutritious meal.

Other

One group, who generally struggled, used their own ideas and were successful in joining learning with fun while teaching about healthy foods and budgeting. They asked parents to do a meal plan and budget for 7 days. The parents enjoyed this challenge and it proved a good learning experience. The group was also challenged to create a list of what they would buy with \$100, then given the actual prices. They brainstormed how to cook different meals with the grocery list provided in the curriculum. When they made a game of learning, parents enjoyed it and appreciated the healthy food prizes⁹.

Inunnguiniq Recipe Component

A few communities reported trying these recipes though little feedback was presented.

One community doing the “Nutrition Sessions” from the recipes at the back of the Inunnguiniq Parenting Curriculum and not from the Healthy Family Nutrition Module.

During a guest presentation it was noted there was a section about leftovers and not wasting food so *‘they decided to look through the fridge and cupboards and make something with what they found’*. The group was very happy and excited to be doing something different ‘not following a book’. They took out all the leftovers and had a good conversation about them. Cooking without a recipe was a ‘big hit’ for this group.

Resources

Time constraints significantly limited the use of the provided supplementary resources.

NCCAHD DVDs: The DVDs provided by the National Collaborating Centre for Aboriginal Health were well received when time and resources permitted viewing. It was noted that participants talked more after the viewings. Parents asked questions and were enthusiastic to see young children learn about their culture.

⁹ For Nutrition Evaluation results see Appendices.

Recommendations for next phase of pilots

Based on the data collected during this evaluation, the following recommendations are put forward for the next phase of pilots:

- 1) Divide the curriculum into 2 streams:
 - a course to be developed for the Nunavut Arctic College and
 - a stream-lined version that will be used for community parenting program facilitators
- 2) Revise the reading level of the materials for the parenting program
- 3) Remove some of the more complex curriculum structure, such as ‘observation challenges’ and ‘tickets out the door’
- 4) Add-in more activity-based discussion. Add an additional activity resource to the Handbook
- 5) Develop a parent take-home booklet complete with checklists, IQ principles, Inuit Maligait, recipes, and budgeting tools.
- 6) Re-visit the healing component with Parenting Working Group to develop a plan for addressing this need.

Conclusion

The first pilot of the Inunnguiniq Parenting Support Program in Nunavut provided a welcomed need in the communities it served. Parents and Elders involved with Inunnguiniq noted its’ value and wanted to continue. Facilitators had some difficulties with program delivery due to literacy levels and program format. Food, and teachings delivered by Elders were the most frequently reported highlights.

Appendix A - Parent Evaluation Questionnaire Results

Three things I liked most about the program are:

1. Being around groups (people helping each other, sharing) 17
2. Elders & stories of times past 14
3. Learning / Parenting 11
4. Food related – cooking, learning healthy snacks, country food 11
5. Activities 4
6. Bringing children was allowed 2

The things I disliked are:

1. Very cold to come to program at night
2. Too much writing or reading / Too much forms to fill
3. Short time / Hours were too short

You could improve the program by:

1. Recording the Elder stories/voices
2. More teaching by Elders
3. Teaching traditional activities like animal skinning and sewing
4. Playing more games
5. Having more healing
6. Adding more time to the schedule
7. Open to anyone in the community
8. Giving gifts to people who attend the program
9. Doing it in the warmer time of the year, during the day, during the evening, everyday, during the day in the summer

Some tools that helped me were:

<i>Tool</i>	<i>Not at all</i>	<i>Somewhat</i>	<i>Quite a bit</i>	<i>A lot</i>
Inunnguiniq pamphlets		1	8	13
ASQ assessment		5	4	8
The PATH	1	1	8	7
Budget Planning		4	10	9
Responsibility Sharing		3	6	15
Good Habit Building		2	7	16
Recipe ideas		1	8	15
Storytelling ideas		1	6	17
Storybook/Writing ideas	1	4	6	10
Group discussions		5	5	14

IQ Handbook	2	2	5	11
Self-assessments	1	1	5	8

If this program offered a second phase I would attend: Yes No

Each person who answered this question circled Yes.

I would recommend this program to others: Yes No

Each person who answered this question circled Yes.

If a friend asked what this program was about I would tell them:

In order of response frequency:

1. Learning from Elders / Learning traditional parenting
2. Getting together with other people
3. Eating and cooking healthy
4. Building self-esteem and encouragement

After taking this program my children are:

1. Spending time listening to the stories I tell them from Elders
2. Really believing their namesakes and knowing that they have to help Elders when they need help
3. My number one priority
4. Touched, I don't call him by his name as much as I used to, he noticed that and he likes it. Thank you very much;
5. Closer and loving, caring, changing, behaving better, helping me, understanding about parenting
6. Healthier, happier, listening more, still teaching them
7. Eating healthy food I cook for them and healthy snacks
8. I started teaching my child to sew, make bannock, cut fish

Appendix B - Nutrition Evaluation Results

Few of the pre- and post- nutrition module evaluations were returned; the ones received revealed that some of the questions were not understood.

Pre Nutrition Module Questionnaire

1. Most parents reported that they knew what foods were healthy.
2. Barriers to obtaining healthy food included:
 1. no means of transportation for harvesting country foods
 2. single mothers had more difficulties in obtaining country foods
 3. lack of money
3. Most participants reported 'yes' that children had skipped meals due to lack of money.

Post Nutrition Module Questionnaire

1. Healthy foods recorded included:
 1. Fruit & Vegetables
 2. yogurt (tubes), milk, cheese
 3. granola bars, crackers, bannock, cereal
 4. ham
 5. macaroni salad
 6. country food
2. Ways to help children make healthy choices included:
 1. child size plate
 2. hand sizes
 3. frozen fruit slushies
 4. putting out healthy snacks
 5. buying healthy foods
 6. eating country foods
 7. cooking healthy foods for young children
3. Regarding the ability to afford healthy foods for the family, there were close to the same 'yes' and 'no' responses.
4. Changes to help the family eat more nutritiously included:
 1. make a list
 2. cook from scratch/make own meals and snacks
 3. stop eating at the Quickstop
 4. eat more country foods.

Appendix C - Requests & Comments from Facilitators & Parents

Facilitator & Parent Requests

Most communities requested:

1. More DVDs/audios of Elders - parents thoroughly enjoyed seeing and hearing Elders in video. The Elder present could listen to the story and then comment and/or share a similar story. The CBC legends CD was recommended
2. More games, fun, and hands on activities, sewing while at class
3. A way to acknowledge dedicated parents, the ones who came regularly and showed noticeable efforts in implementing program material; ideas for this were certificates and food baskets
4. More hands-on activities, sew while at class
5. Help/ideas about recruitment and retention
6. Make curriculum only one book and more in point form
7. Change the program name¹⁰

Some communities requested:

1. Do not ask parents to read or write
2. To connect with other program facilitators to learn from each other
3. Prizes for games

Responses from parents: “What more do you want to learn”:

1. How to manage children
2. How to discipline
3. How to teach our children as both parents
4. What is right/healthy for my children
5. Communicating
6. Relationship building
7. How to stop spoiling kids
8. Single parenting
9. How to deal with stress
10. First aid and CPR training

¹⁰ This was brought up by one facilitator and echoed by all during the tele-conference. There was talk of stigma around the idea that if you go to a parenting program then you must be a bad parent. There were comments that this program is for everyone and that it is a program to help learn about culture.

Facilitator Comments

1. When the Elders speak it makes everyone feel good – many comments like this
2. I learned a lot about Inuit culture. It is a very Inuit program – lots of comments like this
3. ‘They can find what they are looking for in a story’
4. One community reported that they were thinking about using social media (facebook) to remind people about the program. Parents on facebook are mentioning they miss parenting class (3 cancellations) We feel like a little family ... With this group there’s a lot of healing and it would be good to see other parents out there go through what this group is going through
5. It’s not always easy for them to connect the material to their lives, responses are sometimes superficial
6. One day a group experienced participants who were not happy with each other. A facilitator shared a personal experience and then the ladies cried and apologized to each other. After they laughed visualizing the ladies chasing each other down the street with their walkers if they were still fighting many years from now.

Parent Comments

1. I’m really learning about me right now
2. It’s important to talk with someone I trust
3. Parents were saying their children were learning from them
4. Parents reported that after a session they would go home and their kids would praise them
5. One parent who was going through a particularly difficult time said she almost didn’t come but said ‘I know I’ll feel better if I come’.
6. They love the program and say they would come every day... ‘Too bad it’s going to end, we go away from here feeling so good’.
7. ‘She is really standing up for herself now and her culture’. - Facilitator
8. ‘Participants were saying that it was difficult at first to make clothing – you always learned how to make beautiful things if you keep on trying ... They started remembering what their Elders told them, they started to remember things about parenting that they were told when young.’
9. I’ve learned that alcohol isn’t healthy and creates more anger.
10. Never give up on your kids.
11. It’s good to teach children to do things for themselves
12. When we forgive others we heal ourselves
13. Tell the truth.
14. Tell them not to do bad things
15. My parenting style is better now as I am attending this class
16. Many comments about how they want to learn how to be good parents

17. If we keep doing our traditional activities and talking in our dialect then we wont forget our traditional ways, so our children will know who we are. Out on the tundra long ago they survived, it was great out there, they learned a lot from their parents