Our work takes place on the traditional, ancestral, unceded territory of the x̱w̱məθkw̱̓ay̓əm (Musqueam) people.
Welcome and Land Acknowledgement
Mariana Brussoni, HELP

Introductions
Focus of this meeting: policy implications
Sarah Gosman & Cynthia Lee, MCFD

EDI Provincial Synthesis of Wave 8 is ready!
Trends over time
Barry Forer, HELP

Using EDI to shed light on policy
- Using the EDI to understand the impact of policies that influence population health
- Using the EDI to explore the impact of the social determinants of health on child development
Magdalena Janus, HELP

Discussion: How does data inform the strategies your ministries are currently using?

Brainstorming: If there were no barriers or constraints at all, what is the suite of interventions -- within your ministry, across ministries-- that together could make an impact in reducing vulnerability?

All, break-out rooms if large group

Questions

Next meeting Feb 7, 2023
Brief Feedback Survey
MCFD
Using **EDI** to shed light on policy

Magdalena Janus

22 November 2022
Data are gold

EDI data over time allow:
  - seeing trends over time and for different groups
  - relate child development to geographical and social contexts
EDI in linkages with other datasets

- Add the “early childhood” point to the educational and health trajectory
- BC and Manitoba at the forefront in enabling use of administrative health and education data for meaningful research
- Room for improvement?...
- Big picture can be enhanced with program, implementation, evaluation data
- Expansion of education ID (PEN) to child care entry
What makes a difference?

Policy evaluation:
- Outcome may be dependent on immediate family and environment context
- Policies take a while to show measurable effect

By comparison:
- Same measure before and after ...
- Same measure with and without ...
- Same measure in two places with different degrees of ....
What makes the biggest difference?

- Child development and learning outcomes measured all over the world demonstrate the “social gradient”.
- That means that children from less advantaged families/neighbourhoods have poorer outcomes than those who are more advantaged and that relationship forms a continuous line.
Social gradient is tied to measures of poverty (that need to be nuanced)

But examining the impact of poverty over time can tell us a lot about what matters, and when
In and out of early poverty: Manitoba, children 0-5 years

Roos et al. 2019
https://doi.org/10.1542/peds.2018-3426

Moving into poverty before age five
Impact of early poverty: Manitoba, children 0-5 years

Moving out of poverty before age five
Manitoba Healthy Baby (HB) Prenatal Benefit
For low-income pregnant women
With “no strings attached”

Benefits start in 2nd trimester of pregnancy;
monthly cheque for $81.41

Brownell et al. 2016
Brownell et al. 2018
Improving family socioeconomic circumstances

• Changes in household and neighbourhood poverty matter (Manitoba)

• Financial support for pregnant women with very low income brought health & development benefits for their babies (Manitoba)

• Early targeted home visiting improves babies’ health (e.g., immunizations), but not child development (Manitoba and Australia)
Preschool and full time kindergarten

A universal panacea or a bit of a smokescreen?
Preschool and full time kindergarten

• Most existing evidence indicates that preschool attendance is associated with better developmental outcomes at school entry and in elementary school.

• Full-time kindergarten (BC and Ontario) are universal interventions.

• They deliver the same support for all children without considering the proportional universality dilemma.
No way to get there

 Doesn’t feel welcome

 Doesn’t speak the language
Universal approach
Universal access – does not address barriers
Universal approach

Worst case scenario

High vulnerability

EDI

Gradient gets steeper

Low vulnerability

Disadvantaged

SES

Advantaged
Proportionate Universality
Universal access at a **scale** and **intensity** that addresses barriers at every level

**EDI**

Barriers to access

Gradient flattened at both ends of the SES spectrum, but proportionate to level of risk

**SES**

Disadvantaged

Low vulnerability

High vulnerability

Advantaged
Universal approaches benefits (and risks)

- At best, the universal approaches diminish the level of vulnerability with the same intensity for all.
- Need to focus on barriers in addition to outcomes.
- BUT universal approaches provide a platform from which it may be easier to launch equity-based approaches guided by inclusivity.
Surprising benefits for special groups of children

• After the implementation of full-time kindergarten, the percentages of children deemed as having special needs rose.

• In Ontario, we also saw an increase in vulnerabilities on the Emotional domain (from about 10.1% to 12.3%).

<table>
<thead>
<tr>
<th>Cycle</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cycle 1</td>
<td>4,140</td>
<td>3.3%</td>
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<tr>
<td>Cycle 2</td>
<td>4,195</td>
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<tr>
<td>Cycle 3</td>
<td>4,821</td>
<td>3.7%</td>
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<tr>
<td>Cycle 4</td>
<td>5,449</td>
<td>4.0%</td>
</tr>
<tr>
<td>Cycle 5</td>
<td>6,811</td>
<td>5.0%</td>
</tr>
</tbody>
</table>
Surprising benefits for special groups of children

Identifying problems early is a good thing

- we have supports for these children and hopefully early amelioration/accommodation that could bring lifelong advantage

- It is not just about the *measurable outcome*, but about *what led to them* and *what to do with it*/*action plan*
Lesser known small groups – equity and inclusion

Advantages of the population level coverage:

• Inclusivity of small or underrepresented populations
• For example: Children with special educational needs, or children with specific conditions or health disorders
This table shows that the neighbourhood disadvantage acts on children with and without disabilities in a similar way and yet how often *where a child lives* is considered when planning treatment or services for children with disabilities?

<table>
<thead>
<tr>
<th></th>
<th>Typically developing CanNECD study</th>
<th>Children with special needs CCHICS study</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Physical Health &amp; Well-Being</strong></td>
<td>23%</td>
<td>17%</td>
</tr>
<tr>
<td><strong>Social Competence</strong></td>
<td>18%</td>
<td>17%</td>
</tr>
<tr>
<td><strong>Emotional Maturity</strong></td>
<td>14%</td>
<td>12%</td>
</tr>
<tr>
<td><strong>Language &amp; Cognitive Development</strong></td>
<td>28%</td>
<td>29%</td>
</tr>
<tr>
<td><strong>Communication Skills &amp; General Knowledge</strong></td>
<td>29%</td>
<td>19%</td>
</tr>
</tbody>
</table>

Forer et al., 2019; Zeraatkar et al., 2020
In the Section D of the EDI, educators are asked whether a child has some additional difficulty that impacts their classroom learning. One of these are “unaddressed dental needs”. It turns out that while it doesn’t happen often, these children predominantly live in poorer neighbourhoods and are more likely to be vulnerable on the EDI.

Respect for diversity

- Availability, access and accessibility for all
- Cultural sensitivity and implicit bias
- Thus far, most long term data on race-based outcomes come from TDSB in Ontario
- Attention to: implicit bias, cultural responsiveness, or both
- New mandates to collect race-based data

Teacher rating of students’ learning skills in Grade 6 (averaged 0-3.4)

Parekh et al. 2018
doi/10.1177/0895904818813303
Respect for diversity of gifts and needs

• Availability, access and accessibility – qualitative, ethnographic studies show that there are some systemic issues that cannot be fully addressed by broad level policies

• ”Standard” (colonial?...) approaches may not work for everyone

• The outcome measures also need to be interrogated for their ability to reflect a “successful” intervention – optimal well-being rather than academic success
In conclusion...

• Not one single thing but if you asked me... **complex poverty** (and the disadvantage that it includes) is the reason for vulnerabilities to occur and persist

• **Ability to work intersectorally** to communicate and support that complexity

• **Ability to address barriers**
Thank you for listening!

Questions?