


## Aboriginal Children's Health and Well-being Measure (ACHWM)



*Niigaan Gdizhaami – We are Moving Forward Together Forum*  
February 27, 2018



Wiikwemkoong  
UNCEDED TERRITORY

Laurentian University  
Université Laurentienne

I wish to begin in a good way, by acknowledging the traditional territory of the Mississaugas of New Credit First Nation, the Haudenosaunee, the Huron-Wendat and home to many diverse Indigenous peoples

### Acknowledging the Origin of the ACHWM

➤ The need for a new measure was identified by a First Nation health leader: Mary Jo Wabano



Wiikwemkoong  
Unceded Territory

Laurentian  
University

➤ The intent was to ensure relevance for Aboriginal children in Canada

### The idea was to address the lack of data available to Aboriginal leaders, regarding the well-being of their children


- ❑ to provide local data
- ❑ from the perspectives of First Nations children
- ❑ to guide local health planning and delivery
- A partnership was developed with a university
  - to bring research resources and enhance the scientific credibility of the measure
  - this would be important if we wanted funders (e.g., government) to respect the data
- The intent was to ensure relevance for Aboriginal children across Canada

### What is the ACHWM?


- A 62 item health and well-being assessment
- Developed with and for Aboriginal children
- For children 8 to 18 years of age
- Gives children a voice in their own health assessment
- Now being shared with other Aboriginal communities and agencies, for the benefit of the Aboriginal children

### HISTORY OF THE ACHWM

### Developed in 2011



- Goal:** to provide local data from the perspectives of Aboriginal children, in a feasible and sustainable way
- Grounded in the Medicine Wheel framework, includes: spiritual, emotional, physical, and mental health.
- Created in partnership with Aboriginal children in Wiikwemkoong



### 2012: Refined by Children

- Detailed interviews were conducted with 9 children & 9 parents / caregivers
- Ensured questions were consistently understood by children

### 2014-2015: Assessed fit in other communities

✓ Weechi-it-te-win Family Services	June 2014
✓ Métis community in Sudbury	July 2014
✓ M'Chigeeng First Nation	August 2014
✓ Whitefish First Nation	October 2014
✓ Ottawa Intuit Children's Centre	January 2015

**Achieved a stable and consistently understood version**

### Named by the children ...




### Each community has selected a name for the ACHWM in their language meaning *How are You?*

Anishnaabemowin	<b>Aaniish Naa Gegii</b> (NE ON)
	<b>Aaniin Ezhi-Ayaayan</b> (NW ON)
	<b>Aniish Na</b> (SW ON)
Michif	<b>Komon Ca Vo</b>
Inuktitut	<b>Qanuippit</b>
Cree	<b>Wacheya</b>
Kanienkeha:ka	<b>Ohniio ton hatie</b>

### 2014: Developed an Android App



**Addresses Sustainability**

- No need for data entry
- Saves data locally or uploads data to a secure REDCap server


**Addresses Feasibility**

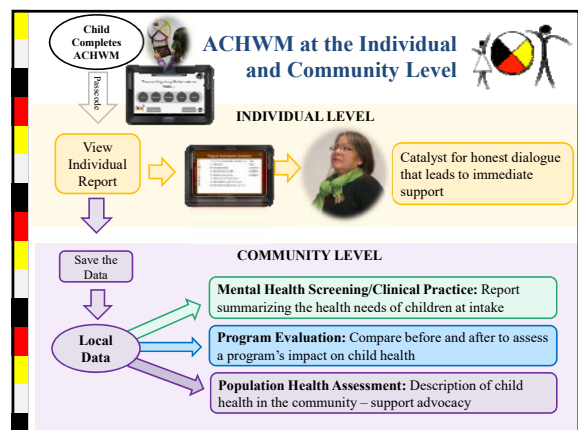
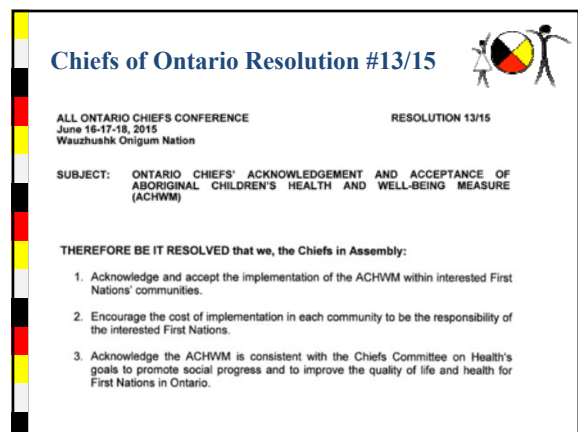
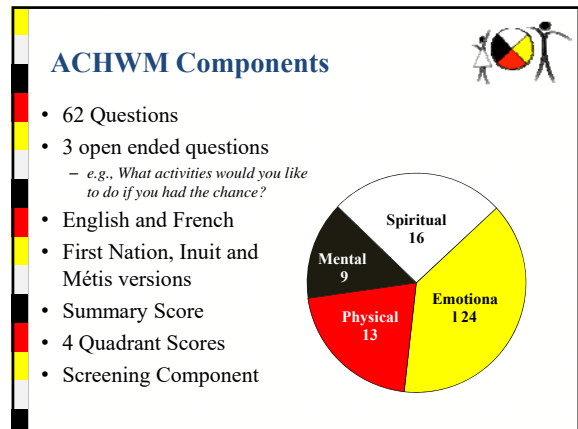
- Makes doing the survey appealing to children and efficient
- Text-to-speech option enables children with low literacy levels to participate independently



### ACHWM meets psychometric criteria

- ✓ Validity ( $r=0.52$  vs PedsQL)
- ✓ Reliability (ICC=0.94)
- ✓ Sensitivity (0.75)
- ✓ Specificity (0.97)





## Screening & Triage Process

- Created by the Nadmadwin Mental Health Clinic staff, in Wiikwemkoong
  - They asked that we flag questions which may suggest that the participant may be at-risk
    - Programmed into the tablet application
  - Children are referred to a qualified staff member if:
    - 1 or more red flags
    - 2 or more yellow flags
- Triage component:
  - Lets children know we respect their perspectives
  - Ensures children's safety, by connecting them to appropriate local services

*Note: not all participants see a mental health worker*

**Health and Wellness Assessment**

Date: \_\_\_\_\_  
Code: \_\_\_\_\_

The following answers were given during the completion of *Aanish Naa Gegit* (ANG) survey. The research team would appreciate your expert assessment. Please provide services based on your assessment and contact parents if appropriate. Please return this form with your decision about the appropriateness of this referral. We will use the results to improve our screening tool.

	Never	Hardly Ever	Sometimes	Often	Always
3. I feel afraid or scared ...					●
4. I feel bullied ...					●
18. I hurt other people when I am upset or angry ...				●	●
19. I do things to keep myself safe ...		●			
21. I feel lonely ...					●
23. I break things when I am upset or angry ...				●	●
24. I feel safe at home ...		●	●	●	
26. When I get sad or upset I get over it quickly ...		●			
28. I stay home from school ...					●
31. I get mad or cry when something small goes wrong ...				●	●
33. I feel like hurting myself ...			●	●	●
38. I am in a bad mood ...					●
39. I get a good night's sleep ...		●			

## It's about Balance an adjunct app

- Children were curious about their results, but we didn't want to focus on scores (numbers)
- A way to explore a child's results in a way that resonates with them
- We created a visual component to show the children their results
- Encourages a holistic conversation, focusing on strengths



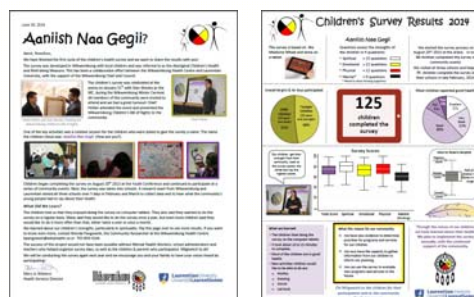
## BENEFITS

## Key benefits of the measure:

- ✓ gives children a voice in their own health assessment
- ✓ developed with Aboriginal children 8 to 18 years of age
- ✓ culturally relevant and grounded in the Medicine Wheel:
  - overall score; physical, emotional, mental and spiritual health scores
- ✓ scientifically sound: valid, reliable and sensitive
- ✓ tablets engage children in a non-judgemental way
- ✓ automated process enhances feasibility and supports the generation of local report
  - tablets are able to quickly identify urgent health needs and facilitate new connections to local supports
- ✓ generates quantifiable data useful at the local level to support program planning/evaluation and funding requests

## Example Community Report

Summary mailed to all households in  
Wiikwemkoong July 7<sup>th</sup> 2014





### Outreach Sharing:

- ❖ We are sharing with other First Nations and Aboriginal agencies, who want to implement this measure either:
  - a) Research
  - b) Collaborative Practice
  - c) Independent Use
- ❖ Each community should identify their **purpose** for implementation:
  - i. mental health screening
  - ii. program evaluation
  - iii. population health assessment
- ❖ **The ACHWM has no license fee**



### ACHWM & KEB – Pilot

- ACHWM may be useful to inform schools about the health of their students
  - Aid in connecting children to relevant supports
- ACHWM can assist in encouraging students to tell their story and create honest dialogue
  - Tablet does not “judge”
- Aggregate results may inform school programming
  - Evaluate change over time

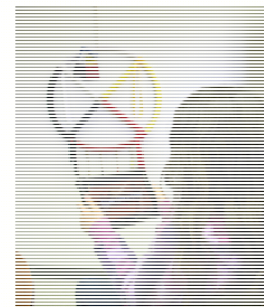


[www.ACHWM.ca](http://www.ACHWM.ca)



### Chi Miigwetch

To the many children and community members who have contributed to the ACHWM.



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