



# EDI Community Summary

Gulf Islands  
(SCHOOL DISTRICT #64)

COMMUNITY SUMMARY – Fall 2010

## Introduction

The Human Early Learning Partnership (HELP) brings together academic, government, school, and community partners to help us understand early child development across British Columbia. Beginning in 1999, HELP has collected and mapped population level child development data province wide. This data has been combined with socio-economic and community asset information to enhance the understanding of factors that influence children's development.

An important goal of the project is to assist communities and policy makers in using the information to monitor early child development, and in developing effective local and policy responses that help B.C.'s children and families thrive.

This report provides a summary and analysis of data collected in Gulf Islands (School District #64) in 2010. This is the first year of the fourth round, or Wave, of data collection across the entire province. Many school districts will administer the EDI again in 2011, and the two years of data will be combined to create the complete Wave 4 information.

The project is administered by HELP, in partnership with community networks and school districts in British Columbia. The project is funded by the Province of British Columbia through the Ministries of Children & Family Development, Education, and Healthy Living and Sport.

## Assessing Children's Development

### The Early Development Instrument

The key component of the project is the Early Development Instrument (EDI), a research tool that assesses the state of children's development in kindergarten. Measuring children's development at school entry is important because it reflects the quality of children's early experiences. We now understand how early experiences set trajectories for lifelong health, learning and behaviour.<sup>1</sup>

The EDI is a checklist that kindergarten teachers complete for each child in their class after they have known their students for several months. All teachers undergo standardized training in the administration of the instrument.

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<sup>1</sup> McCain, M. N., Mustard, J. F., and Shanker, S. (2007). *Early Years Study 2: Putting Science into Action*. Council for Early Child Development.



The EDI is a holistic measure of children’s development and provides measurement on these five distinct scales:

- 1) **Physical health and well-being**
- 2) **Social competence**
- 3) **Emotional maturity**
- 4) **Language and cognitive development**
- 5) **Communication skills and general knowledge**

In its development, the EDI has undergone psychometric testing across Canada to ensure its validity and reliability.<sup>2</sup> Ongoing testing is carried out both in Canada and other countries that are using the EDI. (More information and a link to a copy of the instrument can be found at <http://www.earlylearning.ubc.ca/research/initiatives/early-development-instrument/>)

## Vulnerability

The EDI is most commonly used in B.C. to understand the vulnerability of the population of children. The determination of vulnerability is based on the distribution of scores from the first complete round of data collection in the province. The vulnerability threshold or cut-off is the EDI score that delineates the children who scored in the bottom of the distribution. Children who fall below the cut-off are said to be vulnerable on that scale of development. The appropriate interpretation of vulnerability is that the child is, on average, more likely to be limited in his or her development than a child who scores above the cut-off. Vulnerabilities are determined on each scale and on one or more scales.

After the first provincial data collection, the vulnerability cut-offs were converted into *fixed scores* for each scale of children's development. These scores serve as a “baseline” of the state of early child development in kindergarten, and create a stable unit of comparison to show how vulnerabilities may change over time.

## Interpretation

Results from the EDI are interpreted only at the level of the group (school, neighbourhood, region, or school district). Results are never interpreted at the individual level. Communities benefit from this research in a number of ways. The research helps to show where there are large differences in children’s development; where groups of children are more or less developmentally ready for school across communities, regions, and the province; and how broad socio-economic factors may influence children's early development. This information can help

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<sup>2</sup> Janus, M. et al. (2007). *The Early Development Instrument: A Population-based Measure for Communities*. Offord Centre for Child Studies.

community members become more aware of ways to create environments to help children and families thrive.

The EDI also provides information on children's development in distinct populations. Trends in the development of children who are Aboriginal or speak English as a second language can be analyzed separately. For more information on considerations on the interpretation of results for these groups, please see <http://www.earlylearning.ubc.ca/research/>

## **Understanding Change**

Children's development is influenced by a variety of factors, among them: genetics, family environment, socio-economic conditions, neighbourhood influences, availability of early child development services, and policy directions. Changes in the state of children's development at the level of the population will be as a result of the interplay of these factors in a community. EDI results can be used to guide community planners and policy makers in making decisions about priorities for early child development supports and services, but they cannot be accurately used to evaluate one aspect of the environment, or one specific program, in isolation from the others.

Now that we have a minimum of four data collection points, trends in children's development over the entire period of time can be considered. Some areas show a consistent increase or decrease in vulnerability, while others have had a similar proportion of vulnerability each time. These, now at least eight year trends, provide a solid understanding of children's development for those areas. Less clear are the areas where the results have not followed a consistent pattern, but have fluctuated from one time to the next. In these areas, analysis of results must include a finer understanding of each of the cohorts and of the parallel growth or change in the community. Is the size of the population similar from one time to the next? With smaller cohorts, fewer children will influence a larger change in the proportion vulnerable. Did the same schools and communities participate in each data collection? In which years were the data collected and have there been notable changes in the community in that time?

Large fluctuations in vulnerability from one data collection year to the next are also important to note. Changes in vulnerability are worth noting if they are larger than 5% in neighbourhoods of over 70 children and larger than 10% in neighbourhoods where the population is smaller.

## **The Community**

For the purposes of this project, the Gulf Islands district has been divided into two neighbourhoods or areas. Children's scores are mapped in their neighbourhood of residence, not where they go to school. Neighbourhood boundaries were originally established through the consensus of local ECD intersectoral coalitions in most communities in the province. HELP was instrumental in coordinating this boundary definition process.

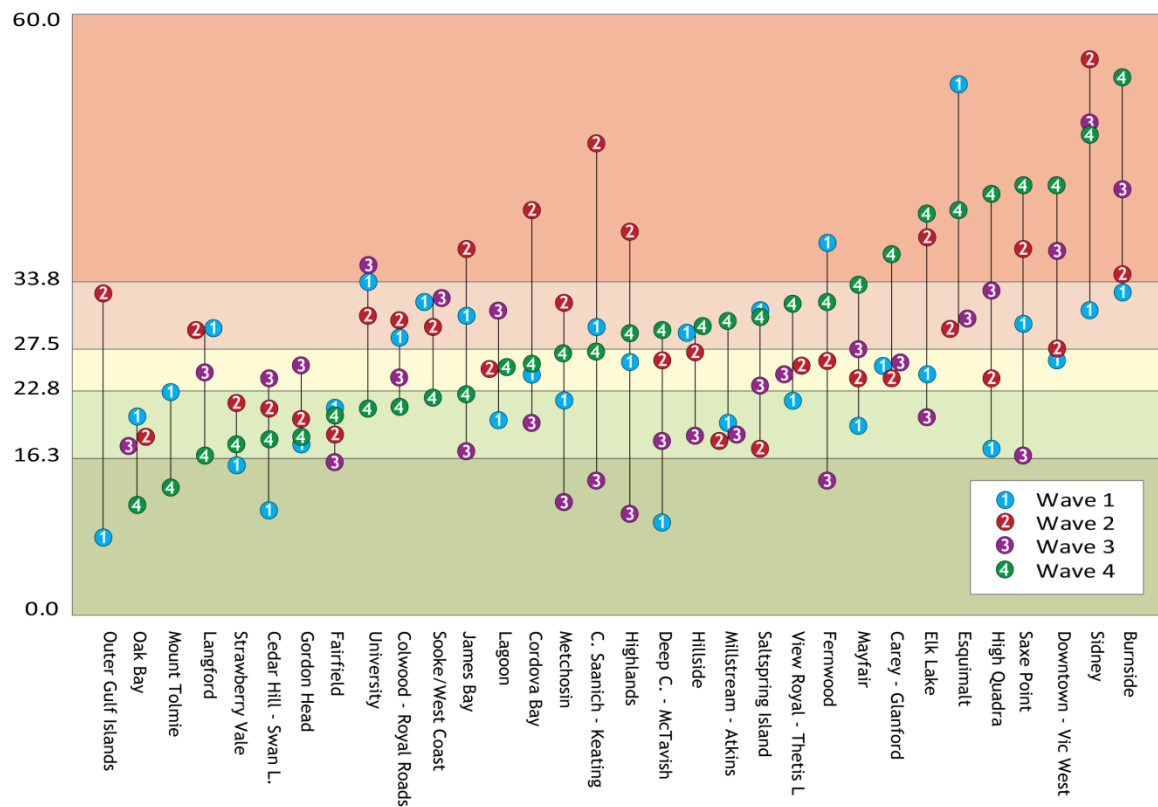
The table below shows the number of children in each neighbourhood in each round of data collection. There were a total of 200 children in Wave 1 (2000-2004), 161 children in Wave 2 (2005 – 2007), 78 in Wave 3, and 68 in Wave 4 (Year 1).

Neighbourhood	Wave 1	Wave 2	Wave 3	Wave 4 (Year 1)
Salt Spring Island	150	120	70	51
Outer Gulf Islands	50	41	8*	17*

\*Due to the small population in the Outer Gulf Islands, their results have been suppressed in Waves 3 and 4 (Year 1). The results for this area are included in the District wide findings.

## Neighbourhood Trends

### School District 61, 62, 63 & 64 - Capital RD

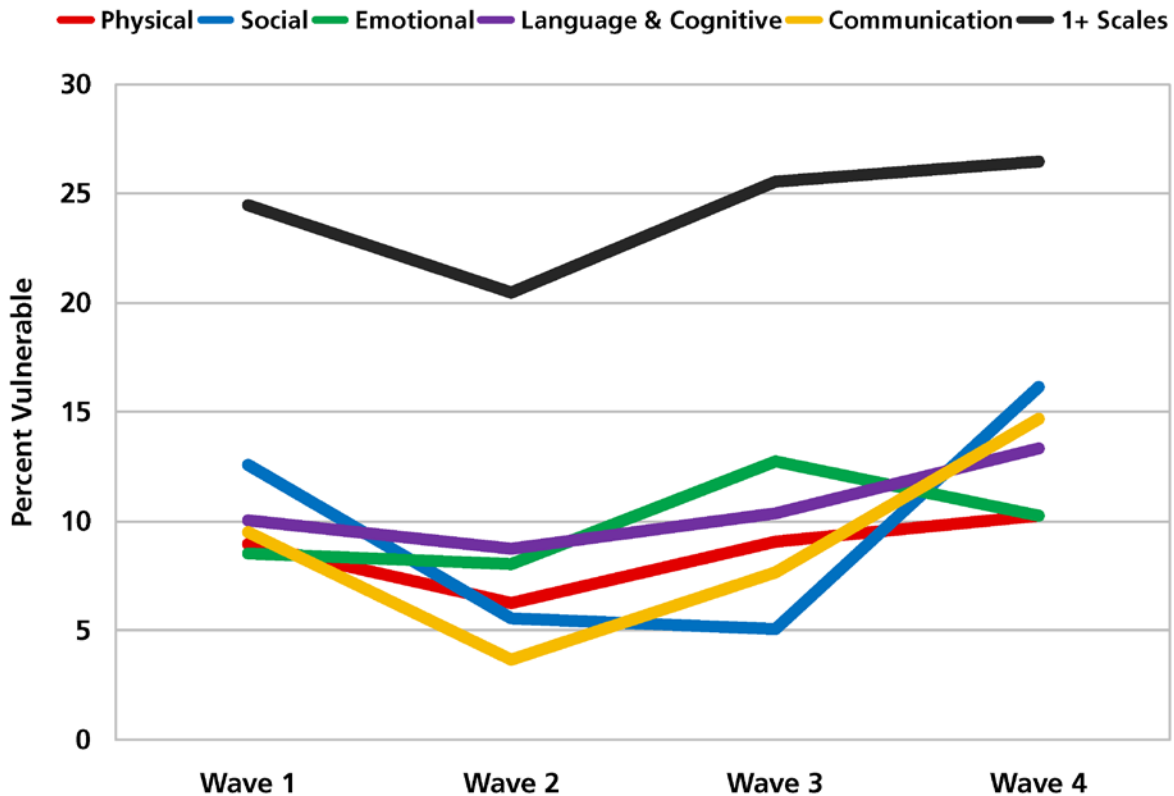


The table above shows the vulnerability for each neighbourhood by Wave. Salt Spring had a vulnerability rate of 29.4%, which is a return to the Wave 1 rate of 30%.

## EDI Results

### District Trends

#### School District 64 - Gulf Islands



- District wide, 26.5% of children were vulnerable on at least one scale of development in Wave 4 (Year 1). This is a small increase from Wave 3 (25.6%) and remains close to the Wave 1 results (24.5%).
  - This represents a consistent trend of approximately one-quarter of the children in the Gulf Islands population vulnerable in kindergarten.
  - District wide, the largest proportion of children vulnerable was on the Social Competence scale (16.2%).
  - The smallest proportion of children vulnerable was on the Emotional Maturity and Physical Health and Well-Being scales, which both had a rate of 10.3%.
  - Each of the scales have remained fairly consistent over time. After a decrease in vulnerability in each scale in Wave 2, most have increased steadily from this point onward.
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## EDI Data Table

SD 61, 62, 63 & 64 Capital Regional District



	EDI Count				Physical Health & Well-Being				Social Competence				Emotional Maturity				Language & Cognitive Dev.				Communication Skills				Vuln. on One or More Scales			
	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4
<b>SD 63</b>																												
Cordova Bay	63	78	73	81	3.2	14.1	9.6	12.3	11.1	12.8	4.1	12.3	12.7	7.7	6.8	7.4	6.3	20.8	4.1	8.6	3.2	14.1	4.1	4.9	23.8	39.7	19.2	24.7
Central Saanich - Keating	155	121	139	134	11.0	10.1	4.3	14.2	17.4	10.7	5.8	14.9	5.8	7.7	5.8	12.7	11.7	32.5	3.8	9.7	12.9	5.8	7.2	10.4	28.4	46.3	13.7	26.1
Deep Cove - McTavish	74	72	69	57	4.1	11.1	8.7	10.5	0.0	9.7	10.1	14.0	1.4	13.9	10.1	21.1	8.1	15.5	8.7	14.0	2.7	4.2	4.3	12.3	9.5	25.0	17.4	28.1
Elk Lake	42	35	56	46	7.3	31.4	7.1	21.7	9.5	14.3	8.9	28.9	9.5	4.0	14.3	11.6	11.9	33.3	10.7	4.5	2.4	20.0	10.7	13.3	23.8	37.1	19.6	39.1
Sidney	70	57	58	65	5.7	19.3	25.9	20.0	25.7	40.4	37.9	33.8	7.1	31.6	37.9	30.8	10.0	33.3	29.3	26.2	12.9	19.3	25.9	12.3	30.0	54.4	48.3	47.7
<b>SD 64</b>																												
Saltspring Island	150	120	70	51	10.7	5.0	8.7	13.7	16.1	3.3	4.3	17.6	10.8	4.2	10.0	9.8	11.4	8.5	10.0	17.6	11.3	2.5	5.7	17.6	30.0	16.7	22.9	29.4
Outer Gulf Islands	50	41	8	17	4.0	9.8			2.0	12.2			2.0	19.5			6.0	9.8			4.1	7.3			8.0	31.7		

Source:  
 2000-2010 EDI (Human Early Learning Partnership)  
 W1 - Wave 1 (2000-2004), W2 - Wave 2 (2004-2007), W3 - Wave 3 (2007-2009), W4 - Wave 4, Year One (2009-2010)

## What Next? - Taking Action for Change

The EDI provides population-based data about early child development to communities and governments so that it can be used, in combination with local knowledge and additional data (e.g. socioeconomic) to put into place programs and policies to support children's healthy development within the context of their families. Illustrating with data the disparities in children's development inspires action to redress these inequities. Given what we know about the importance of early child development to lifelong learning, health, and behaviour, we must take action to reduce vulnerability levels for today's children and for the future of our province.

The initial Wave 4 EDI data shows that province-wide 30% of children in kindergarten were vulnerable. Between 2001 and 2004 (Wave 1) the proportion of all BC children vulnerable was 26%. Between 2004 and 2007 (Wave 2), the proportion was over 29% and in Wave 3 the rate remained constant. Over the last 10 years, nearly a third of BC's children have consistently been developmentally behind in kindergarten. In the Gulf Islands district, the vulnerability rate has been about 25% in all four collections, which is lower than the provincial rate.

The vulnerable children in BC are not spread evenly throughout the province. Rather, EDI research reveals a large "geography of opportunity," one that is much like our topography where some children face steep difficulties, while others do not. The disparity is significant: on the low end, some neighbourhoods report rates of vulnerability in Wave 4 (Year 1) that are below 3%, others report vulnerability rates of over 60%.

Key to reducing the disparity between neighbourhoods is "proportionate universalism"<sup>3</sup> – meaning our actions must be proportionate to the level of vulnerability and hence applied in some degree to all neighbourhoods rather than applied only in the neighbourhoods that are the most vulnerable. All children and families need access to supports and resources to promote healthy development, but the approaches may vary in their intensity, scale, and orientation.

The BC government, as part of their overall strategic plan, has articulated a goal of reducing EDI vulnerability to 15% by the year 2015. In the initial Wave 4 data collection, only 22 – or less than 10% of all neighbourhoods in BC – had vulnerability rates below 15%. In the Gulf Islands district, there were no neighbourhoods below the 15% threshold.

Action for change must be a partnership between communities and government and must occur at all levels of the system. HELP has articulated a comprehensive "15 by 15" policy framework designed to reduce child vulnerability to the levels targeted by government.<sup>4</sup> Central to this framework is the concept that "children thrive, when families thrive" and that supporting

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<sup>3</sup> Marmot, M. et al. (February 2010). "Fair Society, Healthy Lives." *Marmot Review*.

<sup>4</sup> Kershaw, P., Anderson, L., Warburton, B., and Hertzman, C. (2009). *15 by 15: A Comprehensive Policy Framework for Early Human Capital Investment in B.C.* Human Early Learning Partnership.

children's development requires policy to address families' needs for time, resources, and community supports in caring for their children.

The "15 by 15" recommendations for government require action to be taken provincially and federally, but they can also be considered within each local context. Talk to your local MLA or MP to discuss what can be done. Understanding your population, along with the community specific strengths and limitations of existing early child development services and supports, can allow you to maximize what does exist for children and families and inform you to take action for broader systemic change.

### The Recommendations Are:

- **Enhance Community Supports**
  - **Strengthen ECD intersectoral coalitions and local planning functions.** *Are you connected to your local coalition? Can the coalition be strengthened through a renewed commitment to local control and collaboration between agencies?*
  - **Build on ECD programs and services - pregnancy, parenting and early learning resources, screening and intervention.** *What services exist in your community? Where are the gaps? How can they be more closely integrated with each other and more accessible to families? Are the services matched with the socio-economic character of the local child and family population?*
  - **Build on early childhood education and care to provide universal access to quality ECEC, with inclusion, and seamless transitions to elementary school.** *Lack of access to quality child care is an acute crisis for families in B.C. Substantively responding to this crisis requires public commitment to public funding of the system. There are, however, some local activities that can be undertaken to better support families and raise awareness. How are ECEC services and professionals integrated with the local ECD planning and delivery system? What links exist to the K to 12 education system? What type of child care is most needed in your community? How do parents access information about what is available?*
- **Enhance Family Time and Resources.** *These recommendations require broad policy change and public investment. Communities can take action by raising the awareness of the issues and understanding the impact on children and families in your area.*
  - **Build on parental leave,** by working with the federal government to increase duration to 18 months, improve coverage and benefit levels, and reserve time for fathers.
  - **Build on income support and employment standard policies** to reduce child and family poverty and to enhance work/family life balance.

EDI results can be used as one tool to guide planning for young children and families in the community. The results must be considered within the context of the variety of factors that influence early child development: family environment, socio-economic conditions,

neighbourhood influences, availability of early child development services, and policy directions. The first step in understanding results is to take time to reflect, as individuals and community members, as to the environmental trends that may be impacting children's development in your area. The EDI results will provide a catalyst for both community conversation and action.

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This research was conducted by the Human Early Learning Partnership. Community maps created for this project are available on the HELP website: [www.earlylearning.ubc.ca](http://www.earlylearning.ubc.ca).

All materials from the project are available to be used liberally in support of activities that assist in early child development.

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