

Aanish Naa Gegii:

Empowering Communities with DATA and Measuring Child Well-being

Blaine Wolfe-Knowledge Translator

Diane Jacko- Health Services Director-Wiikwemkoong

Sydney Chabot-Hamden-Knowledge Translator



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ACHWM

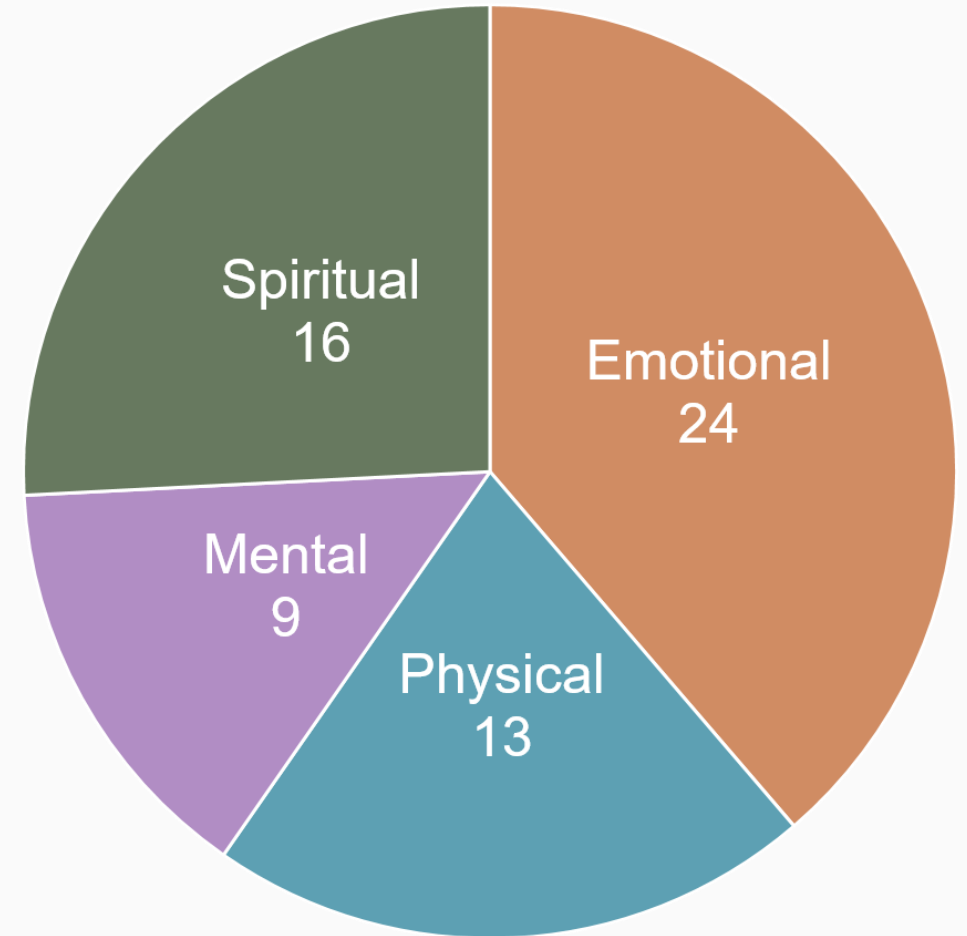
Aaniish Naa Gegii : the Children's Health and Well-being Measure

- A self-reported, tablet-based wellness assessment tool
 - With and for First Nation, Inuit and Métis children and youth (8 to 18 years of age)
- Generates information for each community
 - Locally controlled; Numerous usages for data
- Rooted in medicine wheel teachings
 - Spiritual, Emotional, Physical, Mental

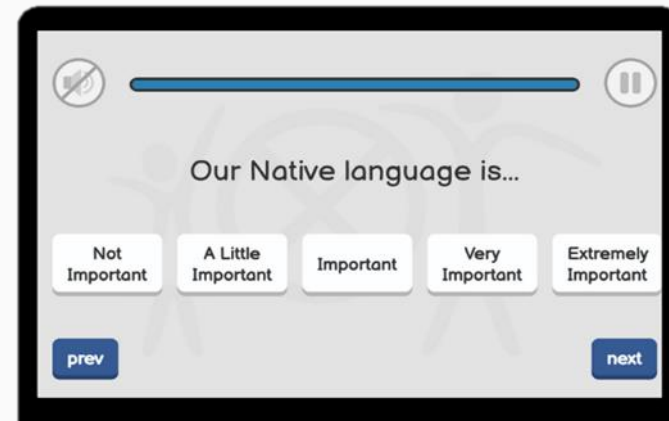
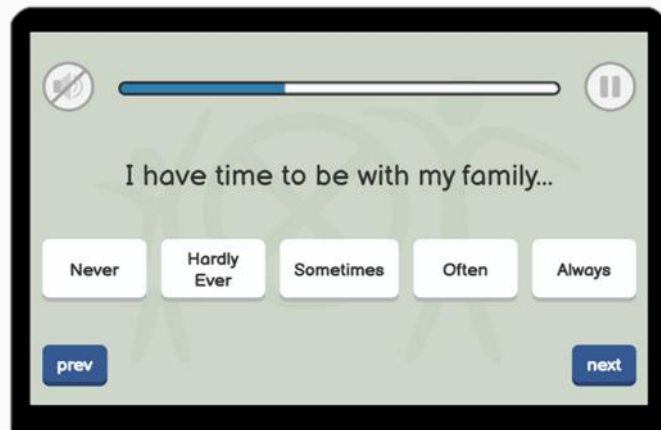


ACHWM Today

- Captures First Nations, Inuit, and Métis children's views of their (w)holistic wellness
- Screening & triage process
- Automated online reports
- Comprehensive website and Resource Hub with checklists, training & other resources
- Amazing team of experts who support communities
- **STRENGTHS BASED ASSESSMENT**

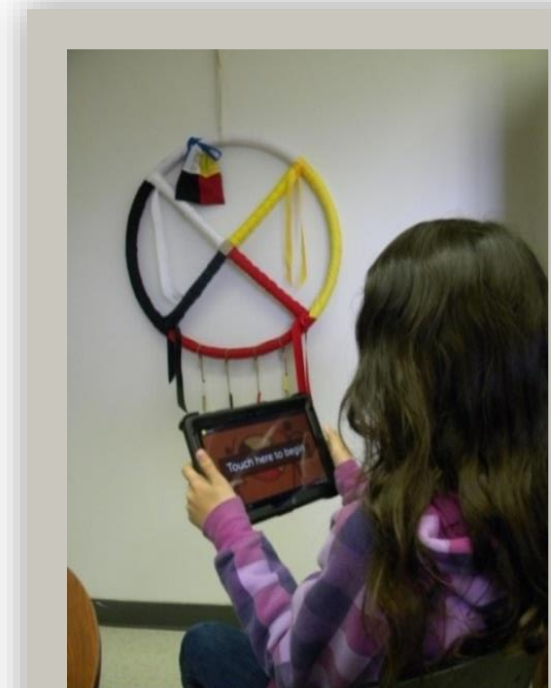


The ACHWM App



ACHWM App

- Completed by children independently using a tablet in **10 to 15 minutes**
 - No data entry
 - Produces scores that are:
 - shared with each child on a **balance chart**
 - shared with a local health worker in a **brief report**
 - shared with the community in an **automated report** based on pooled data
 - Connects children at “potential risk” to a local safety net
- *Reminder: the ACHWM is not a diagnostic tool
The ACHWM is a **wellness tool**



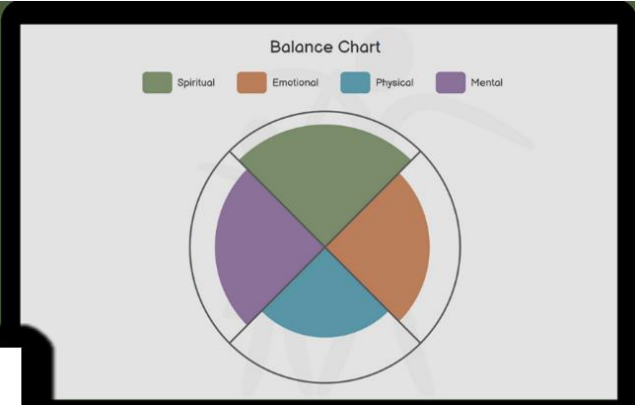
App Demo



Sharing with Local Health Worker

Balance Chart

- Helps focus the initial conversation on strengths
- Builds the relationship



Brief Report

- Scores for:
 - Overall wellness
 - Spiritual
 - Emotional
 - Physical
 - Mental (intellectual)

➤ Flags

Participant ID: _____ Date Completed: _____ Summary Score: _____
 Potential Risk: _____ Raised Flags: _____ Missed Flags: _____
 Spiritual Score: _____ Emotional Score: _____ Physical Score: _____
 Mental Score: _____

	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 ...				●	●
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 ...		●			
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 ...		●	●		
40. I feel like ending my life ...				●	●
41. I get so worried that I feel it in my body ...				●	●
45. I feel like good things will happen ...		●	●		
46. I can get clean drinking water ...		●			
51. I feel safe in my community ...		●	●		
53. I worry about getting enough to eat ...					●
54. I have hope for my future ...		●			

Local Team Member: _____ Clinician: _____
 Clinical Recommendation: Not in need of further support In need of further support Not Assessed (Refused)

If further support is recommended:
 Local mental health referral made to: _____ (clinician)
 Currently receiving professional support from: _____ (agency)
 @ _____ (agency)

May I share these results with your clinician? Yes No
 Remember: if a child is seeing another professional and requires urgent support, please refer them to a local mental health provider for immediate services.

Declined services



Data Sovereignty and Telling Our Own Stories



The Importance of Sharing our Own Stories

- Historically in Modern Canada, our Stories and Data have been shared without our input or with our best interests in mind.
- When we don't tell our own Stories, they can be filtered through a Western lens.



Our Children as Storytellers



- Children have a profound way of seeing and experiencing their World.
- Children are often not Trusted to tell and interpret their Truth.
- Even scary stories that children might tell us are important because they can tap into what it is to feel helpless and small ourselves.



What is “Data”

- Data is everywhere. When we record our voices, drum, dance, or use an app to measure children’s well-being, we are creating Data.
 - *What are some other examples of Data?*
- “Data Sovereignty” is the understanding that the data created by, or is meaningful to, an Indigenous individual or community is under the Ownership of whoever, or whatever Indigenous community created it.



Understanding our Responsibility

- Data is Powerful.
- Data can influence the perceptions of individuals and communities.
- Indigenous communities and peoples have been directly impacted by the misuse of their Data.



The Aniish-Naa-Gegii and Data Sovereignty



Our Commitment to Protecting Community Data

- The Anish-Naa-Gegii understands that we work with Child and Youth Health Data and that this Data is Precious, Powerful, and Pertinent (to governance).
- The Anish-Naa-Gegii is Guided by OCAP Principles, IQ Principles, and the growing Indigenous Data Sovereignty Movement.



ACHWM and the OCAP Principles



Ownership

- Data generated by the App is owned by the community

Control

- Who has access to the Data
- Who can use/remove data from the REDCap server

Access

- Reporting controlled by passwords (online)
- Individual Identifiers are not recorded by the ACHWM app


Possession

- Downloading via password protection
- Storing and backing up on an academic server (Stewardship)
- Option to store on community-owned/accessible servers



Inuit Qaujimajatuqangit (IQ) Guiding Principles

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Guiding principles

The ACHWM is also guided by a set of values and principles, called the Inunnguiniq (IQ) Principles

Showing respect for others	Inuuqatigiltsarniq
Being welcoming to others	Tunnganarniq
Working together for common purpose	Piliriqatiglingniq
Environmental stewardship	Avatimik Kamattiarniq
Knowledge acquisition	Pilimmaksarniq
Being resource to solve problems	Qanuqtuurunnarniq
Consensus decision-making	Aajiqatigiingniq
Serving	Pijitsirniq



The Aniish-Naa-Gegii and Data Governance

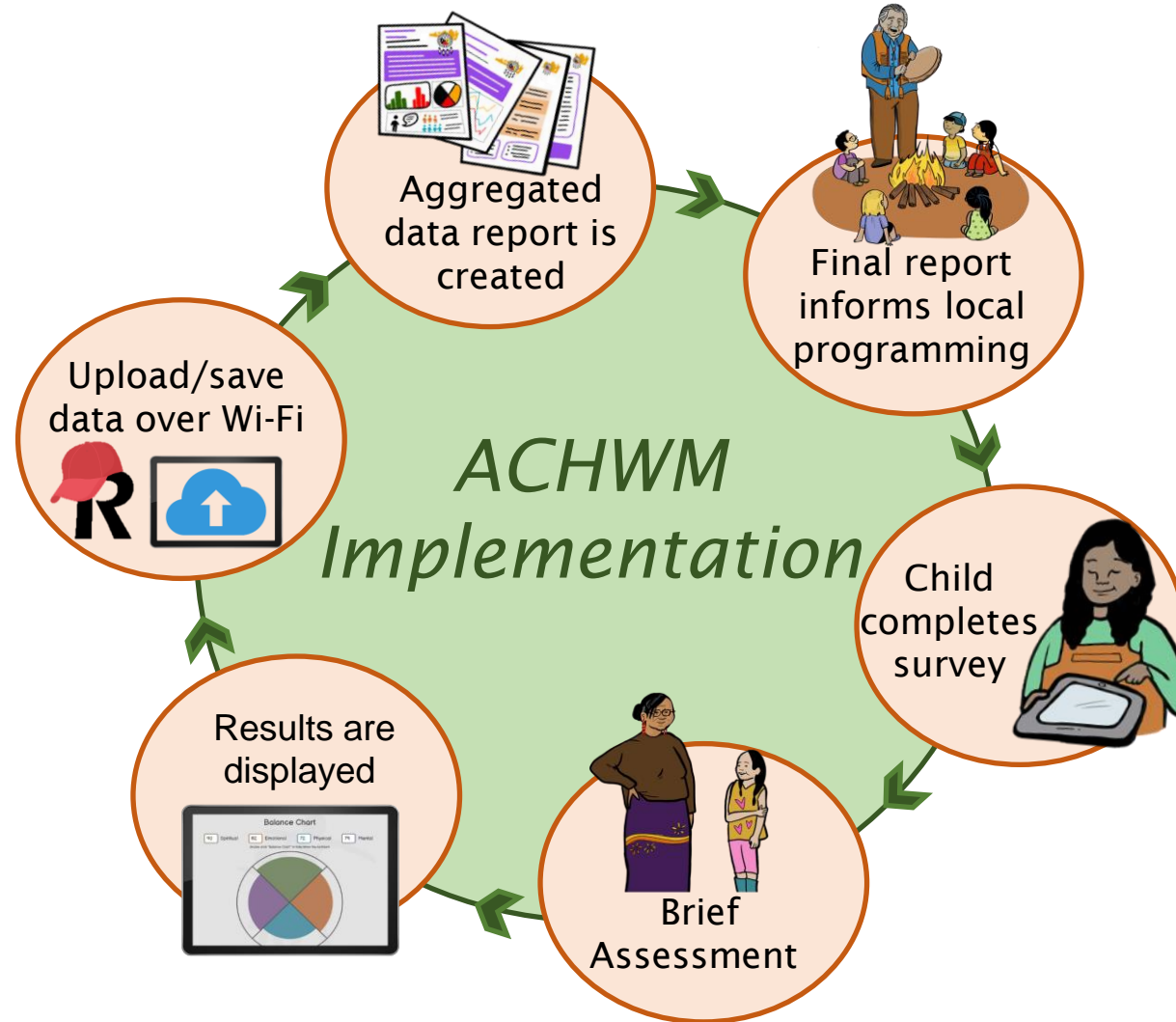


Using Data to Inform Decision-Making

- When communities use their Data, they can make informed decisions on Health and Well-being
 - Indigenous Organizations and Communities can use this Data to guide Funding decisions
 - Indigenous Communities can use Data to allocate funds effectively and focus on areas of need
 - Vs Areas of Concern (strength-based view)



Flow of data

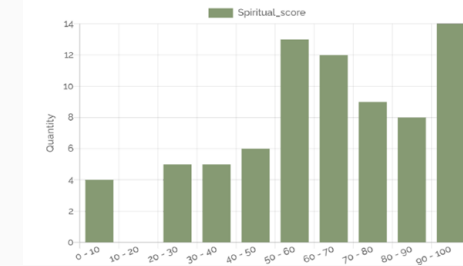


Sharing with Community Leaders

Aggregated Report

Database

Analytic Spreadsheet



record_id	participant_id	date_start	date_end	date_eval	version	Cycle	Cycle_name	staff_id	Age	Gender	Birth_date	School	location	metadata_c	GHR	How	Q1	Q3
3	162	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	10	2	2007-03-15	4	2	2	4	3		
7	294	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	9	2	2003-02-15	11	3	2	4	5		
16	104	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	12	3	2006-09-15	8	2	2	3	3		
24	312	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	16	2	2004-06-15	2	3	2	5	5		
41	125	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	17	1	2009-11-15	11	1	2	4	3		
50	350	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	8	2	2012-09-15	3	5	2	5	4		
56	234	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	16	1	2010-07-15	12	4	2	4	3		
70	321	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	11	2	2006-09-15	2	3	2	4	4		
83	388	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	12	2	2005-08-15	1	4	2	4	3		
141	236	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	14	1	2004-01-15	6	5	2	4	3		
150	324	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	15	1	2007-01-15	7	4	2	2	3		
160	305	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	14	3	2006-05-15	13	1	2	5	4		
189	228	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	14	3	2003-06-15	8	3	2	3	4		
192	304	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	9	3	2012-10-15	1	1	2	4	5		
195	104	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	11	1	2012-12-15	11	1	2	4	4		
196	129	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	16	1	2005-07-15	5	4	2	2	3		
199	373	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	12	1	2008-05-15	11	5	2	4	3		
202	355	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	13	3	2012-04-15	3	1	2	4	3		
115891	325	2017-03-08	2017-03-08	2017-03-08	1	1	Pre Evaluation	57	8	2	2011-11-15	7	3	2	3	3		
119017	288	2017-01-08	2017-01-08	2017-01-08	1	1	Pre Evaluation	11	9	3	2005-02-15	4	1	2	3	5		
122707	186	2019-01-11	2019-01-11	2019-01-11	1	1	Pre Evaluation	70	13	3	2006-07-15	11	4	2	5	5		
134077	174	2016-11-11	2016-11-11	2016-11-11	1	1	Pre Evaluation	70	13	3	2006-07-15	11	4	2	5	5		

ACHWM Report

Please consider suppressing the cell(s) in RED due to small number

select the category you want to filter

Cycle

- Pre Evaluation
- (blank)

Age Group

- Older Participants (>=...)
- Younger Participants (...)
- (blank)

ACHWM Screening

- Not at Risk

Gender

- Boy
- Girl
- Unspecified
- (blank)

School Grade

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7

MHW's assessment

- In need of further support

Participant Characteristics

Number of Participants	113
Age	
Average	13.2
Min	7
Max	21.3
Boys	44
Girls	44
Not specified	25

Age Histogram

School Grade

n	%
1	13
2	11
3	6
4	9
5	12
6	19
7	5
8	6
9	4
10	5
11	9
12	4
13	4
N/A	3

School Grade Histogram

Survey location

n	%
Community Event	25
Home	16
Health Centre	29
School	22
Youth Centre	18
Total	110

Survey Location

Global Health Rating

n	%
Excellent	9
Very Good	21
Good	32
Fair	31
Poor	20
Total	113

Global Health Rating

ACHWM scores

Average	SD	min	Max	ACHWM Score
summary	74.3	6.8	58.7	93.5
Spiritual	79.8	9.1	60.9	100.0
Emotional	75.1	8.4	49.5	95.8
Physical	77.6	7.6	60.6	98.1
Mental	62.9	8.4	42.9	83.3

ACHWM Scores

Use this graph for funding requests or reporting. This graph calculates the top and bottom whisker and removes outliers. This graph better represents aggregated results.

1. Gives children a louder voice!

- Indigenous children and youth need new ways to start conversations about wellness
 - ACHWM is tablet-based
 - Non-judgemental
 - Helps children be heard (gives them a microphone)



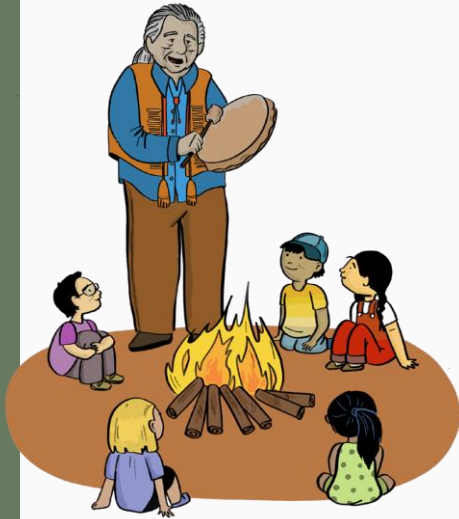
2. Connects children to local supports

- When children speak, others need to listen:
 - Truly understand their concerns
 - Initiate strengths-based conversations
 - Connect them to supports within their community



3. Produces data to inform local decisions

- The ACHWM practices data sovereignty
- This data has helped communities and organizations:
 - For example:
 - Supported funding applications (e.g., to build a shelter)
 - Bolstered advocacy for arts and cultural programming
 - Informed plans for land-based programs
 - Supported overall one-on-one wellness counselling with child/family welfare agencies



Chi Miigwetch

- To the many children and youth who shared their vision of health with us through this project;
- The Elders, for their devotion to this project;
- To the Health and Social Well-being Committee and Chief & Council for their ongoing support;
- To the communities who have helped us along our journey
- To the members of the Advisory Committee for their wisdom and guidance



Stay in touch!



ACHWM@cheo.on.ca



@ACHWM



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Website: www.achwm.ca

