

**EARLY DEVELOPMENT INSTRUMENT RESULTS**  
**Summary Reports**  
**Senior Kindergarten Students in [SITE], XX**  
**Spring 2011**

**Introduction**

The Early Development Instrument (EDI) measures children's developmental health at school entry by asking questions covering five different areas of their early development:

- Physical health and well-being,
- Social competence,
- Emotional maturity,
- Language and cognitive development,
- Communication skills and general knowledge.

The EDI is completed by teachers for all children in kindergarten classes in many communities. Since 1999 EDI data have been collected for over 550,000 kindergarten children in Canada and beyond. There has been full provincial coverage of Ontario, British Columbia, Manitoba, Saskatchewan, PEI, Yukon, and New Brunswick.

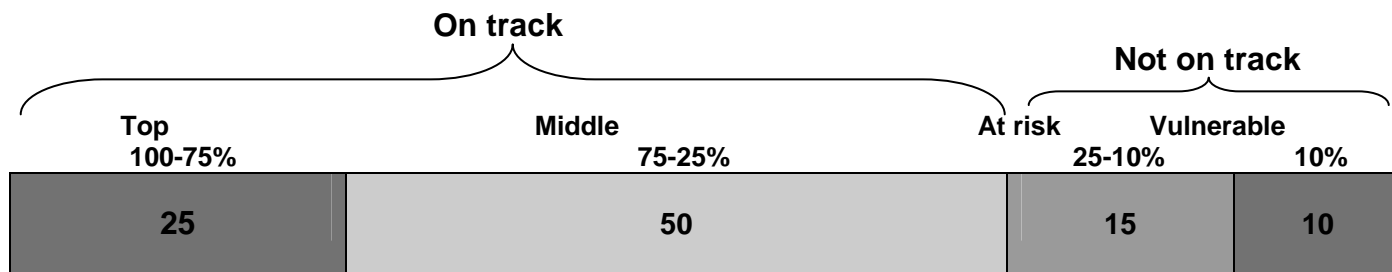
The Early Development Instrument is designed to measure children's developmental outcomes during their early years as they influence their readiness to learn at school. The results are interpreted for groups of children. The EDI does not provide diagnostic information on individual children, nor is it designed to measure a school's performance.

For communities that want to ensure all children have the best possible start at school entry, the results of the EDI are meant to provide a snapshot on how their young children are doing. This will assist in the mobilization of resources to support children's development in their first five years of life so that they will be able to enter school ready to learn, benefit from education, and participate in activities offered in the school environment.

The results of the implementation of the EDI in any given community can be considered at two levels: macro and micro. The macro level can be described as site to site, community to community, or even province to province. The micro level is neighbourhood to neighbourhood.

### EDI Scores

The average EDI scores for each developmental area – Physical Health and Well-Being, Social Competence, Emotional Maturity, Language and Cognitive Development, and Communication Skills and General Knowledge – are divided into categories representing the highest scores to the lowest scores in the community.



#### On track (Top)

The total group of children who score in the highest 25<sup>th</sup> percentile of the site’s distribution.

#### On track (Middle)

The total group of children who score between the 75<sup>th</sup> and 25<sup>th</sup> percentiles of the site’s distribution.

#### Not on track (At risk)

The total group of children who score between the lowest 10<sup>th</sup> and 25<sup>th</sup> percentiles of the site’s distribution.

#### Not on track (Vulnerable)

The total group of children who score below the lowest 10<sup>th</sup> percentile of the site’s distribution.

### EDI Report Package

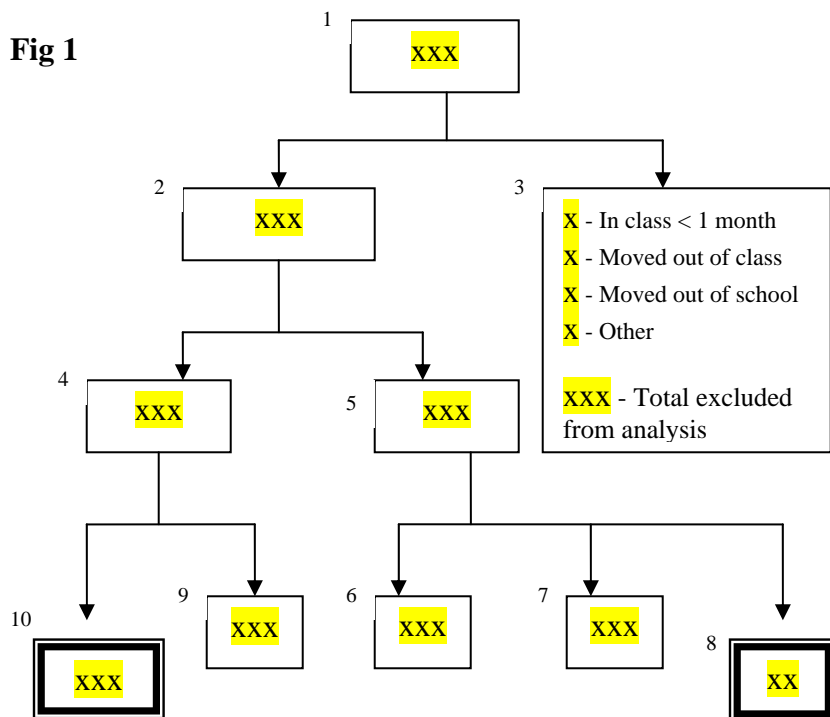
The package of results from the implementation of the EDI includes seven documents:

- 1) This report; a summary report of your school district’s EDI results (based on all valid responses for children without special needs)
- 2) A descriptive data report (based on all valid responses for children without special needs)
- 3) Group comparisons (based on all valid responses for children without special needs)
- 4) Subdomain profiles and the Multiple Challenge Index (based on all valid responses for children without special needs)
- 5) A descriptive data report on children with special needs (for those school districts with at least 10 special needs children)
- 6) Individual school reports (for those schools with at least 10 children without special needs)
- 7) A glossary and FAQ for your reference.

### Number of Children in Analyses: From Received Questionnaires to Reports

Below is an illustration of the flow of EDI questionnaires from when they are received to the final valid number of questionnaires used for analysis.

**Fig 1**



1. Total questionnaires completed .
2. Questionnaires for children in class more than one month.
3. Questionnaires for children other than those in class more than one month
4. Questionnaires for children with no Special Needs.
5. Questionnaires labelled as Special Needs or missing Special Needs.
6. Special Needs children missing more than one domain.
7. Questionnaires missing Special Needs assignment.
- 8. Questionnaires valid for analyses in reports for children with Special Needs.**
9. Non Special Needs questionnaires missing more than one domain.
- 10. Questionnaires valid for analyses in reports for children without Special Needs.**

Total number of children analyzed in Reports #1, 2, 3, and 4.

Total number of children analyzed in the Special Needs Report (Report #5).

### Valid Questionnaires by Domain

Since scores for children with up to one missing domain are considered valid, the number of students with valid data may be equal to or less than xxx in the specific domains. The table below indicates the number of students with valid data in each domain.

**Table 1**

	PHYS	SOC	EMOT	LANGCOG	COMGEN
<b>Missing</b> (More than 25% of questions left blank or with "I don't know" answered)					
<b>Valid Questionnaires by Domain</b>					

**[SITE] EDI results 2010/2011**  
Descriptive Statistics

The EDI was completed for xxx non-Special Needs Kindergarten students in [SITE] in the 2010/2011 year. The table below illustrates the descriptive statistics of this [SITE] cohort.

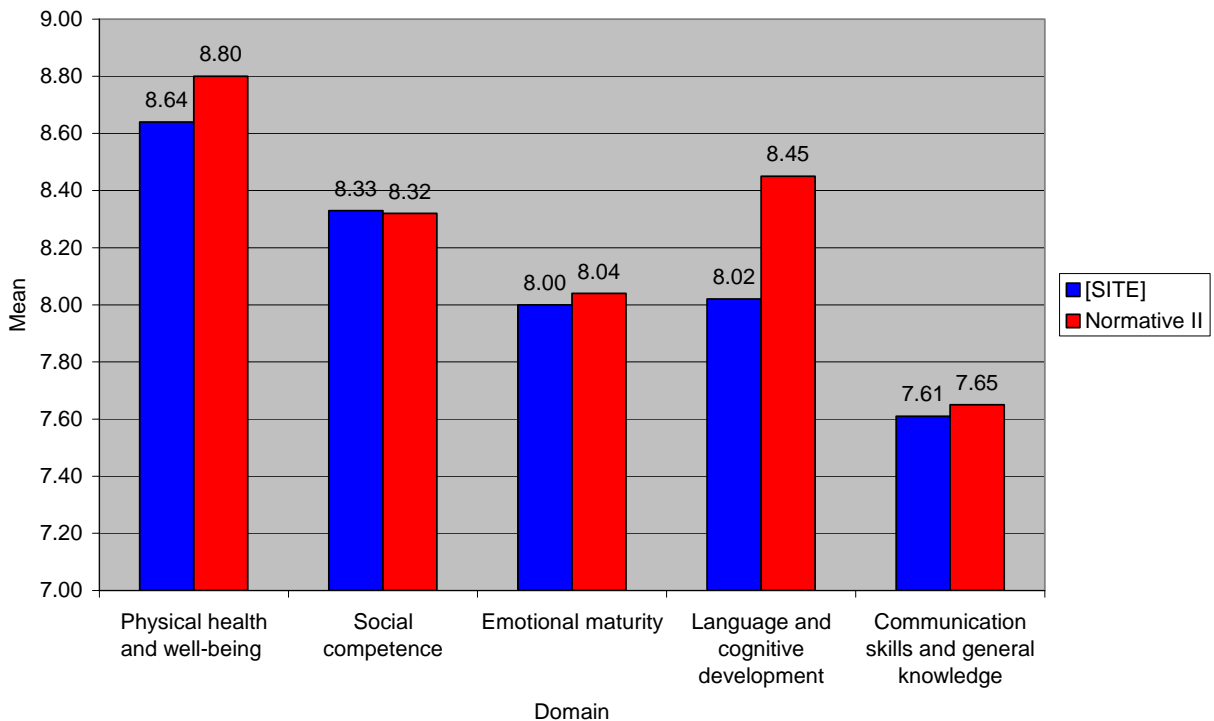
**Table 2**

Domains					Percentile Boundaries			
	Items	Min-Max	Mean	Standard Deviation	75	50	25	10
Physical Health and Well-Being	13							
Social Competence	26							
Emotional Maturity	30							
Language and Cognitive Development	26							
Communication Skills and General Knowledge	8							

The graph below indicates the mean scores achieved by the [SITE] 2010/2011 cohort in comparison with the Normative II Cohort. Note that higher values indicate better scores.

**Fig 2**

**Comparison of Means**



### Percentage of Vulnerable Children

Scores on each domain for all children in a school district can be arranged from the lowest to the highest, which can be called a “distribution of scores”. Then these scores can be divided into groups, based on THE NUMBER OF CHILDREN in the SITE.

“Vulnerable” describes the children who score low (below the 10<sup>th</sup> percentile cut-off of the site/comparison population) on any of the five domains.

The table below illustrates the percentage of [SITE] children that are vulnerable on at least one or on at least two domains based on school district cut-offs and Normative II cut-offs. These are compared to the percentages for the Normative II cohort. Displaying [SITE] results using different cut-offs facilitates comparisons and offers a different perspective on the school district results.

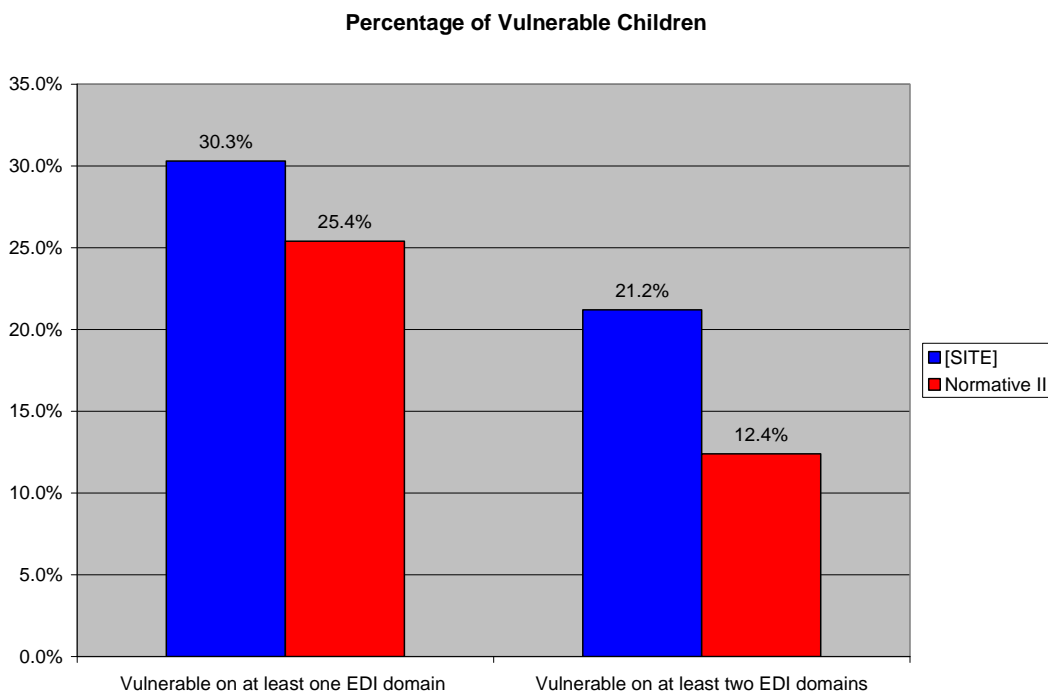
For more information on the Normative II cohort and cut-offs please refer to our website at <http://www.offordcentre.com/readiness/reports.html>

**Table 3**

	Percentage		
	2010/2011 [SITE] ([SITE] cut-offs)	Normative II	2010/2011 [SITE] (Normative II cut-offs)
Vulnerable on at least <b>one</b> EDI domain	%	25.4%	%
Vulnerable on at least <b>two</b> EDI domains	%	12.4%	%

The graph below illustrates [SITE] 2011 results for the percentage of children vulnerable on one and two domains compared to the Normative II cohort.

**Fig 3**



**Percentage of Vulnerable Children by EDI Domain**

The table below illustrates the percentage of [SITE] children who fell below the 10<sup>th</sup> percentile cut-off based on both school district cut-offs and the Normative II cut-offs. Because school district cut-offs are based on the school district distribution, it is expected that approximately 10% of the children will fall below the 10<sup>th</sup> percentile cut-off. The second column, percentage vulnerable by domain using the Normative II cut-offs, reflects the vulnerability in your school district in relation to the distribution of scores in the Normative II population.

Domains	% Vulnerable	
	2010/2011 [SITE] ([SITE] cut-offs)	2010/2011 [SITE] (Normative II cut-offs)
Physical Health Well-Being		
Social Competence		
Emotional Maturity		
Language & Cognitive Development		
Communication Skills & General Knowledge		