

Which Assessments Are Effective in Identifying the Need for OT Therapeutic Services Among Children in African Countries?

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The purpose of this study was to focus on identifying the effectiveness of pediatric assessments developed both within and outside of Africa to determine the need for therapeutic intervention. While the focus was on cultural sensitivity, this systematic review also considered the clinical utility, reliability, and validity of the assessments. The limited amount of research in pediatric assessments' cultural sensitivity in Africa was reflected in the limited number of studies (14) included in this systematic review. Africa is the second largest and the second most populated continent in the world. With over 1.3 billion people and 54 countries, it is possibly the most diverse continent. Diversity also exists in the culture, traditions, languages spoken, and beliefs in this region. Daily routines and work are dependent on the geographical region, the local environment, and the needs of society. For example, in some regions demonstrating functional skills and abilities may mean farming or fishing, which require certain skills. Therefore, as children in each region grow, their settings will determine what will be deemed functional and necessary for day to day living in that region. There is an inability to identify appropriate tools is due to a limited number of tools being available and because of limited training in the tools that are available. To enhance local applicability, assessments should be norm referenced for the local population and determined to be culturally sensitive, reliable, and valid (Gladstone et al, 2010). There are generally two ways to address the lack of assessments readily available to assess the pediatric population in African countries: 1) developing new, culturally sensitive assessments and/or 2) translating or modifying existing assessments to meet the environment, daily activities, languages, and customs of the target population.

DESIGN: This was a quantitative study design which incorporated the review of various research articles that utilized groups of children in the studies who were assessed.

METHOD: The following databases were searched: Pub Med, Psych Net, CINAHL, Medline OVID, and ProQuest Central from the years 1995-2019. The time span for this systematic review search encompassed over two decades due to limited relevant research available. The data extracted from the studies included in the systematic review included the country of origin of the assessment, age range of the participants, domains tested, limitations, and results of the study. Also reliability, validity, sample size, age range, and if the assessments were translated and/or considered culturally sensitive.

RESULTS: The results section reported on the assessments and is organized topically as follows: Translation and/or Modification of Assessments, Sample Characteristics, Clinical Utility, Reliability, and Validity. Results were able to show the limited amount of pediatric assessments that were used appropriately in assessing children to determine the need for therapeutic service. There was also limited validity and reliability amongst the assessments used in the studies due to modifications and translations.

CONCLUSION: This review has identified the gap of knowledge identifying pediatric assessments that can be effective for assessing children in Africa to determine therapeutic needs. Overall there is support to the research question indicating that 18 assessments used in the 14 studies can be considered effective for assessing children in Africa. There is a clear demand for more research from occupational therapists to research and develop culturally sensitive and evidence-based pediatric assessments which will directly impact the interventions and resources required to support daily living throughout Africa.

References

- Gladstone, M. J., Lancaster, G. A., Jones, A. P., Maleta, K., Mtitimila, E., Ashorn, P., & Smyth, R. L. (2008). Can western developmental screening tools be modified for use in a rural Malawian setting? *Archives of Disease in Childhood*, *93*(1), 23-29. <http://dx.doi.org/10.1136/adc.2006.095471>
- Kitsao-Wekulo, P., Holding, P., Abubakar, A., Kvalsvig, J., Taylor, H. G., & King, C. L. (2015). Describing normal development in an African setting: The utility of the kilifi developmental inventory among young children at the Kenyan coast. *Learning and Individual Differences*, *46*, 3-10. <https://doi.org/10.1016/j.lindif.2015.11.011>