



CHILDREN FIRST
CANADA



UNIVERSITY OF CALGARY
O'Brien Institute for Public Health



RAISING CANADA

A vote for children is a vote for Canada.
Election 2019

Election 2019: A vote for children is a vote for Canada

Children represent a quarter of Canada's population and 100% of our future, yet they cannot vote and elect the key decision makers who hold children's fate in their hands. Elected officials have an immeasurable impact on the health, wellbeing and future of our children and, by extension, our country.

Those seeking public office and who ultimately form government have a duty to serve all their constituents including children. It is also incumbent on them to understand that the state of childhood in Canada is not what we have grown accustomed to believing.

The majority of Canadians rank this as a top 5 or top 10 country to raise a child,¹ yet the harsh reality is that Canada ranks 25th out of 41 OECD countries for children's wellbeing.² Canadian children are not always fortunate to be born in this country, they are not better off than their peers in other developed nations and are in many ways struggling.

There are 8 million children in Canada today, and at least one third of them do not enjoy a safe and healthy childhood.

As a society, we have largely ignored the harsh realities that the most vulnerable, and least physically, emotionally and financially able members of our society are facing.

Canadians must come to grips with the challenges that our children are grappling with and hold our elected officials responsible. It is also the responsibility of federal leaders to address the conditions that are robbing so many of Canada's children of their childhood — and our collective future.

The solutions are readily available and can be achieved for comparatively little cost. The cost of inaction is far greater. What is needed now is the political will to make sure every child in Canada can experience the childhood they deserve.

In the coming election, whether you are voting in it, reporting on it, or running in it, we ask that you look at the issues through a different lens and ask yourself [#IfKidsCouldVote](#) what would they vote for. Now, and moving forward, [#VoteForEveryChild](#) and be a part of [#RaisingCanada!](#)

Top 10 Threats to Childhood in Canada

There is an urgent need for action by federal leaders and by all Canadians to improve the lives of children. The Top 10 Threats to Childhood are based on [Raising Canada](#) research published by the O'Brien Institute for Public Health and Children First Canada, along with input from Children First Canada's [Council of Champions](#) and partners.³ These issues also correlate with the priorities identified in the [Canadian Children's Charter](#), released in 2018, that resulted from consultation with thousands of children from coast to coast to coast.

1. Accidents and preventable injuries

Accidents and preventable injuries are the leading cause of death for children in Canada. The Canadian Pediatric Society reports that the three leading causes of injury-related deaths for children (age 0-19) are motor-vehicle collisions (17%), drowning (15%), and threats to breathing (11%).⁴ The risk of death due to injury is far greater for First Nations children than non-Indigenous children (26% of deaths amongst First Nations' children are injuries, compared to 6% of the non-Indigenous Canadian population).⁵

Injuries also account for a high number of hospitalizations among children. In 2013-14, 17,500 hospitalizations of children and youth were for injuries; with approximately 700 of these for serious bike injuries.⁶ A total of 3,000 of these hospitalizations were for injuries intentionally caused by others.⁷ Falls were the leading cause of hospitalization (37%).

2. Suicide, depression and anxiety

Suicide is the second leading cause of death of children, and in 2015, Canada was one of the five countries with the highest teenage suicide rates, at a rate of over 10 per 100,000 teens.⁸ A 2016 survey⁹ conducted by Kids Help Phone found that one in five children aged 13-18 reported seriously considering suicide in the past 12 months; 46% of those youth reported having a plan. Girls are two times more likely to seriously consider suicide compared to boys (girls - 67%, boys - 33%).¹⁰

Over the last decade (2007-08 to 2016-17) there has been a 66% increase in emergency department visits, and a 55% increase in hospitalizations of children and youth (age 5-24 years) due to mental health concerns. Approximately 2,500 children (10-17 years of age) are hospitalized every year due to self-harm injuries, with girls making up 80% of those children. Self-harm hospitalizations increased 90% between 2009-2014.

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3. Child Abuse

One third of Canadians has experienced some form of child abuse before the age of 16; 26% experienced physical abuse, 10% experienced sexual abuse, and 8% had exposure to intimate partner violence.¹¹ Research has shown that child abuse costs Canadians an estimated \$23 billion annually.¹²

The majority (65%) of victims of childhood physical and/or sexual abuse reported having been abused between one and six times, while 20% reported between seven and 21 instances. One in seven victims (15%) reported having been abused at least 22 times. More than nine in 10 (93%) victims of childhood physical and/or sexual abuse did not report the abuse to either police or child protection services before they turned 15, and 67% did not speak to anyone, including friends or family.¹³

In 2016, there were approximately 54,900 child victims (under the age of 17) of violence reported to police. Children and youth represent one out of six victims (16%) of violent crimes, and three out of 10 of child and youth victims were abused by a family member.¹⁴

Child abuse is also a considerable factor in the hospitalization of children. In 2013-2014 500 children (0 to 18 years) were hospitalized per year as a result of assault, with two-thirds of these historically being boys. Between 2009 and 2014, however, the rate has decreased for boys and increased for girls. Bodily force and other abuse make up the majority of hospitalizations due to assault.¹⁵

4. Poverty

Child poverty is a persistent threat to childhood in Canada and is the single largest determinant of health according to the World Health Organization.¹⁶ Kids who grow up in poverty are more likely to experience “poor health, be overweight or obese, suffer from asthma, have poorly managed diabetes, experience mental health problems, and die early.”¹⁷

The number of kids living in poverty dropped in 2017, and is estimated to be between 9.0% (MBM) and 12.1% (LIM). Progress was marked in all provinces with the exception of Nova Scotia where the number of children in poverty jumped from 15.7% in 2015 to 17.1% (MBM) in 2017.¹⁸

While it is encouraging to see progress, far too many children continue to grow up below the poverty line. A quarter of children with disabilities live in poverty, though the costs associated with raising a child with a disability can be up to three times that of raising a child without a disability,¹⁹ which can be overwhelming for many families.²⁰

Disturbingly, the rate of poverty for Indigenous children is significantly higher than other children in Canada, with little improvement over the last decade. Just under half of First Nation children, both on- and off-reserve, live in poverty; rising to more than 50% when looking at First Nations children living on-reserve.²¹

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5. Infant Mortality

Canada ranks 30th amongst 44 OECD countries for infant mortality rates (deaths per 1,000 live births and age at time of death <1 year of age).²² All European OECD countries have a lower infant mortality rate than Canada's, ranging from Finland at 1.9, to Greece at 4.2 deaths per 1,000 live births.

Canada's infant mortality rate has remained at approximately five deaths per 1,000 live births since 2006. In 2016, the rate was 4.5 deaths per 1,000 live births; for males this rate was 4.6 and for females 4.4.²³ This rate varies considerably across the country. The lowest rate was in B.C., at 3.4 deaths per 1,000 live births, and the highest was in Nunavut at 17.7.

While Canada's overall infant mortality rate is concerning, there is a huge disparity for children in the North who face a far greater risk of death than their peers across the country. In the North, babies are more likely to be born premature, to live far from medical care, and to be exposed to other threats to their wellbeing such as inadequate housing and food insecurity.²⁴

6. Obesity and inactivity

More than a quarter of Canadian kids are obese, presenting an immediate and long-term threat to health. Obesity rates vary across the country, with the highest rates in the Atlantic provinces. In 2017, 27.9% of Canadian children age 12-17 reported being overweight or obese, up from 26.8% in 2016.²⁵

Canada's high childhood obesity rates are largely linked to inactivity, poor diet and food insecurity. According to ParticipACTION's 2018 report card on physical activity for children and youth, only 35 per cent of five- to 17-year-olds meet the guidelines for daily physical activity.²⁶

7. Food insecurity

According to the 2011 - 2012 Canadian Community Health Survey, households with children have the highest rate of food insecurity, with 10.7% of families with children under six years saying they experience food insecurity.²⁷ In households with children under 18 years of age, 10.3% were moderate to severely food insecure. This increased from 9.7% in 2007-08.²⁸ Specifically, 7.4% of 12- to 19-year-old children experience moderate food insecurity, while 2% experience severe food insecurity.²⁹

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8. Immunization

Immunization remains “the most cost-effective public health measure of the last century.”³⁰ Yet surprisingly, 25% of children in Canada have not received the full four recommended doses of diphtheria, whooping cough, and tetanus vaccine by age two (as reported by the 2013/2014 survey on childhood national immunization coverage conducted by the Public Health Agency of Canada (PHAC)).³¹ According to parental reports, 1.5% of children (aged two to 17) have never received any immunizations.³²

9. Discrimination

While many Canadians pride themselves on being part of a multi-cultural and richly diverse society, racism and discrimination are an ever-present reality. The legacy of colonialism continues to impact the health and wellbeing of First Nations, Inuit and Metis peoples. Racism is also a reality for many other members of Canadian society. The impact of racism on the health status of children, adolescents, emerging adults, and their families is profound, impacting both physical and mental health in childhood and throughout their lifespan.³³

The rate of death due to injury for Indigenous children is four times higher than non-Indigenous children, and Indigenous children are more than two times more likely to grow up in poverty. These conditions are the result of discrimination on the part of society and on the part of government policy, racialized beliefs and systems that have been the norm for generations. A recent position paper issued by the American Academy of Pediatrics notes that “failure to address racism will continue to undermine health equity for all children, adolescents, emerging adults, and their families,”³⁴ which is equally relevant to the situation of children in Canada.

10. Bullying

Bullying is an important issue related to mental health, affecting children and adolescents in numerous ways, including making them more likely to experience anxiety, depression and suicide. In 2014, more than 10% of 15- to 17-year-old girls and boys in Canada reported being bullied online,³⁵ and one in five children and youth (age 15-20) experienced cyberstalking, cyberbullying, or both.³⁶

Some kids are more likely to be bullied than others; for instance, children living with physical or developmental disabilities are two to three times more likely to be bullied compared to their peers without disabilities,³⁷ and more than half (53%) have zero or only one close friend.⁴¹

ÉLEVER LE CANADA



RAISING CANADA

Vote for Children in Election 2019

A Call to Action

Although sobering and jarring, the current conditions facing Canada's children certainly don't need to be permanent. As a country, Canada can reverse this tide through sound policies, investment and political will. Each of the threats to childhood in Canada requires specific strategies and interventions, and recommendations exist for each issue.

Children First Canada is calling for action on the part of the federal government to ensure that all children in Canada experience a safe and healthy childhood and enjoy a promising future.

Call to action for the Government of Canada

1. Appoint a federal **Commission for Children and Youth**, to serve as an independent office of government with a mandate to raise the profile of children in Canada, promote rights of children, hold government accountable, and speak with and on behalf of children. In order for the Commission to address the health and wellbeing of First Nations, Inuit, and Métis children, we encourage the federal government to work nation to nation, respecting and including the self-governance rights of Indigenous peoples, when considering this proposal.

2. Put in place a **pan-Canadian strategy for children** led by the federal government in consultation with the provinces and territories. The aim of the strategy would be to urgently tackle the top 10 threats to children's health and wellbeing, and to ensure the full implementation of the Canadian Children's Charter and the UN Convention on the Rights of the Child.

3. Publish a **Children's Budget** so that there is full transparency on the federal expenditures on Canada's children. A children's budget will help ensure that adequate resources are being directed towards the top 10 threats to childhood along with the full implementation of the Canadian Children's Charter and the UN Convention on the Rights of the Child.

Call to action for the Canadian Voters

As members of the public, Canadians have immense power to urge those seeking office to take action to improve the lives of children and invest today for the sake of all Canadians. Candidates should be urged to share their plans, ideas and points of view around these issues. As Canadians prepare to head to the polls, now is the time to demand that these challenges be tackled.

1. Engage the leaders of all federal parties:

Tag them on social media or call their office and ask what their plan is to tackle the top 10 threats to childhood in Canada and to make this a world-leading country for kids.

2. Engage candidates in your riding:

Print off the [Raising Canada election toolkit](#) and ask your candidates where they stand and what their party is prepared to do to make Canada a world-leading country for kids. Find your local candidates by entering your postal code under "my voter information" on the [Elections Canada website](#). You can also find your candidates by party; the parties' websites often list information about each candidate and include links to their websites and social media pages. Here are some ways to engage them:

- Go to debates and ask questions
- When someone phones or comes to your door ask them where they stand
- If they hold events, go and ask them questions
- Tag them and ask them questions on social media

3. Spread the news:

Share this document with friends, family and colleagues and ask them to make children a priority in the federal election.

4. Stay informed:

Keep up to date on where each party stands and what is happening in the election as it relates to children by following Children First Canada on social media, keep tabs on our website and sign up for the newsletter.

5. Involve Children:

Share the information from this document with children and ask them what they think. Invite them to speak up and make their voices heard. They can take all of the actions listed above, and also take creative actions like creating their own campaign signs and posting them outside or on social media.

Council of Champions — Children First Canada

The Council of Champions unites the leaders of Canada's children's charities, kids' hospitals, research institutes and major corporations that invest in kids. Together they speak up for Canada's children and jointly pursue Children First Canada's vision of making Canada the best place in the world for kids to grow up!

- Gail O'Brien, Chair of the Board of Children First Canada, Advisory Board member of the O'Brien Institute for Public Health, Board Director of Sick Kids Foundation, Trustee of the National Arts Centre, Co-chair of the Council for Canadian American Relations, and Former GM of Holt Renfrew Calgary
- Sara Austin, Founder and CEO of Children First Canada
- Mathew Chater, CEO, Big Brothers & Big Sisters of Canada
- Owen Charters, President and CEO, Boys and Girls Clubs of Canada
- Emily Gruenwoldt, President and CEO, Children's Healthcare Canada and Executive Director of the Pediatric Chairs of Canada
- Julia Hanigsberg, CEO, Holland Bloorview Kids Rehabilitation Hospital
- Marci Ien, Canadian broadcast journalist, Guest Co-Host of CTV's The Social and former Co-Host
- Kathleen Taylor, Chair of RBC Royal Bank and Chair of Sick Kids Foundation
- Rhiannon Trail, President/CEO, Economic Club of Canada
- Valerie McMurtry, CEO, Children's Aid Foundation
- Krista Jangaard, CEO, IWK Health Centre
- Katherine Hay, CEO, Kids Help Phone
- Dr. Michael Ungar, Canada Research Chair in Child, Family and Community Resilience; Director, Resilience Research Centre; Scientific Director, Child and Youth Refugee Research Coalition; Dalhousie University
- Christine Hampson, PhD, President and CEO, The Sandbox Project
- Dr. Michael Shevell, MD, CM, FRCP, FCHAS, Chair of Pediatrics, McGill University Health Centre, Pediatrician-in-Chief at The Montreal Children's Hospital
- Dr. Kevin Chan, Pediatrician and former Chair and Clinical Chief, Department of Pediatrics, Faculty of Medicine and Department of Children's Health, Memorial University of Newfoundland and Eastern Health
- Dr. Holden Sheffield, Chief of Pediatrics and General Pediatrician at Qikiqtani General Hospital, Iqaluit, Nunavut
- Dr. Mary Jo Haddad CM, Chancellor, University of Windsor and President, MJH & Associates

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