

## Preparing our children



Dr Paul Martiquet, Medical Health Officer

We have long known that protecting children's health and wellness improves their ability to contribute as adults.

Indeed, it is our responsibility both as "the grownups" and as a society to prepare them for a complex, and no doubt challenging, future. Are we doing enough?

Every two years, the Canadian Paediatric Society (CPS) reports on public policy as it relates to children in Canada. Their recent edition, the fourth such report, highlights what governments need to do to support the health, safety and well-being of children and youth. This report assesses public policy in four major areas: disease prevention, health promotion, injury prevention and the best interests of children and youth.

The CPS is concerned that too few improvements have been made since their last report in 2009. They say that "Canada's children and youth may be losing ground on the public policy front," and recognize that

recession can mean a change in focus for governments. However, the CPS also contends that "children and youth remain our most powerful assets. More than that, they offer the best possible return on public investment."

They comment on the value of investments in children: "Economists agree that the most cost-effective human capital interventions occur among young children."

In particular, the CPS expresses concern about child poverty and its long term implications for health, healthcare costs, lost productivity to say nothing of social and personal implications. Not only does child poverty affect future prosperity, it costs taxpayers today as well. A second high-return investment is in early learning and child care where estimates of the return to society are from \$4 to \$8 for every \$1 spent.

The 2012 CPS report, called "Are we doing enough?" identifies four areas for action. Disease prevention covers immunization programs that are controlling infectious diseases so they are causing less than five per cent of childhood deaths making immunization the most cost-effective and probably the most successful public health effort of the last century. Unfortunately, not all recommended vaccines are covered universally across Canada.

Smoking prevention also comes under the goal of disease prevention. Efforts are continuing to discourage and educate children and youth against smoking.

Injury prevention and health promotion are two more areas of concern. Promoting health for children includes the newborn hearing screening program, and the 18-month well-baby visit, both of which are incredibly

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Working in the best interests of children and youth rounds out the four areas for action. This means reducing

child poverty, something that BC persistently fails at improving. Introducing child and youth advocates at the federal level is still a goal of the 1990 United Nations Convention on the Rights of the Child. At the provincial level, there are advocates in all provinces save PEI, but their mandate is to work with child in care. An important role, of course, but who speaks for children and youth not in care?

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