

## The health of aboriginal children

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**Few people will argue that** we all have a responsibility for the health and well-being

of the children in our community. Parents have their role to play, as do teachers and others who regularly interact with children. But so do all of us collectively; we are responsible as caring and responsible individuals. Are we failing in our roles?

Children living in poverty in First Nations community number one in four; in Canada generally, the figure is one in nine. Rated on the United Nations' Human Development Index — which measures a nation's achievements in health, knowledge and living standard — Canada ranks 3rd out of 177; Canadian First Nations communities? They rank 68th.

Despite some progress, Aboriginal children continue to suffer more from poor health in almost all categories: diabetes, suicide rates, access to clean water, poverty. The health of these children falls well below national averages making this one of the most significant children's rights issues facing Canada. Facing all of us.

A report by released by UNICEF Canada and the National Collaborating Centre for Aboriginal Health

in June reviews and evaluates the health of Aboriginal Children. The report, "Leaving No Child Behind," identifies significant concerns including an infant mortality rate

across First Nations that is up to seven times higher than the national rate; fertility among Aboriginal teens is sevens times greater than among other Canadian teens. It also found that the rate of tuberculosis among some Inuit communities was 90 times higher than that for the non-Aboriginal population. And immunization rates for on-reserve children is 20 per cent lower than the national rate.

All these weaknesses in the system are measures of our failure to care for all the children in Canada. How could this be? Why the deviations?

We used to think that health was the result of biology, medical causes and lifestyle choices — it is much more than that. Health also depends on a mix of economic, social and environmental factors. Those especially affecting the health of Aboriginal children include poverty, lack of education, substandard housing, poor nutrition and lack of access to health care and other social services. Add to that a legacy of family, community and cultural breakdown and you get a situation where children's health is bound to be compromised.

There are things we can do about the problems. We can learn more about the gaps in Aboriginal health care by collecting more and higher quality data. By removing jurisdictional boundaries between levels of government and various agencies, we can improve service delivery. Another valuable step will be to educate health care and social service providers on the particular challenges of these children. Much more can be done, but will we?

The question is not so much if we 'should' do these

things, but rather, 'can' we. The answer reverses the question: How can we 'not' do these things? How can we not care about the health of our children? Every child

in Canada deserves the best we can provide for them. We need to support families and communities to raise children who will develop to their fullest potential. This will make Canada a much better place, and more successful at every level. Or, to use a more eloquent phrase from Nelson Mandela: "There can be no keener revelation of a society's soul than the way in which it treats its children."

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the health of our children?