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Strategic Policy  
Human Resources Development Canada**

# **Investing in Children: Ideas for Action**

***Report from the National Research Conference  
held in Ottawa, October 27-29, 1998***

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# Table of Contents

<b>Introduction.....</b>	<b>1</b>
Background and Objectives of the NLSCY .....	1
The Power of Longitudinal Data .....	2
Investing in Children: A National Research Conference .....	3
Chapter Overview.....	5
<b>1. Workshop 1: Family Structures .....</b>	<b>11</b>
1.1 The Issues .....	11
1.2 Workshop Themes .....	12
1.3 Ideas for Action .....	15
1.4 Conclusions.....	18
1.5 Future Steps .....	20
1.6 Research.....	21
<b>2. Workshop 2: Parenting and Work.....</b>	<b>23</b>
2.1 The Issues .....	23
2.2 Workshop Themes .....	24
2.3 Ideas for Action .....	25
2.4 Conclusion .....	31
<b>3. Workshop 3: School.....</b>	<b>33</b>
3.1 The Issues .....	33
3.2 Workshop Themes .....	34
3.3 Ideas for Action .....	37
3.4 Conclusions.....	43
<b>4. Workshop 4: Community Influences .....</b>	<b>45</b>
4.1 The Issues .....	45
4.2 Workshop Themes .....	46
4.3 Ideas for Action .....	48
4.4 Conclusion .....	53

<b>5. Workshop 5: Health.....</b>	<b>57</b>
5.1 The Issue .....	57
5.2 Workshop Themes .....	58
5.3 Ideas for Action .....	60
5.4 Research Priorities .....	68
5.5 Conclusions.....	69
<b>6. Workshop 6: Problem Behaviour.....</b>	<b>71</b>
6.1 The Issues .....	71
6.2 Workshop Themes .....	71
6.3 Ideas for Action .....	74
6.4 Conclusion .....	81
<b>7. Workshop 7: Childhood Experiences.....</b>	<b>83</b>
7.1 The Issue .....	83
7.2 Workshop Themes .....	84
7.3 Ideas for Action .....	86
7.4 Conclusion .....	90
<b>8. Workshop 8: Vulnerable Children.....</b>	<b>95</b>
8.1 The Issue .....	95
8.2 Workshop Themes .....	96
8.3 Ideas for Action.....	100
8.4 Conclusions.....	104
<b>Conclusion .....</b>	<b>107</b>
Summary—Future Directions .....	107
Theme 1: Both Universal and Targeted Interventions .....	107
Theme 2: Early Intervention.....	109
Theme 3: Parenting .....	110
Theme 4: Partnerships and Service Integration.....	111
Theme 5: Home, School and Community .....	112
Theme 6: Work and Income .....	114
Critical Research Issues.....	116
Final Words .....	118
<b>Appendix—The Research .....</b>	<b>121</b>

## Introduction

Canada is undergoing significant change as a result of our adaptation to an increasingly competitive and knowledge-intensive global economy. With our economic and social environments shifting to meet the challenges of globalization and the technological revolution, Canada's economic growth and health as a society are dependent on our collective ability to prepare our children for the future.

Nations that are successful in the future will place a high premium on knowledge and innovation, which in turn are dependent on human resources – children who are growing up now. Governments have a responsibility to work in combination with all parts of society to bring greater coherence to policies and programs to give children increased and equitable opportunities to achieve their potential. Canadians have long recognized that communities must be able to identify their own resources and develop their own strategies to improve environments for children. Better information on how children are doing and the results of our collective efforts is essential.

Longitudinal monitoring of the health and development of Canada's children is crucial for the construction of a society that is both competent and capable of coping with change. The National Longitudinal Survey of Children and Youth (NLSCY) will provide researchers and policy-makers with the insight necessary to form a supportive set of government policies and programs to ensure the healthy development of our children in the future.

Human Resources Development Canada presented findings from the first cycle of NLSCY research at its national conference, *Investing in Children: A National Research Conference*, held in Ottawa in October 1998. The objectives of the conference were to showcase the most recent NLSCY research on Canadian children and families, and to engage researchers, practitioners, and policy-makers in discussion on the application of these findings to policy and program development. This report describes the ideas for action generated at the workshop discussions – but first some background.

## Background and Objectives of the NLSCY

The NLSCY is a comprehensive, longitudinal survey designed to measure the development and well-being of Canada's children and youth, tracking a large sample of children into adulthood. Human Resources Development Canada (HRDC) directs the development of the content, coordinates, contracts and disseminates research and Statistics Canada collects, processes and distributes the data every two years. Researchers have the opportunity to monitor potential risk factors and protective factors, as well as the impact of these factors on the development of children over time. Findings based on analysis of the survey data are already being used to inform policy decisions and activities at all levels.

The primary objective of the NLSCY is to establish a national database on the characteristics and life experiences of children and youth in Canada as they grow from infancy to adulthood. The NLSCY examines a variety of factors influencing child growth and development and has three main goals:

- To provide data to support longitudinal analysis on the prevalence of various biological, social and economic characteristics and risk factors among children and youth, including the environments in which they live, and to support diagnosis of reasons for poor outcomes and predictors for good outcomes;
- To support the understanding of factors affecting child development and well-being and the way they influence child outcomes in Canada;
- To provide this information to policy and program officials for use in developing effective policies and strategies to help young people follow healthy, active and rewarding life paths.

Prior to the NLSCY, an information gap existed regarding the characteristics and experiences of children in Canada, particularly during the earliest developmental stages. The NLSCY will eliminate this gap by providing a framework for understanding how Canada's children are developing. Within this framework researchers will be able to examine many questions about Canada's children that are unanswered.

The first cycle of data collection and analysis is complete and the findings have provided an informed view of how Canada's population of children is doing during the early stages of development, and what types of family and community factors are influencing their young lives. Still ahead are data to be collected in future cycles, which will make an even more valuable contribution. Longitudinal data will assist our understanding of the processes that modify risk and encourage children's healthy development over time. With these insights, policy-makers and researchers can develop effective strategies and programs to help children succeed in our changing society.

## **The Power of Longitudinal Data**

Perhaps the most exciting quality of the NLSCY is its potential over time. To fully comprehend this potential it is important to examine the research findings that are available now, in light of its potential for the future. The NLSCY research from Cycle 1 is considered cross-sectional, meaning the data were collected from a sample of a population at a single point in time. The data provide a description of how children in Canada are faring at the time of data collection in 1994-1995. Because cross-sectional data are from a particular point in time, there can be no analysis of change over time or direct examination of causal relationships.

Data is considered longitudinal when it is collected from the same children at intervals over time. In the NLSCY, the same group of children and youth will be surveyed every two years into adulthood. This longitudinal format of data collection will allow for an examination of changes over time, and provides researchers with the information they need to clarify the sequence of factors leading to particular outcomes. With longitudinal data it will be possible to trace the movement of children through various family types and life circumstances making it possible to determine the longer-term effects of such factors as poverty and single-parenthood. The subject sample has been followed in Cycle 2 and the data are now been analyzed; Cycle 3 data are currently being collected.

Cycle 1 data were collected from a substantial representative sample of Canadian children (aged 0-11), and accurately reflect important characteristics of the population. Information was



collected on 22,831 Canadian children from birth to 11 years of age. In each survey household, the “person most knowledgeable” (PMK) about the child/children, usually the mother, was interviewed to solicit information about the children and their families. Children aged 10 to 11 years were the oldest subjects included in the survey, and were also asked to complete a questionnaire about their experiences and opinions. School teachers and principals provided additional survey information.

The analyses of the data from such a large cohort provide good estimates of developmental trends and allow for an initial examination of many child development issues. These analyses provide insight into the lives of Canadian children and their environments. Cycle 1 data are a starting point and lay the groundwork for future investigation. There are many questions relating to child development which are optimally addressed using data that have been collected at different points in a child’s life. Undoubtedly, the full potential of the data set will only be realized as future cycles are completed.

### **Investing in Children: A National Research Conference**

The Minister of Human Resources Development Canada, the Honourable Pierre S. Pettigrew, delivered the opening address to an enthusiastic crowd of over 350 participants from municipalities and community organizations, non-governmental organizations, provincial/territorial governments, universities/colleges and federal government departments.

An international panel presenting child outcome research from Canada, the United States and the United Kingdom was held during the opening session. Panel participants included: Elsa Ferri, Centre for Longitudinal Studies, Institute of Education, University of London, England; Robert Granger, Manpower Demonstration Research Corporation, United States; and Shelley Phipps, Department of Economics, Dalhousie University. The Honourable Ethel Blondin-Andrew, Secretary of State for Children and Youth chaired the session. Speakers shared their knowledge of child development research, identified lessons learned from their experiences, and made meaningful international comparisons across various aspects of research, policy, and practice in the child development field.

Participants also heard from other distinguished speakers during the 3-day conference. Professor Emmy Werner, author of the seminal study *Overcoming the Odds: High Risk Children from Birth to Adulthood*, shared the wisdom of her experience and the findings of her work, as the main investigator of a 40 year-old longitudinal survey of children and youth. She began by congratulating HRDC on undertaking the NLSCY, which she described as “extraordinary in scope, duration and implications, for both professionals and policy makers.” She went on to focus on the need to study risk and vulnerability along with resilience among children, and the healing effects of the passage of time, transitions to successive life-cycle stages, supportive and loving families, community participation and involvement, self-esteem, and a myriad of other internal and external protective factors. While positive and optimistic, she concluded by suggesting that ameliorating the future of Canada's children will take time and patience.

Best-selling author Sylvia Ann Hewlett of *The War Against Parents*, through her dynamic stories illustrating her innumerable encounters with parents, spoke of how we, as a society, need to understand the substantial social investment that is at the heart of parenting, and the importance of giving parents the value and support they need to raise their children. This effort she said must

come from all levels of society, from broad public policies down to individual community initiatives, as it is not just parents but all of society who stand to benefit.

J. Douglas Willms spoke passionately on vulnerable children, reminding the audience that the number of children who are considered vulnerable, over 25% of children under the age of 12, and at risk of diminished life chances if not addressed, is unacceptably high and that “we must expect the best for children in Canada”.

In the closing plenary, J. Fraser Mustard provided a comprehensive synthesis of the conference findings, touching on several of the many important themes that were discussed at the conference. He stressed that brain development occurs largely before the age of five, although problems often do not appear for many years. A lack of intervention and prevention strategies for children leads to much higher social and economic costs later on. However, in Canada, we invest less financially in the early years than in the later years. Mustard urged Canadians to demonstrate to the government the importance of investing early in children not only because of social good that this does – but the economic payoff is equally large.

Dr. Mustard urged that “policies and programs should be targeted at all of society and not just targeted groups to avoid creating an ‘us versus them’ mentality. Parenting is what matters, argued Dr. Mustard, relying heavily on NLSCY research outcomes – and parents have a variety of socio-economic backgrounds. We need to encourage the federal government to support all parents through more parent education programs, parental leave, and to support early child development programs that involve the cooperation of parents”.

The main working part of the conference was a series of eight workshops where the research papers were presented and discussions on the application of the findings took place. A total of 28 papers were presented. Papers were grouped under the workshop headings of family structure, parenting and work, school, community influences, child health, vulnerable populations, childhood experiences, and problem behaviour.

The workshop format consisted of:

- brief presentations by the researchers on their findings, followed by comments on the potential application of the results by both a policy specialist and a practitioner with expertise relevant to the research area; and
- participant responses to prepared workshop questions designed to stimulate discussion and identify issues raised by the research findings.

The workshop design was intended to encourage participants to draw upon their professional experiences, and generate ideas on how the information presented could be put into practice and guide policy. Representatives from various child-focused non-profit organizations and others were tasked with recording the workshop interaction. Workshop reporters were invited to include the perspective of their organization on the workshop topic in their summary.

The conference provided a unique platform for discussion by bringing together individuals from diverse backgrounds, often people who would not otherwise have first hand access to the research findings were given an opportunity to hear about it directly and respond. *Ideas for*

*Action* is a reflection of the responses from the conference participants who actively participated in the workshop sessions.

## Chapter Overview

Papers presented at the conference were based on findings from analysis of the first cycle of NLSCY data that was collected in 1994-1995. Papers were commissioned by HRDC from academic researchers, consultants, non-government organizations and other experts. The papers presented within each workshop encompassed a wide spectrum of topics relating to Canadian children and youth.

Each chapter is divided into four sections including a statement of the question, a short summary of the research presented, ideas for action based on the workshop discussion, and a conclusion which identifies future direction for policy and program development, and community-level action. The input and views expressed during the workshops were consolidated into each chapter, making *Ideas for Action* a compendium of the excellent ideas generated by conference participants.

The following sections summarize the key research findings and offer a synopsis of the ideas for action presented at each of the workshops.

### Workshop 1: Family Structures

The NLSCY has provided a mass of data on lone-parent families. It confirms the general impression that children from these families fare less well than children from intact two-parent families; they are apt to have more health problems and poorer social and motor development. Children of single mothers are particularly at risk, especially if the mothers exhibit ineffective parenting behaviour. The question remains: Is lone-parenthood itself the cause of these problems, or do they result from a constellation of problems associated with lone parenthood (e.g., poverty, parental stress, and instability)? The NLSCY also confirms that the number of two-parent families is declining relative to never-married, common-law, post-marital breakdown, or reconstituted families. Children in these families may lose touch with the non-resident parent, usually the father. It appears that the type of custody arrangements that parents arrange after a marital breakdown (one-parent custody vs. joint custody) makes no significant difference to children's outcome.

Participants called for skills-building initiatives for parents, especially home visits to new mothers. Families undergoing breakup need both social and financial support during the crisis, and parents should ensure that children are protected as much as possible from the emotional fallout. Targeted aid should be directed to lone parents with special-needs or severely ill children, and for children who lose one or both parents to severely traumatic events.

The NLSCY provides good news, as well: most single parents are doing a good job of raising their children, and most children of lone-parent families show no problems. Many thought these results should be communicated to the public. A need was also expressed for research to determine why, in fact, so many lone parents are doing so well, and to examine the causes of ineffective parenting. Such research should involve parents and practitioners, as well as academics.

## **Workshop 2: Parenting and Work**

Parents often find it difficult to balance family and work. The NLSCY asked a number of questions relating to this topic. Researchers found that maternal employment does not, in itself, affect the cognitive outcomes of 4- and 5-year-old children. What does affect children's outcomes is the degree of parental engagement. Parenting style and maternal employment seem to be unrelated. What matters most is the quality of time parents spend with their children. Reading together, the survey showed, is the single most important contribution parents can make to their children's education.

Child care is a necessity for parents who work or study outside the home. Much concern has focused on the quality of care: do different kinds of care – regulated day-care centres, home-based caregiving, or sitters/nannies – have different effects on child outcomes? One substantial difference is that child care outside the home seems to have positive effects for children of low-income families. These children have better vocabulary skills than children who are cared for at home or who are not in day care at all. Regulated care is more beneficial for children than non-regulated care, and these benefits are greater for low-income households.

Participants called for supplemental income for parents to compensate parents who stay home with their children, through tax credits or income supports, and for policies to help parents balance employment and parenting roles. Quality of employment is important. Workplaces should establish family-friendly employment practices, a change that could benefit employers as well as families.

## **Workshop 3: School**

Children's educational performance depends on factors outside the schoolroom as well as within: personal and parental attitudes, neighbourhood factors, and life changes such as puberty. Children from unsafe, non-cohesive, or low-income neighbourhoods are less apt to be ready for school at age 4-5 than children from higher-income, more cohesive neighbourhoods. Children's educational outcomes depend on the child's personal characteristics, but family factors and socio-economic status have a profound influence: children from low-income, highly stressed families are less apt to succeed in school. Finally, pubescent girls are more apt than boys of the same age to have positive attitudes towards school; boys need more support.

Participants argued that an integrated approach to schooling, based on better research, is a priority. Schools should develop closer ties to students' parents, to the community at large, and to other educators, who can share "best practices". Workplaces should make allowances for parents' need to be involved in school activities. Ways need to be found to rebuild social cohesion in neighbourhoods and to support low-income families. High-quality child care would help children prepare to enter school. Finally, boys' alienation from school must be addressed.

## **Workshop 4: Community Influences**

As noted above, neighbourhood quality has a considerable impact on child outcomes, although it has less effect than family characteristics. Certain neighbourhoods have a high proportion of low-income lone-parent families, and children from these neighbourhoods are more apt to show emotional and behavioural problems and poor school achievement. We need stable, safe, inclusive neighbourhoods where children can grow up with a sense of security and belonging.

Repeated household moves also have a negative effect on children, weakening their attachment of school, church, and community, and stressing their parents. These moves often result either from families' search for low-cost housing or from family instability. Policies to support affordable housing and to stabilize neighbourhoods was seen as important, as was a better balance between workplace mobility and family stability. Children who undergo frequent moves need special support.

Researchers also found that sport, arts, and community programs often fail to reach the children who need them most – children from low-income families. These children may not be able to afford to participate or may face more subtle barriers, such as gender, immigrant status, or special needs. Cuts to school programs and public housing programs effectively debar many low-income children from the programs they need to develop their potential – programs that have known long-term benefits.

### **Workshop 5: Health**

The workshop focussed on four issues: gender and health; the health of immigrant children; access to universal health care; and smoking and alcohol consumption in pregnancy. In general, boys and girls are equally healthy, although boys seem more likely to exhibit problem behaviour. We need additional research to determine what fosters resilience in children; we also need to learn more about how gender affects boys' lives. Parents need practical information on this aspect of parenting.

Immigrant children generally are in excellent health. Refugee children present special health and emotional problems. Immigrant families need timely, accessible, and culturally appropriate services. Ethnic and community organizations are key players in providing services.

Children from low-income families report more health problems, and these problems vary somewhat with region of residence. To break the cycle of disadvantage, we need to link health data directly with policy and practice and to monitor health care access and health outcomes.

Alcohol use can lead to significant damage to the developing fetus, and mothers who smoke tend to have low-birth-weight babies. Pregnant women are still smoking and drinking during pregnancy, especially low-income, young, and single mothers. Anti-smoking programs should be specifically targeted to young women and should focus on “best practices” – what actually works to discourage them from smoking. Similarly, we need more effective strategies to counter drinking during pregnancy. Pregnant women – especially first-time mothers – need to access prenatal care as early as possible. We should target prenatal health education programs from childhood on.

### **Workshop 6: Problem Behaviour**

Bullying is a serious problem among children, with long-term consequences for both bullies and their victims. Children who bully are often involved in other aggressive or antisocial behaviour. These children often come from families under stress – families with low income, low status, and higher unemployment rates. Their victims also come from families where aggression and conflict are a problem.

Aggressive children have a negative view of themselves and those around them. They tend to be solitary and unhappy, and their school performance is lower than non-aggressive children. More boys than girls are aggressive, but aggression among girls is increasing. The NLSCY should help determine whether these children are more likely than non-aggressive children to get into trouble with the law as they grow up.

These children need early intervention, since aggression is grounded in very early childhood experiences. Good preschool programs can have a marked effect in decreasing the rate of delinquency. Programs to teach parenting skills and to foster parents' understanding of child development would help prevent the development of aggression in children. Parents also need support to deal with the social and economic stressors in their lives. Interventions should be both universal, fostering the development of all children, and targeted to identify and help at-risk children. The approach should be coordinated across sectors and disciplines, involving schools, communities, and all levels of government. It should be based on solid research and policy. Finally, participants emphasized the need to involve children themselves in solving the problem of aggression.

### **Workshop 7: Childhood Experiences**

Adverse conditions can compromise children's development and give rise to behavioural and emotional problems. Some of these conditions include hunger, maternal heavy drinking, or frequent disruptions of care arrangements, residence, or school.

Hunger affects both those on social assistance and the working poor – some 57,000 families a year. Simply increasing their income would help, but these families also need interventions to help them learn to make the most of their food dollars. These children need school meal programs. In addition to community resources on nutrition, home visits, and support for pregnant mothers, participants stressed the importance of encouraging breast-feeding of infants.

Children of mothers who drink heavily show a range of behavioural and emotional problems. More research is needed into how to reach problem drinkers and to increase public awareness of the problem. Frequent changes in care arrangement, residence, and school not only disrupt children's lives; they lead to a loss of the relationships that help protect them from the effects of stress. Children undergoing this disruption need special support.

Nonetheless, some children seem to be able to survive adversity without developing serious problems, simply because they are more resilient – a phenomenon that needs more study. Many argued for more research into the problems faced by single mothers and how they can best be helped to cope more effectively.

### **Workshop 8: Vulnerable Children**

Some children are at particular risk, growing up under adverse conditions that leave them more vulnerable to behavioural and emotional problems. Researchers examined the effect of multiple risk factors on child outcomes. These risks include lone-parent family, teen-parent family, parental depression, poorly educated parent(s), low-income family, and family dysfunction. As the number of risk factors rises, so does the probability of the child exhibiting problem behaviour. These children need identification and early intervention, and their families need targeted support.

Some children under stress cope remarkably well. Good sibling, teacher, and friendship relationships can have a protective effect for these children. New immigrant children also fare better than mainstream Canadian children facing equivalent stress levels. The difference may be that for immigrant families, adversity is a typical part of establishing themselves in Canada, not a permanent or cyclical state, i.e., hope heals.

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# 1. Workshop 1: Family Structures

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## 1.1 The Issues

Several research papers, drawing on the first wave of data from the National Longitudinal Survey of Children and Youth, focussed on family structure, especially on lone-parent families. What outcomes do children in lone-parent families' experience? Are they doing as well as children in two-parent families? If not, what proportion are faring less well? What differences do the survey data show thus far? What specific factors contribute to the different outcomes for children in lone-parent families, compared to those from two-parent families? And what factors contribute to differences among children from lone-parent families? These are some of the issues arising from differences in family structure.

The theme of this workshop was the impact of emerging family structures on child development and well-being. The workshop also addressed the policy implications of research findings.

Significant changes to family structures are a relatively recent phenomenon. With data from the NLSCY, we can now examine more fully the impact of different family structures on child development and well-being. This research sheds new light on some myths and misconceptions about the outcomes, behaviors, and achievements of children from "non-traditional" families. Researchers have begun to examine the effects not only of the structure of the family unit, but other factors as well.

These explorations pose a wide range of implications for policy and program development. The new research raises a number of key questions:

- Under what circumstances should we use targeted (as opposed to universal) policies to ensure healthy child development? For example, should we offer specific parenting programs

for lone-parent families only? Should these programs be targeted to parents with children in specific age brackets?

- What factors give rise to better outcomes for children from lone-parent families?
- What factors specifically predict problems for children from lone-parent families, and what types of intervention are apt to have the best effects?
- Given the data on common-law unions and family breakups, should we consider more fully the legal issues and their implications?
- What strategies might help children in families that are in the process of breaking up, or at risk of breaking up?
- Do we currently have the data and research we need to proceed with policy development in this area?
- Would a more comprehensive set of policies aimed at supporting families in Canada help offset some of the negative outcomes for children who are at risk, according to this research?

## 1.2 Workshop Themes

Research presentations focused on the following areas:

- Outcomes for children from lone-parent families, compared to children from two-parent families, and differing outcomes among children from lone-parent families (David Ross, presenter).
- Family status and insecurity (Nicole Marcil-Gratton, presenter).
- Children in post-breakup/ divorce custody (Tony Haddad, presenter).
- Children in lone-mother families (Ellen Lipman, presenter).

### A. Outcomes for children from lone-parent families

David Ross's presentation summarized the points made in two research papers with which he was involved: "How Do Lone-Parent Children Differ from All Children?" and "Comparing Children in Lone-Parent Families: Differences and Similarities." Both papers were written with Paul A. Roberts and Katherine Scott and relied on the first wave of data from the survey. The first paper contrasted children from lone-parent families with those from (primarily) two-parent families. The second paper examined the difference among children from lone-parent families and the reasons for those differences.

To determine how well children in lone-parent families were faring compared to all kids, the researchers asked whether children in lone-parent families were over-represented in the bottom 10 percent of 55 different outcomes measured in the survey. If the percentage of lone-parent children in that bottom decile was more than 25 percent higher than for all children, the outcome was considered significantly negative for lone-parent children.

In almost 70 percent of cases, lone-parent children were over-represented in the bottom decile of all children. The primary differences noted were in health status, although there were no significant differences in long-term health conditions, motor development, or social development. As the short research paper prepared by this team of researchers states, "This strongly suggests that there are some factors associated with living in a lone-parent environment that prejudice child development." But "it does not mean that lone-parenthood per se is the main factor, but that there is most likely a constellation of factors strongly associated with lone-parenthood."

In presenting his second paper, Dr. Ross sought explanations for the variation in outcomes for children in lone-parent families. In fact, many of these children are doing well. Researchers therefore need to find ways to measure the characteristics of the minority of children who are faring more poorly. For this purpose, the researchers constructed an age-related vulnerability index to determine what characteristics are associated with better outcomes and what are associated with poor outcomes. Not surprisingly, parents (usually mothers, in the survey) with higher educational status were associated with better outcomes, while parents suffering from depression were associated with poorer outcomes. Although 80 percent of the lone-parent households in the survey had low incomes, the researchers still determined that higher incomes were associated with better outcomes for children in two of the three age groups.

A second result was that consistent parenting led to positive outcomes, while a measure related to ineffective parenting<sup>1</sup> was related to negative outcomes. The more ineffective the parenting style, the more vulnerable the child was and the more likely the researchers were to see a cluster of poor outcomes. The researchers also determined that children of parents with stronger social supports were less vulnerable to problems. One finding, which opposed the finding of another research paper (by Haddad) was that children with more siblings were more vulnerable.

## **B. Family status and instability**

Nicole Marcil-Gratton, author of "Growing Up With Mom and Dad? Children and Family Instability", reported on her analysis of data from the first survey on the marital status (married, never married, common-law, etc.) of parents of lone-parent children at the time of the survey. Increasingly, common-law relationships are preceding and replacing marriages in all regions. The highest proportion of these relationships is in Quebec and the lowest is in Ontario. Common-law relationships tend to be less stable than formal marriages, and this has important implications for children.

The data from the survey indicate that a rising proportion of children will experience life in a single-parent household at some point, and that they are increasingly likely to do it at an earlier age. The survey showed that 10 percent of children in all age groups were living with a single parent who has never married. More than half of children who experience lone-parent households will face some reconstituted set of parents (other than the parents they were born to) by the time they are 10 years old.

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<sup>1</sup>One of the parenting measures on the survey was dubbed "hostile" parenting. This language caused much justifiable concern. The sources for the measure were verified and it was discovered that the label "hostile" was incorrectly associated with this measure. The NLSCY Team is now using the appropriate term "ineffective". The Team apologizes for the error; the term "hostile" has been edited completely out of this document in order not to cause additional concern.

Marcil-Gratton found that children born to common-law (rather than formally married) parents are more likely to live in a lone-parent household for at least part of their childhood than children born to married parents are. Children born to common-law relationships are also more likely to face reconstituted relationships than children born to couples who were married when the child was born.

Finally, Marcil-Gratton looked at contact between children in lone-parent families and the parent with whom they did not live. More than 90 percent of children live with their mothers after the end of their parents' relationship, and so these absent parents are usually fathers. Of those whose parents had been married, just over 1 child in 10 never sees his or her father. This figure rises to double, or more than 1 in 5, for children of previously common-law spouses. Regardless of the relationship between parents at the time of the child's birth, children see less and less of their fathers as time goes on. Less than two years after the marriage breakup, just over 1 child in 10 never sees his or her father. Almost 1 child in 4 never sees his or her father more than 5 years after the breakup.

Although the question did not arise in the workshop, the research begs the question as to why these children lose contact with their fathers. Is it because the fathers have new family responsibilities? Or is the father replaced if and when the mother forms a new relationship? Do relocation and distance create a barrier? Finding answers to these questions could lead to new approaches, encouraging more on-going contact between children and their fathers after parents separate.

### **C. Children in post-divorce lone-parent families**

Tony Haddad, author of "Do Children in Post-Divorce Custody Have More Problems Than Those in Intact Families?" offered an analysis of the first-wave survey data comparing children born to two-parent families but now living in one-parent families with those in "intact" two-parent families. He focussed on children who have changed their family status between the ages of 2 and 11. Almost 1 in 4 children born between 1987 and 1988 had experienced the separation of their parents by the age of 6 years. In 1994-95, more than 15 percent of children lived in lone-parent households, while more than 8 percent lived in blended families.

Haddad's research asked whether children in custody arrangements (that is, post-divorce households) experienced more behavioural problems than children in two-parent households, and whether the kind of custody arrangement had any impact on the extent of behaviour problems the children experienced.

The study highlighted some important and interesting patterns in the lives of Canadian children. First, more than two-thirds of all children living with both parents or in post-divorce/separation custody arrangements are well adjusted and exhibit no problems at all. Second, children living in some form of post-divorce/separation custody are only slightly more likely to exhibit one or more problems than children living with both parents. Specifically, the prevalence of problems among children in post-divorce/separation custody arrangements is 4.5 percent higher than the rate among children living with both parents. The increased rate of problems varied, from low of 0.1 percent for conduct disorder to a high of 5 percent for inattention. On the other hand, not all the differences between children in post-divorce/separation custody and children in two-parent

families were negatives. The first group engaged in unsociable behaviour *less frequently* than the second group.

In examining the variation among custody arrangements, Haddad found, surprisingly, those children living with their mothers or their fathers or in shared custody arrangements showed no difference in the rate of behavioural problems. Factors such as the child's gender or age and the number of years since the separation, as well as the mother's education, are strongly related to the rate of emotional problems among children. He highlighted the "good news": children are resilient and heal quickly. The rate of problems among children in post-divorce/separation custody diminishes by 10 percent with each year after the end of their parents' relationship.

#### **D. Children in lone-mother families**

Ellen Lipman presented the final research presentation, based on the research paper "What About Children in Lone-Mother Families?" that she wrote with Michael H. Boyle, Martin D. Dooley and David R. Offord. As the title suggests, this research focussed on the more than 80 percent of lone-parent families in the survey that were led by mothers. It verifies what many other studies have shown: being in a mother-led family (even when controlling for income) puts children at risk. It also examines other characteristics of the mother, including education level, emotional health, lack of social supports, and difficulties with parenting.

Dr. Lipman pointed out that 1 in 4 teenagers in Canada has probably lived in a lone-parent family at some point. Lone-mother families are more than 10 times as likely to have incomes under \$20,000 (over 50 percent of mother-led families, compared to just over 5 percent of the general population). Children from these families are more likely to have difficulties in school, social problems, and psychiatric problems. Difficulties for the children rose with the degree of ineffective parenting in lone-mother families, although most other difficulties were less prevalent when the data were controlled for gender, child age, maternal non-employment, maternal education, maternal depression, family dysfunction, and hostile and punitive parenting. In particular, the research reported that the combination of lone-mother status with ineffective parenting is particularly noxious for children.

### **1.3 Ideas for Action**

The ideas for action offered here have several sources. First, the researchers often included implications for policy and/or practice in their presentations. Second, this workshop benefited enormously from the commentary provided by two participants: Kathy O'Hara, Assistant Secretary, Treasury Board of Canada Secretariat, Social and Cultural Sector, and also a lone parent, and Rhonda Freeman, an executive director of a service agency that deals with families at the time of the ending of the parental relationship. Both brought an enormous wealth of experience and wisdom to the discussion. And finally, this workshop was held twice during the conference, and each time it benefited from the questions, experience and insights of a committed and engaged group of participants from a wide variety of backgrounds.

There was general agreement that although the survey data are enormously useful in illuminating children's issues and situations, the longitudinal survey is still at an early stage. It would be premature to form policy on the basis of these findings. The data do, however, confirm much anecdotal and cross-sectional data already collected. They confirm that some changes to policy

have proved effective in some local settings in addressing the problems that the survey identifies. Whether or not these changes in policy should be universal, or applied only to children in lone-parent families or their parents, was a theme that ran through all subsequent discussions.

### **A. Skills building for parents**

The measures related to ineffective parenting created some discomfort among the researchers as well as the commentators and workshop participants. This issue led to considerable focus on what constitutes effective parenting, and how and when parents might learn effective parenting skills. Does ineffective parenting cause children to misbehave, or does it result from parents' inability to handle children's misbehaviour – or both? Participants agreed that whatever the answer, ineffective parenting must stop, and it must be the parent(s) who end the practice, since only they have the power to do so.

Two practical initiatives were discussed in both workshops. First, most participants agreed on the benefits of a home visit by a health professional to all new mothers. Those who had experienced such a visit described how reassuring it was to hear that they were doing the right things and to get advice on any problems that had emerged. Such visits also give the health professional a chance to look for signs that the parent needs help with parenting skills; the professional can then arrange for follow-up services to be provided by other local agencies. Although such visits had been part of many public health programs, they have mostly fallen victim to budget cuts—a false economy that needs to be reconsidered.

The second initiative was a post-natal variation on pre-natal classes. Participants recognized that most people attending pre-natal classes could probably get the necessary skills elsewhere, and that these classes often fail to attract pregnant women who are at high risk for low-birthweight babies. Nonetheless, participants felt that pre- and post-natal classes should be provided to all new parents. Parents in the workshop all described being overwhelmed by their own ignorance when they got their first baby home, and noted how helpful such a program would have been. In addition, participants pointed out one of the key benefits participating in pre-natal courses was the creation of a peer support group. Class members inevitably met others at the same life-stage as theirs. They knew others with infants while they too had infants. A post-natal class could provide important social ties to lone-parents, alleviating the social isolation that seems to contribute to poorer outcomes for children.

The discussion acknowledged during both workshops that merely holding classes is not enough to reach the parents who need these skills the most. Courses would have to be located in neighbourhoods where lone parents were more likely to live—particularly lone parents with low incomes and little education. Child care would need to be provided for lone parents with older children. Bus fare would be necessary in some cases, as well. Referrals to such a program might come from social workers for social assistance recipients, from religious leaders, or from early home visits (as suggested above). Local community centres or health centres could also offer such courses on a regular basis.

While workshop discussions saw a need for skills-building for parents of young infants, participants also noted that different ages and stages of child development pose new challenges for parents. Skills that were more than adequate for an infant may not be those needed to deal with a toddler or pre-schooler. Such skills-building courses should be provided to parents whose

children are reaching each new stage of development, so that they may learn what new skills they will need, and acquire them directly as well.

## **B. Support initiatives for children**

Children often feel isolated when their parents' relationship breaks down, even though many of their peers may have been through the same experience. Support for children during that time might alleviate some of their anxiety and isolation, thereby reducing some of the emotional, health, and social problems that researchers identified. Practitioners report that giving children an opportunity to express their feelings and fears at this time helps them adjust to the situation.

Participants suggested that school-based peer groups, with a trained adult facilitator, would be a relatively inexpensive way to provide such support. They would have to be divided appropriately by age group and kept relatively small. Local community centres or religious organizations could offer groups like this.

## **C. Ending marital relationships**

Since 90 percent of children in lone-parent families started life in two-parent families, participants discussed ways to minimize the damage caused by the end of the parents' relationship. Most of the suggestions were directed at all separating couples and their children, instead of being calls for specific initiatives or interventions.

The most important thing parents can do is to avoid taking an adversarial approach to marital breakdown. While conflict between the parents may be inevitable, they can choose to minimize it. For example, they can rely on mediation instead of litigation to reach separation agreements. Ground rules for child support, based on the incomes of both parents, are now in effect. These may help reduce conflict between parents and give judges guidelines in cases of contested support and/or custody.

In addition, agencies with whom separating parents interact could either provide peer support for children or to refer children to appropriate programs. Mediators, family lawyers, and others could be provided with information about such programs to make available to their clients.

Separating parents should make every effort to ensure that relationships important to the well-being of the children are sustained. The obvious relationship is with the non-custodial parent, but children should be able to stay in contact with extended family members and step-relatives. In general, children bond faster than adults; while a "blended family" may break down and parents go their separate ways with their respective children, the children themselves are likely to have bonded with each other and would benefit from sustained contact with their step-siblings.

Finally, one step that governments can take is to redesign income security programs to reduce financial crises for newly separated lone parents and their children. Some current regulations are clearly not grounded in reality, particularly if we encourage parents to choose non-adversarial dispute resolution. (For example, lone mothers applying for or receiving social assistance must now reach a support agreement with the father within six weeks, according to one commentator.) Children and parents are already facing emotional trauma; suddenly facing impoverishment or financial insecurity on top of all the rest can be especially overwhelming and debilitating.

Interim parental support from the non-custodial parent should be encouraged as part of mediation proceedings, in addition to making appropriate changes to other income security systems.

#### **D. Targeted aid for some lone parents**

Participants agreed that making programs universal would benefit all children and separating parents and would eliminate the stigma associated with targeted programs. They did, however, note some exceptions.

Severely disabled children are more likely than most to end up in lone-parent families and are likely to have special needs that even two parents cannot meet adequately. The demands on one parent are simply overwhelming. In such cases, income assistance and referral to all existing support systems are especially important. These benefits should be more generous and should be easier to access than benefits for lone parents of non-disabled children. Severely ill children would pose similar challenges, and the lone parent would have similar needs.

Children can lose a parent through a severely traumatic event. For example, they may have lost a parent to sudden death, or the parents' separation may have been accompanied by or triggered by sexual abuse or domestic violence. In the latter case, mother and child(ren) may have to take refuge in a shelter. Government support to both the organizations running shelters and to those they assist needs to be generous and flexible to minimize the traumatic fall-out. Assistance in making the transition to a stable home environment is also important.

### **1.4 Conclusions**

Both workshops called for policy changes in order to:

- help all parents become more competent;
- minimize the adversarial element of marital breakdown;
- reduce children's sense of isolation at the time of separation; and
- provide emotional and social support to help children deal with their anxiety.

Discussions ranged from specific actions that might work, given what we now know about the outcomes for children in lone-parent families, to programs that have worked in local settings. More general conclusions follow.

#### **A. The good news**

In general terms, all researchers, commentators and workshop participants were pleasantly surprised by how well the majority of lone-parent families are faring. Despite the emotional, social and financial pressures involved when one adult is responsible for all child-rearing and household duties, the outcomes for most children in these households are no different from those for children in two-parent households.



Where differences exist, they are related not to lone-parenthood, but to a cluster of characteristics that are over-represented among lone parents: low income, depression, lack of social supports, and the like. Apparently the choice of custodial arrangement after marital breakdown makes little difference to child outcomes.

### **B. Some predictable "bad news"**

The "bad news" has been known from anecdotal and cross-sectional data for years. Low income, for example, has long been known to relate to poorer health outcomes for children and adults. Similarly, marital relationships involving people with emotional and psychiatric illness are predictably less than durable, and children of parents with these problems are themselves often troubled.

Practitioners, perhaps more than policy analysts, put strong emphasis on the importance of parenting skills. They said that past efforts to address this issue have focused on imparting knowledge rather than skills to lone parents and other parents of at-risk children. What is most important, they emphasized, is giving parents new ways to cope, not just the knowledge that they need new methods. The clear evidence that practice, rather than abstract knowledge, has an effect on children's outcomes is an important refinement of prior knowledge.

### **C. Inadequate explanation of causes of "bad news"**

Researchers, commentators, and workshop participants agreed that the first wave of data provided some interesting correlative data, but little information on cause-and-effect. Statistical analysis of the data could explain variations in outcomes for lone-parent children to varying degrees (from 67 percent to only 5 percent), but it could not explain all of the variations in outcomes. One problem was that analysis of past occurrences had to rely on respondents' memories of what had happened, not on data collected concurrently and then analyzed.

Participants were concerned that the number of children in lone-parent families was less than 1 in 5 in the survey, so that analyses that were age-specific or sensitive were more or less reliable depending on the size of the cohort. But even when the number of children in a particular age group was large enough to produce more reliable data analysis, the researchers emphasized that the relationships identified in their analyses were correlative rather than causal. In addition, practitioners among the participants noted other possible "causes" for certain outcomes, based on characteristics that had not or could not be measured.

## **1.5 Future Steps**

Participants had some critical comments or concerns about the survey design itself, particularly about the notion of ineffective parenting. In future, they said, work should focus on two areas: first, how data and research are communicated and to whom; and second, the need for supplemental research on lone-parent families, to help shed light on this vulnerable population.

### **Communication of survey results**

Participants saw a real need to communicate the survey and research results. The survey's "good news" would help to balance media emphasis on the problems of children in lone-parent

families. Aside from this necessary correction, discussion in both workshops focused on how the knowledge itself could contribute to better outcomes, if distributed appropriately.

In particular, participants recommended that the survey and research results should be made available to all lone parents who had participated in the survey. These parents had a stake in the research. They had probably given more thought than most participants had to the impact of their situation on their children. Many of these parents suffer from feelings of guilt and inadequacy and from isolation and loneliness. Being told how well they are doing, and what specifically relates to problems they may be experiencing, would be useful information. It would also show respect for them and would allow them to share in the cumulative experience of parents in their situation.

Similarly, many groups and organizations have an interest in the results –for example, Parents Without Partners, low-income community groups, shelters for abused women, family law lawyers and mediators, teachers' organizations and the like. These groups could make use of the survey data, research and analysis, commentaries by policy makers and practitioners and the advice and commentary of other interested parties who participated in the workshops. Workshop participants believed that all should share in the research, analysis and workshop deliberations.

Finally, participants suggested that at-risk parents could be targeted with brief synopses of the information provided by the researchers. For example, recipients of the National Child Benefit could receive a brochure with their cheques, outlining the findings. Participants believed that if parents were made more aware of the importance of their own skills to their children's well-being, it might be an important incentive to them to participate in skills-building programs.

Participants emphasized the importance of communicating the good news as well as the bad, and said that negative results should if possible, be accompanied by suggested remedies. Blaming parents, they noted, will not help them become better parents. Being a lone parent is an inherently high-stress job, even if the parent had chosen his or her status and had good skills, an adequate income, and many social and emotional supports. For any lone parent, there are times when the job is too much for anyone to handle. This fact needs to be communicated clearly to parents. All lone parents should know that seeking help is important for their children's well-being. (The same is probably true for two-parent households as well.)

## **1.6 Research**

Participants made many suggestions for possible future research as more data become available. Areas for research include:

- examining the reasons for success among most lone parents;
- determining the "cause or effect" nature of ineffective parenting;
- designing parallel research that is more participatory in nature; and
- involving practitioners, as well as academics and other policy analysts, in the survey refinements, implementation and analysis.

**A. Why are so many lone parents doing so well?**

As noted above, the "good news" part of the story is that most lone parents are managing to raise happy, healthy children. The first-round research has focussed on the "how" and "why" of problematic outcomes for children of lone parents, presumably in order to develop ways to remedy the problems. Arguably, however, we should study successful lone parents, to learn what characteristics contribute to positive outcomes among their children. Are they merely the opposite of the characteristics leading to negative outcomes? Or could the data tell us a different story?

A second important question concerns the cost to the lone parent of such positive child outcomes. Are those lone parents whose children are faring well more likely to be run-down or more prone to "burnout" over time? Are they more likely to have made career decisions that will have impacts in their non-parenting lives? Have they made decisions that limit their own emotional and social well-being over time? Such information would be helpful to the long-term picture that will emerge from the survey data.

**B. Is parenting style a cause or effect of poor outcomes?**

The research points repeatedly to ineffective parenting as a predictor of poor outcomes for children in lone-parent households. Most research generally assumes that there is less ineffective parenting among two-parent families, or perhaps that where two parents are present, ineffective parenting is less damaging – that is, that the other parent compensates for the ineffective parent. However, the characteristics that, taken together, constitute ineffective parenting could also result from parents' sense of helplessness, anger, or frustration as a result of a child's other problems, instead of being at the root of those problems. This distinction matters. If ineffective parenting is the source of the trouble, the answer is to build parenting skills. If this parenting results from other problems, the answer is to remedy the child's problems.

**C. How can practitioners as well as academics be involved in the survey and resulting research?**

Most participants in the workshops, including commentators and reporters, are engaged in the research and policy analysis side of this issue, rather than in dealing directly with children in lone-parent families. Practitioners are more likely to be able to anticipate problems, identify early solutions, and influence children and parents to take steps that will result in healthier child outcomes.

Rather than recommending a different process in future, the workshops suggested that a parallel process to engage practitioners would be helpful. For example, the outcomes could be integrated into training programs (including ongoing professional development) for teachers and other early childhood educators. Special conferences could be co-sponsored by the Applied Research Branch and appropriate professional associations. Finally, the submission of findings to appropriate journals and more popular publications would help reach those who can use the information to make a difference in the lives of children.

**D. How can participatory research be a component of the survey and resulting research?**

Finally, there was widespread agreement that including lone parents in the survey process—identifying gaps in knowledge, possible directions for future analysis, and the interpretation of findings and completed analyses—would be extremely helpful. It would not only make the research more useful, but it could also contribute further to better parenting and more positive outcomes for children in lone-parent families.

Again, the suggestion is not to change the survey process; following the same families over time will provide us with a rich source of information. On the other hand, a parallel process, consulting organized groups of lone parents on what analyses will be done and how the results will be communicated, would enrich the process. Such consultation is more likely to get at the problems that lone parents themselves see for their children. Also, lone parents may be able to shed light on confusing or unexpected results from the data and analyses.

## 2. Workshop 2: Parenting and Work

<i>Reporting organization:</i>	<i>Social Research and Demonstration Corporation</i>
<i>Workshop Chair:</i>	<i>Valerie Clements</i> <i>Strategy and Coordination Branch</i> <i>Human Resources Development Canada</i>
<i>Presenters:</i>	<i>Philip Merrigan</i> <i>Department of economic sciences</i> <i>University of Quebec in Montreal.</i> <i>Cynthia Cook</i> <i>Applied Research Branch</i> <i>Human Resources Development Canada</i> <i>J. Douglas Willms</i> <i>Atlantic Centre for Policy Research</i> <i>Faculty of Education, University of New Brunswick</i> <i>Dafna Kohen</i> <i>Department of Health Care and Epidemiology</i> <i>University of British Columbia</i>
<i>Commentators:</i>	<i>Linda Duxbury</i> <i>School of Business, Carleton University</i> <i>MaryAnn McLaughlin</i> <i>Conference Board of Canada</i>

### 2.1 The Issues

Parents often face difficult choices about paid work while their children are still young. They must strike a balance between earning money to meet the family's needs and devoting time to their children. Failure on either of these two fronts is apt to lead to detrimental outcomes for children. But parents often lack the skills, abilities, or resources to meet these large and often conflicting needs. The problem is particularly acute for lone parents, who must juggle overwhelming responsibilities without help and who have no one with whom they can share parental duties. Current trends in family breakdown and unemployment raise questions about which matters more: income and material resources on one hand, or parental care and nurturing on the other.

The four papers presented in the session entitled "Parenting and Work" address the difficult choice parents face between paid work and staying at home with the children. All four papers rely on data from the National Longitudinal Survey of Children and Youth (NLSCY) to examine key indicators of child development. The first two papers argue that mothers' employment has no effect on children's cognitive outcomes. Instead, it is the type of activities that parents do with their children that matters. This sets the stage for further exploration of how parenting characteristics could affect child development. The third paper examines parenting styles, while the final paper looks at other types of "parenting," such as child care. Together, these papers present a broad picture of the effects of parental employment, parent-child interactions, and various ways in which families manage their work and home lives.

## 2.2 Workshop Themes

The workshop focussed on the following themes:

- Working mothers and their children (presenter: Philip Merrigan);
- Balancing work and family (presenter: Cynthia Cook);
- Parenting styles and child outcomes (presenter: J. Douglas Willms); and
- The importance of quality child care (presenter: Dafna Kohen).

### A. Working mothers and their children

Pierre Lefebvre and Philip Merrigan's "Working Mothers and their Children" directly addresses the issue of parenting and paid work. Their first main research question (p. 5) asks directly: "does maternal employment have positive or negative implications for children's well-being independently from both child and family background characteristics that make some women more likely to work?"

The authors' most important finding is that "parental work and maternal non-employment do not have direct effects on cognitive outcomes of 4- to 5-year old children" (p. 35). This finding arises from a statistical model that includes measures not only of the extent of mothers' work outside the home, but also the extent of the work of the other parent in two-parent families.

### B. Balancing work and family

Cynthia Cook and J. Douglas Willms, in "Myths of Balancing Work and Family," analyze the relationship between parental engagement and work, where "parental engagement" is defined as the number of times per week that parents engage in certain kinds of activities with their children. For example, their measure of "engagement" includes the number of times that parents read with children and the number of times that parents "play sports, hobbies, or games" with them (p. 4).

As Cook and Willms point out in their literature review, "the relationship [between maternal employment and parental engagement] is complicated, as it seems to depend on the type of activity considered, and the time of day ... [It] may not be the number of hours parents spend with their child that matters most, but rather their availability to discuss school issues and help them with their homework."

At least at first glance, the extent of parental engagement might seem to depend on the extent of parental work outside the home. But Cook and Willms find that parents' engagement depends more on the age of the child than on family structure or socio-economic status. Engagement itself has positive effects on child development, as measured by a scale of "pro-social behaviour" and by the likelihood that the child has a behavioural disorder.

### C. Parenting styles and child outcomes

A related paper by Ruth K. Chao and J. Douglas Willms, “Do Parenting Practices Make a Difference?”, looks at the relationship between parenting style and child outcomes. One of their important findings is the absence of any strong relationship between “parenting style” and socio-economic status. All classes have good and bad parents in their ranks. Not surprisingly, then, the inclusion of “parenting style” in a statistical model of children’s outcomes leaves the estimated effects of rough indicators of maternal employment largely unchanged.

### D. The importance of quality child care

The final paper, by Dafna Kohen and Clyde Hertzman on “The Importance of Quality Child Care,” deals with a controversial topic. Do different kinds of child care—“care in regulated day-care centres, care in the home of care-provider ... care in the child’s home by a paid sitter or nanny and other types of informal arrangements, such as care by a grand-parent”—have different effects on child outcomes?

More and more, both parents are engaged in paid work or study. As a result, the number of children in child care has increased dramatically. This change has led to concerns about the quality of that care and on its effect on child outcomes. Kohen and Hertzman find that “the type of care makes a difference” for some kinds of families. For example (p. 9): “In the case of children from low-income families, those who participate in care arrangements outside the home, either regulated or unregulated, have superior vocabulary skills to those who are cared for at home by a relative or those who use no other care arrangements.”

The differences that Kohen and Hertzman find are substantial, though the authors are careful to admit that, in the absence of random assignment, the question of whether the superior skills are due to the form of day care or due to “subtle selection process” cannot be addressed. However, they believe (p. 9) that “at least some of the differences are attributable to attendance at such programs.”

## 2.3 Ideas for Action

These four papers are a useful beginning to research on parenting and work using the NLSCY. As additional cycles become available, researchers will be able to bring to bear more sophisticated longitudinal techniques. More attention, however, needs to be paid to the nature and extent of parental work. All “work” is not the same. Do both parents work? Are one or both working long hours in physically or emotionally tiring jobs or short hours in relatively placid jobs? Are they working year-round or only seasonally, full-time or part-time, regular hours or shifts? Are they working for “family-friendly” employers who give parents the flexibility they need to deal with family emergencies or to be home after school? Or do they work for strict or demanding employers who expect their workers to adhere rigidly to schedules or to “give 110% to the job”?

One key conflict underlies discussions about work and child-rearing: can parents work outside the home without compromising their children’s outcomes? If better outcomes result from

parents spending more time engaged with their children, as the papers suggest, then taking time out of parenting to undertake work outside the home may be damaging to children's well-being.<sup>2</sup>

This conflict may not be inevitable. It is clear that at least some full-time working parents manage to raise well-adjusted offspring. Moreover, other factors may play a more important part in children's well-being than the type of parental employment measured by the data. Well-designed policy and actions may help to reduce the real and apparent conflict between paid work and child development. The ideas for action in this area are divided into five themes below, depending on the area where participants felt action would be most effective.

- *Family income*: This is a key influence on child well-being, and one of the principal reasons why parents choose to undertake paid work, or work longer hours.
- *Parental employment*: How and why do parents engage in paid work and what strategies can they adopt to minimize any negative effect on their children?
- *Time available for children*: How can the time demands of employment be adjusted in children's favour?
- *Parental engagement*: How can parents make the best of the time spent with their children?
- *Day-care and the education system*: What should be done with children when they are in care away from their parents?

Throughout the session, there was strong support for the NLSCY. In any policy environment, from the local to the national, it would be difficult to advocate for change, or even to engage in an informed debate, without the evidence that the NLSCY can provide.

### A. Family income

The basic premise of the discussion on this topic was that income was an important influence on child outcomes, independent of other factors. Parents often feel they need to work in order to maintain a given standard of living. Other families need two wage-earners simply to make ends meet. Children in lower-income households fare less well than those from better-off families, and those in families in receipt of welfare seem to fare the worst of all.

Participants focused on getting more resources to families to compensate for their additional needs. A solution proposed repeatedly was supplemental income for parents, chiefly through tax or welfare transfers. Some considered the balance of taxation between taxpayers with and without responsibilities for children to be unfair. Opinion was divided on whether tax credits or other income supports should be universal or targeted. The observed poor outcomes of children in families receiving welfare prompted calls for reversing recent provincial policies, which have reduced the real level of welfare benefits, tightened eligibility rules and restricted the duration of benefits.

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<sup>2</sup> An exception here is the Kohen and Hertzman finding that high-quality day care had a positive impact on outcomes for children from low-income families. For such families, the implication is that high-quality day care is a substitute for parental time.



Other contributors drew on the research findings suggesting income was not as strong an influence on child outcomes as some of the goods and services that it could be used to buy. One way to help children was thus to provide supports in kind, to ensure families had access to transport, day-care, proper housing and health care.

Separated parents' access to child support payments (as a means of increasing their incomes) was not explicitly addressed in the discussion. Neither was access to employment, although it was implicit in much of what followed.

## **B. Parental employment**

Parents have many reasons for working, but foremost among these are income needs. Economic circumstances can determine whether or not a parent works, how long he or she works, and when, where and for whom. Parents with more skills and experience will generally earn higher wages and have more employment choices, but the same principles apply. Where there are two parents in a family, there may be some room to decide how working roles are to be divided. For lone parents, there is no such option.

A traditional division of labour within families, along gender lines, may make sense where employment and parenting skills, potential wages and circumstances allow. Participants called for policies to support the male-breadwinner model of labour division through educational programs targeting men to become better providers and protectors and through financial support to mothers who stay at home. There was a call for a return to a family wage—one that would allow a single breadwinner to support a family.

Others felt that the division of labour by gender is not an appropriate model. Employment, parenting skills and potential wages did not neatly follow a gender division. Instead, policies should ensure that all parents are better prepared for both employment *and* parenting roles, to allow families to find their own optimum division of labour. The research papers had not been able to identify what such optimum divisions might look like. In practice, parents' work and parenting roles were not static: parents moved between roles as their children grew up. This would become clearer from later waves of the survey.

Researchers had found little evidence for the popular perception of a strong negative link between maternal employment and child outcomes. It appears that parents could make up for the time lost to employment by being highly engaged with their children during their time together. Participants noted that these findings should clear the path for other models of work and child-rearing and were eager to ensure that this information is fully publicized. More pragmatically, they also pointed out that working mothers are now so much the norm that a return to past practices is unlikely.

Discussion turned to the quality of employment – a topic not covered by the research. Jobs that paid well, offered flexible hours and leave policies, and provided security of tenure and a supportive environment might benefit children in ways that now go unmeasured. The effects on children of “work for welfare” policies —which force parents into low-paid unsupportive jobs, at the cost of time with their children – need to be questioned.

Participants recognized the importance of parents' abilities and education. High-quality jobs generally go to capable, educated parents. Another key finding from the research was the

association between parents' education levels and child outcomes. Education and labour market policies for the parents' generation were thus also fundamental to the next generation of children.

Some participants suggested a strategy to make employers aware of the implications of their employment policies for children – and thus for their future workforce. Employers need results in language they understood, with job, sector and industry types analyzed in more detail. Short and simple documents would work best, backed up by strong research.

One persuasive argument was that employers would respond when their own needs coincide with those of families. At one level (for example), ensuring that parents are literate would offer benefits to both employer and child. A workplace literacy scheme would contribute to productivity at work and literacy in the home. In a similar way a business case could be made to employers to support family-orientated programs that might improve morale and staff retention, reduce absenteeism, or improve the educational attainment of potential recruits.

Other participants argued that the problems were so important that they should not be left to individual companies to take on voluntarily. Legislation would be the only way to bring about changes to benefit children, such as parental leave policies, and help with re-entry to work. The recent extension of parental leave to a greater proportion of parents in Quebec was cited as an example.

### **C. Time available for children**

The great unknown from the research was the nature and extent of the time parents had available for their children. It could be assumed that non-working parents spent more time with their children and working parents less, but the exact relationship among paid work, child care, and other activities remains unknown for both mothers and fathers. While the NLSCY contains better information than many surveys on what parents actually do in time spent with their children, that information was still limited.

If parents who worked less had more time available for parenting, then action to reduce parents' labour supply could benefit children. On this assumption, workshop participants proposed a diverse range of possible options:

- improve the education and human capital of parents, so they could command a higher wage, allowing them to work fewer hours;
- subsidize parental earnings, perhaps by transferring more income to parents through the tax system, so they would need to work for fewer hours;
- legislate a family wage or raise minimum wage levels to generate more income for the same number of hours;
- encourage and legislate for extended parental leave (Scandinavian examples were quoted), to cover both birth and adoptive parents; and
- induce employers to provide “family-friendly” employment, so that parents were better able to coordinate their hours and to share child-care time.

One of the keys to this process may be freeing up fathers' time. Mothers might be under less pressure if fathers could be more available to provide care at home. There was therefore a call for better parenting to be seen not only as a women's employment issue. Institutional, cultural and personal factors may affect fathers' willingness to take on more parenting duties. For some, deep-rooted behaviours may be difficult to change, but for others, making greater contribution to parenting may be constrained by policy rather than culture.

This theme was summed up by one participant: we need to shift our policy focus from keeping parents in the work force to keeping parents with their families. As one of the workshop discussants pointed out, however, it is far easier to construct a "wish list" of programs that might make jobs "family friendly" than it is to construct a business case for their adoption by private firms.

#### **D. Parental engagement**

While the survey could not pinpoint the amount of time parents spend with children, it did identify much more clearly what activities constituted parenting. It could do this both from a broad behavioural perspective (associating parenting style with child outcomes) and in terms of the activities the parents undertook with their children on a daily basis.

One significant finding: regularly reading to children is the best thing parents can do to foster the child's academic development. This stood out clearly from the survey results. Another finding was that the most important determinant of parental engagement was not the parents' employment but the child's age. It seems that parents need to be encouraged to remain engaged with their children as the children grew up.

Ideas for action largely centred on how to get messages about positive parenting practices across to parents. Suggestions often focused on maximizing the use of existing infrastructure. Post-natal classes could be encouraged, to teach parenting skills to new parents. Employers could support lunchtime programs on positive parenting. There was general agreement that the dissemination of knowledge and information was a legitimate and effective role of government. An information and outreach program would be an effective way to communicate the findings about good parenting that emerge from the NLSCY.

#### **E. Day-care and the education system**

The evidence presented at the workshop suggested that children benefited from particular types of care and from particular settings. The environment most often discussed was the child-rearing environment created by parents. But discussion also focused on the environments that children spend time in when parents are not available. The research suggested regulated care carried benefits for child outcomes over non-regulated care, and that these benefits are greater for lower-income households.<sup>3</sup>

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<sup>3</sup> A strong reservation concerned the child outcomes considered in relation to child care. It was argued that a number of key behavioural outcomes had not been examined, among them children's attachment - a key behavioural outcome in any consideration of the effect of home-based parenting versus child care. This could be an issue for analysis of the second wave of NLSCY.

If regulation is taken as an indication of child-care quality then extending regulation should improve the quality of day-care. Under some circumstances, day-care may substitute for, supplement or complement the care parents were able to provide. Children might profit from being in day-care if circumstances made it difficult for their parents to provide equivalent care at home. Specific groups of parents, such as those receiving welfare, might be targeted.

An alternative view, based on an assumption that the children of working parents would also benefit from such support, would see such care made universally available. All would benefit if the use of child-care is not stigmatized. An example of such universalism was the policy of low-cost day-care in Quebec.

Parental employment themes surfaced again, since participants believed that stressed parents did not make good parents. Parents might need support both inside and outside work in order to make their time with their children count. If not all time spent out of work was unreservedly positive for child outcomes (and evidence from families receiving welfare would support this), then parents may need some relief from parenting and caring duties on occasion.

Participants suggested, in other words, that children might gain from spending some time apart from their parents *and* from spending that time in a high-quality caring environment. Some evidence was quoted which suggested parents would agree. A Toronto-based study found that a majority of both working *and* non-working parents would support both longer school days and extending kindergarten.

Several questions remained about exactly what should constitute appropriate, regulated day-care available to all, and in particular about the care-to-education mix. Child-care services vary greatly. Resources, training, child/staff ratios and the relationships between caregiver and child have all been found important for child outcomes in different studies. Participants suggested that evidence concerning the most effective dimensions of parental engagement could be used to inform the care practices of day-care providers.

Even a generously funded child-care program could, however, still have access issues. Some of the lowest income earners need child care at unconventional hours, to cover shift and night work. Participants urged that resources for child care be made directly available to parents, to allow them to choose their own child care options, so that growth in child-care provision could respond to demand. Others were concerned that this might conflict with the supply of high-quality services. It was pointed out that child-care tax credits are currently only available to working parents.

A final concern over child care was jurisdiction. Participants felt that the distinction between child care and education in Canada led to an unhelpful federal/provincial split in responsibilities. They urged caution in promoting child care as an educational resource, if this leads to less federal involvement in a child-care policy that would benefit all Canadian children.

## 2.4 Conclusion

The NLSCY presents an important opportunity to study some of the most central questions in contemporary social policy. As more parents work outside the home, concern has mounted for the children who must be left in the care of others. On a daily basis, Canadian parents face the

conflict between their need to work for pay and their desire to be engaged in the upbringing of their children.

While much remains to be done, the papers presented in the “Parenting and Work” sessions are an important addition to the Canadian literature on these topics. The most important finding is that there is no clear relationship between parental work and child outcomes. That is, if parents choose to work, it does not follow that their children will be harmed. Indeed, for low-income families, regulated day-care outside the home may be better than other forms of day-care.

An area that needs further research is the effect of different working conditions on child outcomes. Participants in the sessions had several ideas for policies that would encourage the creation of working conditions that would be “family friendly.” These included generous parental leave policies, flexible scheduling of work hours, and on-the-job day-care facilities.

Participants made it clear that we need more dialogue between policymakers and employers. The papers presented in this session come from social scientists who speak a different language than employers. For most social scientists, “work” is represented by “weeks worked per year” or “hours worked per week.” For employers trying to compete economically, that characterization of “work” is needlessly crude. Jobs vary widely in the demands that they place on both employers and employees and any policies that try to make working “family-friendly” must take the needs of employers into account. Programs that ask employers to take actions that reduce the viability of their firms will not be readily adopted.

Some participants felt that the trend toward greater labour force participation by parents—especially by mothers – has tended to penalize mothers who wish to stay home. If parental engagement has a positive impact on child outcomes, and if parental engagement is related to the amount of time that parents have available to spend with their children, then parents should not be penalized for staying at home with their children.

The conflict between parenting and work is especially evident for low-income parents. Often such families have only one adult in the household. Since the trend in social policy is to encourage work by social assistance recipients, policymakers need to consider the effect on children of such policies. The finding in the NLSCY that regulated day-care leads to better outcomes for children in low-income families—and the observation that less than half of 4-year-olds from low-income families attend a regulated day-care program—leads to the call for generally available, high-quality subsidized day-care.

The value of research in these areas cannot be overestimated. Undoubtedly, some will continue to press for policies that subsidize work, either indirectly through child-care subsidies and tax code provisions or directly through in-work benefits. Others will press for the elimination of special treatment for working parents so that those who stay at home will not be financially disadvantaged. Research that measures the effects of various “inputs” to child development—including parental time, time spent in regulated care, various parenting practices—can only help policymakers as they balance these competing voices.

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### 3. Workshop 3: School

<i>Reporting organization:</i>	<i>Canadian Council on Social Development</i>
<i>Workshop Chair:</i>	<i>Doug Drew</i> <i>Centre for Education Statistics, Statistics Canada</i>
<i>Presenters:</i>	<i>Bruce Ryan</i> <i>Department of Family Studies</i> <i>University of Guelph</i> <i>Jennifer Connolly</i> <i>Department of Psychology, York University</i> <i>Clyde Hertzman</i> <i>Department of Health Care and Epidemiology University</i> <i>of British Columbia</i>
<i>Commentators:</i>	<i>Wayne Doggett</i> <i>Nova Scotia Education and Culture</i> <i>Jan Eastman</i> <i>Canadian Teachers' Federation</i>

#### 3.1 The Issues

In discussions about the state of children's learning in Canada, media and public attention seems to focus exclusively on the educational system—that is, the schools our children attend, their teachers and the boards that implement and maintain education policy. New research, however, shows that the hours a child spends outside of the classroom have a profound impact on the child's ability to learn, even before formal schooling begins. New research shows that we must take into account the impact of the child's family life, neighbourhood and teachers to improve a child's learning. We must extend the concept of education beyond the schoolyard and take a more inclusive, holistic approach. To do this, we must consider the following questions:

- How can families be supported to ensure that their children learn? What kind of activities can be taken to provide such support? Who would be the key agents?
- How can we improve children's neighbourhoods to have positive impacts on school outcomes? What factors in the neighbourhood should trigger interventions? By whom?
- How should policies and practices in schools and other institutions be amended to accommodate the stress of early adolescence and learning? How should support for boys be different from that provided to girls?
- What steps can be taken to ensure that all children have a positive school experience? How can we improve the academic performance of children with low-income families and parents with little education?

The determinants affecting a child's ability to learn are not limited to the classroom. Rather, the three papers based on NLSCY data presented at this conference show that a child's behavioural

and cognitive abilities are influenced by the neighbourhood in which the family lives, by personal and parental attitudes, and by expectations towards education and family functioning.

### 3.2 Workshop Themes

The research papers focussed on the following topics:

- Neighbourhood influences on children's school readiness;
- Family relationships and children's school achievement; and
- Links between personal attitude and parent/teacher support for school.

#### A. Neighbourhood influences on children's school readiness

Dafna E. Kohen, Clyde Hertzman, and Jeanne Brooks-Gunn, in their paper "Affluent Neighbourhoods and School Readiness", explored the relationship between neighbourhood factors and children's readiness to start school. NLSCY had included two indicators of school readiness: cognitive competence (receptive vocabulary) in children aged 4 and 5; and behavioural competence in children over the age of 2. The survey had also examined neighbourhood characteristics, particularly neighbourhood affluence and safety. The researchers looked at children ages 2, 3, 4, and 5, using Cycle 1 NLSCY data.

Children in the early age groups (2-3) are mostly too young to explore their surroundings on their own. For this reason, individual and family differences probably affect them more than neighbourhood characteristics. For children in the school-starting age bracket (4-5), neighbourhood characteristics can have important effects.

Children from unsafe neighbourhoods (characterized by littering, loitering, and fighting) and from neighbourhoods low in social cohesion (those where parents saw little cooperation or helpfulness among neighbours) were apt to have lower cognitive scores and more behavioural problems. This was also true of children from low-income families and children whose mothers had little education. Children from neighbourhoods with large numbers of lone-parent families were more apt to have poorer scores, because these neighbourhoods tend to be unsafe, not because the child is being raised in a lone-parent family.

Conversely, children from neighbourhoods with a high proportion of families with incomes of more than \$50,000 had higher cognitive scores, fewer behavioural problems, and better school-readiness. These findings complement American research, which has shown the benefits to all children living in a given neighbourhood in which 5 percent or more of its inhabitants are highly visible community leaders. Neighbourhoods with this proportion of community leaders have been shown to be more cohesive and therefore more likely to produce children better prepared to begin their formal education.

The authors call for investment in early childhood development, for programs directed at both the neighbourhood and the family, and for efforts to reduce the inequities between children in different socio-economic situations, including housing support.



## **B. Family relationships and children's school achievement**

Obviously neighbourhoods are not the only factors in a child's readiness to learn. Bruce A. Ryan and Gerald G. Adams, in their paper "How Do Families Affect Children's Success in School?", show that family dynamics exert a tremendous influence, both positive and negative, on a child's learning ability.

For too long, the authors explain, scholarly research and educational policy have regarded the family and the school as separate entities. Over the last 20 years, however, parents and educators have begun to recognize the link between these two complex systems, and have begun to call for more co-operation, communication and parental involvement in children's education. A better understanding of the relationship between these two worlds will help in improving children's educational outcomes.

The researchers developed their Family School Relationships model to explore the relationship between a child's personal and family characteristics and school performance. It groups characteristics in several levels that together affect a child's school performance. The first, or most central level is the child's own personal characteristics – for example, intelligence, skills, self-esteem, and ability to handle frustration. Next in importance are family characteristics, school-focused or general (general parent-child interactions, general family relations, personal characteristics of the parents). How willing are parents to help with homework? Can they provide educational experiences? What level of education do they have? What is the family's emotional health? Finally, the model considers exogenous social-cultural variables, of which socio-economic status is the most obvious.

The researchers found that a child's educational outcomes are most heavily influenced by his or her own personal characteristics. Nonetheless, parent-child interactions, whether school-based or not, can also influence a child's academic success. In addition, general family functioning, parental characteristics and socio-cultural values all exert influences to varying degrees on the child's success at school. Though different coefficients were found between boys and girls, the Family-School Relationships model is equally applicable to both sexes.

The family's socio-economic status, Ryan and Adams found, has a profound effect on the child's academic achievement because it affects virtually every aspect of family functioning. Low-income parents are more apt to suffer from depression and stress, which lead to poor familial interactions. Families higher in socio-economic status are more apt to seek social support and take steps to deal with family problems. They are also less apt to suffer from conflict, anger, and poor communication. Finally, they are less likely to engage in ineffective parenting behaviours, which negatively affect a child's academic skills and competence.

## **C. Links between personal attitude and parent/teacher support for school**

Children aged 10-11 are just beginning puberty, a period that can be stressful for them and their families. In their paper "Academic Achievement in Early Adolescence: Do School Attitudes Make a Difference?", Jennifer A. Connolly, Virginia Hatchette and Loren E. McMaster investigated the shift among three elements that affect children's academic performance: parental support, teacher support, and the child's own attitudes toward school. They looked at whether the

onset of puberty affects children's academic performance and attitudes, and whether boys and girls have different school attitudes and success.

The NLSCY collected data on children's academic success, their attitudes towards school, and the support they perceived from parents and teachers. Generally, the data indicated that children were doing well and felt that their parents and teachers were supportive. There were clear links between achievement and children's positive attitude toward school, support from teachers, lack of pressure from parents, and parents' own hopes for their children's achievement. Of these, children's confidence in their own abilities made more difference than did adult support. "This suggests that in early adolescence, children have begun to internalize the academic expectations and attitudes toward school to which they are exposed. In addition to the support they obtain from adults, their expectations begin to influence their achievement."

The children surveyed were pre-pubescent or at the very beginning of puberty; it is therefore perhaps too soon to tell what effect puberty may have on their school performance and attitudes. Some preliminary results suggest that pubertal children suffer a decline in self-esteem and report less supportiveness from their parents. Nonetheless, "few links ... were established in relation to school achievement" at this early stage.

In general, late elementary school appears to be a good fit for girls. Girls were more likely than boys were to report that their teachers and parents were providing support. Positive school attitudes had more impact on school achievement for girls than they did for boys. For girls, teacher support, parental support, and positive attitudes all contributed to academic success. For the boys, parental support was more important, and teacher support and positive attitudes had less impact on performance.

The authors call for studies of the factors that create a positive school environment for late-elementary students. Schools should foster a positive attitude in students, as well as good family attitudes and strong teacher support. While it is important to continue supporting girls in late elementary school, "boys are benefiting less from what school has to offer" and need more support, especially in internalizing positive attitudes about school. Care must be taken to balance the expected decrease in children's self-esteem and parental support, as children move into full puberty.

### **3.3 Ideas for Action**

Discussions arising from the research presented yielded a number of important themes and suggestions for improving children's education in Canada. While the themes were numerous, all shared a common thread: the need for better communication between the actors in a child's education, and better co-ordination of resources, both financial and physical. These themes are discussed below.

#### **A. The importance of research**

Good research promotes sound policies and programs. We need an extensive body of solid, reliable data for four reasons:

- to verify, substantiate, and confirm our perceptions of what works (and doesn't work) in promoting good outcomes for children;
- to establish program goals, guidelines and priorities;
- to integrate existing services and programs for improved delivery and administration; and
- to establish a common ground for all entities involved with children (for example, government departments and agencies, NGOs, unions, practitioners, etc.)

We must, however, keep in mind that the leap from research to policy to program can be a large one, depending on the amount of change needed. We cannot leap straight from a given research finding to a policy change. In proposing a particular change in policy, we need to articulate clearly why the change is needed, and we should consider carefully what the outcome of such changes might be in other areas. We should also remember that change takes time, and that results are not always immediately apparent.

We need to expand our areas of research. We should be including all children in research – Aboriginal children, for example. We should look at the diversity of children's needs. Have we examined the benefits of mixed-income communities? Do boys and girls learn differently, and if so, should they be in split classes in some programs? We should examine the impact of teachers as role models. Why are comparatively few men attracted to teaching? These are only a few of the questions that need further research.

Just as the themes to be discussed share a common thread, so do the papers from which the discussion arose. All three research papers recognized the complex interactions of school and family, both complex entities in themselves. In addition, all three papers recognized - from a number of different perspectives - the important influence of socio-economic status on children's educational outcomes. The CCSD hopes that the findings from these papers, combined with others using NLSCY data, will allow policy makers to form a portrait of children and families when considering the allocation of resources, financial or otherwise.

The importance of socio-economic status in affording a child the best opportunities to become productive, healthy members of Canadian society has been well-documented and is well-known. Children whose parents are better-educated and have higher incomes are more likely to succeed. Despite this, research presented by J. Douglas Willms shows an estimated 23 per cent of Canadian children are at risk of not developing their abilities to the fullest. Why is this so?

One major stumbling block has been the failure of legislators, community leaders and governments to articulate the extent of change that has occurred in Canada in recent decades. Changes to CHST (Canada Health and Social Transfer) and EI (Employment Insurance), as well as various reforms to education itself were undertaken without a clear understanding - public or bureaucratic - of why they were necessary. Although previous changes may have been based on sound research, it is conceivable that they were undertaken without a full understanding of why they were needed, or without giving consideration to possible ramifications in other areas not directly involved in policy changes. Rather than leading to a smooth transition in public policy, such wholesale changes in social and educational policy have led to criticisms within and between federal and provincial cabinets, from the academic community, from teachers and from

parents themselves. In the future, it is hoped that when devising policies affecting education (and, to an important extent, SES), policy makers will demonstrate a concerted effort at collaboration and co-operation.

## **B. Improving Communication Between Actors**

Criticisms of Canada's educational system, though vociferous, are not always entirely fair. Those charged with the task of improving the learning potential of Canadian children must first take into account that the majority of our children do learn to read, write, spell and do fractions. The majority of them also grow up healthy. While the public tends to view the school system as an amorphous, homogenous entity, this is simply not the case. Canadian teachers are, for the most part, dedicated, talented professionals who enjoy their work.

Unfortunately, not all areas of the country are as well-served as others, either with regard to good teachers, effective teaching methods or resources. In addition, poor or infrequent communication, either between provinces or boards of education, may have hampered the spread of innovative methods and information across the country. How, then, can teachers who wish to exchange and share new ideas, do so? How do we let teachers know they are doing a good job?

One response to both these questions is that provinces and school boards across the country make these strategies known in other jurisdictions. This is currently being done through in-service training, which allows teachers to devote an entire day to examining new approaches to matters relating to education. As teachers are often on the front lines of social and demographic changes, they possess a wealth of knowledge and experience which unfortunately, has remained in the classroom. This first-hand knowledge, when combined with data from surveys such as the NLSCY, would be useful in constructing sound educational reform. However, in-services and similar training forums have been among the first victims of cutbacks to provincial education budgets. Dwindling financial resources have severely restricted teachers' abilities to engage in activities outside the classroom. Opportunities must be found to let teachers share their experiences and knowledge.

## **C. An integrated approach**

Closely linked to improved communications between educators and policy makers is the need for more integration between actors in our children's education. As seen in all three research papers, a child's education begins before he steps foot in a classroom and continues after the final bell. Parents, teachers, community organizations and others all play a role in our children's education. To achieve lasting education reforms, an integrated approach, which acknowledges the role of each of these actors, should be adopted. Additionally, adopting a more integrated approach to program funding will help eliminate (or at least reduce) battles for funding within governments themselves.

With regard to a comprehensive plan for children and youth, the federal/provincial/ territorial National Children's Agenda and the National Children's Alliance (of non-governmental organizations) have much to contribute. The NLSCY itself can be one of the bases for such a plan, helping to inform Canada about future directions from a foundation of solid knowledge.

It is not simply the provinces' reduced education budgets which necessitate a new approach. Adopting a more integrated approach to program funding will help reduce battles for funding

within government departments. We must find ways of developing policies and delivering services that research shows will benefit children. Programs must have clear objectives, be supported by research and practice, and be closely integrated, in order to reduce overlap and gaps.

All those interested in children's well-being must move from criticizing each other's efforts to collaboration. Integrating reduces overlap among services and makes the most of scarce resources. Nova Scotia's Child and Youth Action Committee provides a good example. This committee includes a multi-departmental group of senior officials, plus community agencies, working together to develop a coordinated province-wide approach to child and youth services.

Programming should ideally give *all* children – not just the children of comfortable or privileged families—access to what they need for healthy development. While specific programs are needed for high-risk children, early intervention programs should be available for all children and their families. Drop-in neighbourhood centres for children and parents would be an example of this sort of program.

The federal government has to take a longer-term view of children's programming, making resources available for the long term (10 years or more) for such invaluable programs as the NLSCY itself. Participants suggested that the time has come for the federal government to get involved in supporting schools, as well as ensuring adequate high-quality child care and early childhood education.

#### **D. Schools and the community**

Participants noted a need for improved school-community relations. Parents need to be more engaged with their children's schools, something that could be fostered through activities such as curriculum nights, parent preparedness workshops, and the like. They must go beyond traditional parent-school committees and feel part of the school.

Schools could be community hubs, loci for parenting courses and for services such as child care. Already, in British Columbia, the school board area is the same as the health board area. Instead of being closed, under-utilized school buildings could be used as centres for community development projects. New schools could be located and planned as community centres, instead of being on the physical and social outskirts. This sort of integration could help make schools agents of community development and contribute to neighbourhood cohesion. Parents and other community members could run programs at these centres – a way of building not only cohesion, but also people's skills and self-confidence. This could be an invaluable experience for marginalized groups of parents such as recent immigrants or parents on welfare.

If we want parents to support children's education, they need to feel welcomed and at ease in their children's schools. We know little about how well parents are prepared to deal with schools. Are schools making a special effort to make parents welcome who might be marginalized or intimidated—for example, parents with little education, low-income and single parents, or recent immigrants? Schools might have a parent coffee room, for example. Participants suggested that schools present a “parent preparedness” program, with federal or provincial funding, to help parents feel comfortable with their children's school.

Schools must be involved with the community. Law enforcement officers would like to get involved with schools, starting with preschoolers. Schools should be working closely with municipal planners – for example, with Ontario Changes, child care organizations, and the like. We need to take an integrated approach to children’s issues, and schools are a logical place to bring together a wide range of programs.

Educators should be encouraged to share information, finding new approaches to make schools more effective and better integrated into their communities. This could be done through in-service programs and communication among boards and between provinces.

In Canada, the growing income gap between the richest and poorest groups in society has the potential to give rise to a new “two solitudes” culture, as it has in areas of the United States. An example of this is the rise of private schooling, which could pose problems for the public school system. Traditionally, middle-class parents have been the backbone of schools and their taxes are the basis for school funding. They have, of course, the right to send their children to private schools; that is a personal choice. But growth in the private-school sector could come at the expense of public education, risking a two-tiered school system in which public education deteriorates and in which children from poor families are socially and educationally marginalized. The federal government has a role to play in combating this potential problem.

### **E. Parent-friendly workplaces**

Especially for lone parents, parents in highly regimented industries, and parents holding down shift-work jobs, children’s school activities may be forced to take a back seat to work. If workplaces were more family-friendly, the results could make a considerable difference. U.S. surveys show that about 30 percent of the American workforce needs a few hours each week for family matters. Giving working parents the flexibility to spend this time with their children could have substantial long-term benefits. France and some Scandinavian countries now fund some workplace flexibility programs, sick leave, and family leave. Except for Quebec, Canada has failed to follow this example.

On-the-job literacy programs could have substantial payoffs for both children and their parents, since children from families with higher literacy levels do better in school. Programs like this could foster life-long learning, an essential part of adapting to the new global economy. Federal and provincial government could lead the way in this area.

### **F. Social cohesion: “It takes a village...”**

Growing up in a neighbourhood with poor social cohesion or social problems can decrease a child’s ability to learn. Using schools as community hubs, as discussed above, is one potential way of building community cohesion. What other factors affect neighbourhoods, and what are our options for making them better places for children?

What is a healthy neighbourhood? One in which people know each other, feel safe, and know that there are social and friendship support systems. Neighbourhoods with a socio-economic and cultural mix can help provide a “boost up” for disadvantaged children and help build tolerance, respect, and cohesion among different social groups.

More old-fashioned neighbourliness would do children and their families a world of good. Such social ties can grow up around community development projects that improve children's physical surroundings. Public parks, skating rinks and other recreational areas provide physical and intellectual stimulation to all young children and bring neighbours together. Too often, projects like these have fallen victim to budget cuts at the provincial and municipal level. As it now stands, a child's access to recreation and sports depends in large part upon his or her family's socio-economic status. This is yet another example of economic polarization and the growing disadvantages faced by lower-income families.

### **G. Boys at risk**

Most of the previous discussion concerned children of both genders. But we know from the research that boys are at greater risk of performing poorly in school as they reach puberty. Boys in early adolescence (between the ages of 10 and 12) demonstrate a marked decline in interest in their education, a downward trend that seems unaffected by teacher support or involvement. This problem is particularly evident among young Afro-Canadian boys in Montreal. A lack of role models for boys, both in and outside schools, may be part of the problem.

Participants suggested two ways to address boys' alienation from school. First, we need to find out why fewer men are going into teaching, in order to promote the recruitment of more male teachers in elementary schools. What is it about teaching that makes it an unattractive career choice for young men? Second, we need to find out what engages young boys' attention and energies, and bring those qualities and characteristics to the curriculum. The aim is to make school a place where boys *want* to spend their time.

### **H. The conditions necessary for good teaching**

Ensuring that Canadian children have the education they need to be productive, healthy adults depends upon four conditions, identified by a poll by the Canadian Teachers' Federation in April 1998:

- students' willingness to learn;
- teacher quality;
- parental involvement; and
- time spent by teachers with students

Obviously these require the involvement not only of good teachers, but also of parents and students as well. Since children's ability to learn depends on their surroundings, we should create environments at home and at school that are conducive to good teaching. A number of points need consideration:

- We need to make good schooling universal, so that parents will not feel a need to send their children to private schools.
- Curricula should include not only the basics but art and music as well.

- Curricula should also reflect our cultural diversity.
- We need to give special consideration to immigrant children who have not yet learned English or French.
- Student evaluations should not be based on administrative priorities, but on the student's own needs.
- Reducing class size may have comparatively less effect on improving performance, although it may be more important for the lower grades, which should have a maximum of 15 students (Nova Scotia has a class size reduction project in these grades).
- We need high-quality assessments of students in order to provide feedback on policy impacts.

### **I. Supporting low-income families**

Children from low-income families are notably at risk for poorer school performance. Income inequalities probably have more of an effect than income itself, a factor that becomes more important with the growing income gap in Canada. We also have to consider the differences between long-term poverty and temporary poverty.

We need income supplementation, education and training, jobs, and child care to reduce the problem of poverty in Canada, and the threat it poses to child outcomes. We need to discuss how best to use funds in the Employment Insurance program (formerly Unemployment Insurance) to foster child and human development, instead of a payment to people who are out of work.

Finally, we need to discourage segmentation of communities by income and to encourage policies directed toward inclusive housing and community development.

## **3.4 Conclusions**

The Canadian Council on Social Development, which drafted the report for this workshop, has a mandate to advance economic and social security for all Canadians. Much of its work is in the area of family income and income support programs. The CCSD believes that in a country as rich as Canada, people need more than the bare necessities of food and shelter. For children, this means equal access to such amenities as recreation and cultural activities. Above all, children need family economic security. It is in Canadian children's interests that governments at all levels act to give all children equal life chances, regardless of their family's socio-economic status.

The CCSD believes that the federal government's most important role in the well-being of children is in the area of income security. It is clear from this workshop and others that poverty affects every aspect of a child's life, academic achievement included. Any action the government takes to ensure the economic security of Canadian families can only have a beneficial effect on child outcomes on all fronts.

The federal government should consider using part of EI funds to promote and support flexible work arrangements, as a number of European countries have done. We should not penalize



parents who want to spend time with their children. Any federal action in this area should consider the needs and positions of employers and educators.

We need an interdisciplinary, holistic approach to social and educational policy, one that integrates services and reduces competition, duplication, and overlap in the delivery of services, if we want to achieve lasting improvement in Canada's education system. Unfortunately, our record in this regard is poor – witness the implementation of reforms to Canada's EI system in the middle of a severe recession. Single, targeted interventions can be disruptive in the short term and ineffective in the long run.

Before enacting any future legislation, the federal government should consult all stakeholders and consider the possibility of unintended outcomes in other areas, especially education. Better communication and a more integrated approach by all levels of government could make the process of instituting these changes run more smoothly, and would be less damaging to families and children.

To sum up, participants called for a number of actions to support Canada's school system and to promote good school outcomes for children:

- carrying out more research, as a basis for sound decision-making;
- closely linking research with policy;
- taking an integrated approach that involves all stakeholders in the school system;
- taking the long view and committing adequate resources;
- establishing schools as community centres;
- promoting parents' involvement in schools;
- supporting public (vs. private) schooling;
- creating family-friendly workplaces;
- promoting cohesive, supportive neighbourhoods;
- addressing pubescent boys' alienation from school;
- creating the conditions that children need to learn; and
- supporting low-income families, whose children are at high risk for school problems

Only government has the infrastructure to address these needs. One of the federal government's roles is in conducting the NLSCY itself. Good data is the first step in shaping public policy. Participants in the workshop strongly endorsed both the NLSCY itself and the use that HRDC's research program had made of the data.

Among industrialized countries, Canada has an extremely poor record of providing high quality affordable child care. Providing equal access to high-quality child care in all provinces and territories would go a long way toward ensuring that all children enter school with the grounding they need to learn. Parents need this support in order to work, giving their children a stable economic situation.

The federal government should work with municipalities to provide more affordable housing, in order to reduce the growing economic polarization of neighbourhoods in Canadian cities. Affluent neighbourhoods offer advantages to children of all income groups. In future, zoning laws and urban development projects could be designed to encourage the creation of more economically integrated neighbourhoods, which would promote more safety and cohesion. We need a renewed federal commitment to public and subsidized housing, particularly in urban cores that have borne the brunt of suburbanization.

We know that children who do poorly in school show a greater likelihood of having social, emotional, and behavioural problems in adulthood. Turning a blind eye to these problems will cost our society dearly in 20 years' time. If schools, communities, governments, and individuals can work together to enhance our children's learning, we can expect a wide range of payoffs in the long term. Our investment must, however, be based on accurate information and sound, integrated federal/provincial policy.

## 4. Workshop 4: Community Influences

<i>Reporting organization:</i>	<i>Laidlaw Foundation</i>
<i>Workshop Chair:</i>	<i>Jean-Pierre Voyer</i> <i>Applied Research Branch</i> <i>Human Resources Development Canada</i>
<i>Presenters:</i>	<i>Michael H. Boyle</i> <i>Centre for Studies of Children at Risk</i> <i>Chedoke-McMaster Hospital</i> <i>David DeWit</i> <i>Social Evaluation and Research Department</i> <i>Addiction Research Foundation</i> <i>Yvonne Racine</i> <i>Centre for Studies of Children at Risk</i> <i>Chedoke-McMaster Hospital</i>
<i>Commentators:</i>	<i>Kathy Flanagan-Rochon</i> <i>Health and Social Services, Government of PEI</i> <i>Leslie McDiarmid</i> <i>Better Beginnings, Ottawa</i>

### 4.1 The Issues

Although in theory, we know that children's surroundings are important to their well-being, the influence of neighbourhood on child development has received less attention than individual, child and family characteristics. Yet it is clear that moving from one community to another can affect child development and even cause behaviour problems, by weakening the child's emotional attachment to school, church, and community.

We also know that an enriching environment and a wide range of experiences furthers child development. Unfortunately, many children lack such supportive environments; children who most need sports, arts, and community programs are often the ones least likely to get them.

Some neighbourhoods have a high proportion of children with problems. This may result from the neighbourhood's own inadequacies or from a higher-than-normal concentration in the neighbourhood of families with multiple problems. Though the causal relationships are not clear, it is likely that both of these contribute to the problems. Regardless of the source, these neighbourhoods need resource allocation and policy interventions.

We need to answer some key questions:

- What can be done to make communities better places to raise children? Who are the key players? How can they work together?
- How can we provide stability and consistency in children's lives, as well as healthy variation and stimulation in schools and neighbourhoods? What role should professionals take? The family? Social institutions?

- How can we affirm the role of culture and recreation in child development? What policies and programs could help ensure that all children have a chance to excel, to express themselves, and to reach their full potential?

## 4.2 Workshop Themes

Presenters focussed on the following areas:

- The effects of neighbourhood on child development (presenter: Michael Boyle);
- The effects of moving on child behaviour (presenter: David DeWit); and
- Children's participation in sports, the arts, and community programs (presenter: Yvonne Racine).

### A. The effects of neighbourhood on child development

In “Do Places Matter?”, Michael Boyle and Ellen Lipman examine NLSCY data to explore whether the neighbourhood in which a child lives may affect the child's development, adjustment, and outcomes. The study aims to answer the question: which influences childhood behaviour more strongly: the characteristics of the child's family (e.g., household poverty) or the characteristics of the child's neighbourhood (e.g., the proportion of families in the neighbourhood who live in poverty or are lone-parent families)?

In spite of strong theoretical arguments that children's surroundings are important, the influence of neighbourhood has been studied less frequently than individual, child and family characteristics and peer group pathology. For example, several studies have found that children living in low-income families with poorly educated parents tend to exhibit a higher prevalence of emotional problems, poor academic achievement, and behavioural problems.

Boyle and Lipman's study concluded that the strongest predictors of child problem behaviour were: lone-parent family status, low socio-economic status (income, level of education of respondent and partner, prestige associated with occupation of the respondent and partner) and the concentration of lone parents in the neighbourhood. The researchers found that the characteristics of the neighbourhood by itself seemed to have less relationship to child outcomes. Characteristics of the family and the child account for more variation than do neighbourhood characteristics.

The authors conclude that programs aimed strictly at addressing socio-economic deficits may have limited impact on the behavioural outcomes among children. Remedial programs should focus on families, not neighbourhoods, and should target lone-parent families in particular.

### B. The effects of moving on child behaviour

In “What Does Moving Do To Your Children?”, David DeWit, Dan Offord, and Kathy Braun explore the relationship between household moves and children's behaviour, using Social Control Theory (Hirschi, 1969) as an explanatory framework. Social Control Theory (also called Social Bonding Theory) posits that problem behaviours occur when a child's attachments to important agents of socialization (or social control) are disrupted or broken.

The DeWit, Offord, and Braun study hypothesized that frequent and recent household moves increase the likelihood of problem behaviour among children, by weakening their parents' ability to supervise and discipline them and by disrupting their attachments to family, school, church and community. Identifying the mechanisms by which relocation influences childhood behaviour would allow us to develop effective school and community programs to deal with these children.

The study found that frequent geographic moves had a negative impact on a wide range of behavioural outcomes for all groups, except for children who exhibited anti-social behaviour. Compared with non-movers, children who had moved three or more times in their life experienced a two- to threefold increase in the risk of childhood problem behaviours. On the other hand, children who had moved only once or twice showed almost no difference in risk. If the move was recent, children were apt to have fewer significant relationships. Frequent moves were, however, less important to problem behaviour than factors such as living arrangements, family socio-economic status, and the nature of the neighbourhood.

Overall, multiple moves weaken children's attachments to family and school, and this in turn heightens the risk of behavioural problems. These results tend to support the common view that frequent moving intensifies risk factors that already exist in the family. An alternative explanation is that frequent family moves are simply a "marker" for highly stressed or dysfunctional families. (Of course, some families relocate frequently because the parents' work or profession involves high mobility; the armed forces are a case in point.)

The study suggests the need to revise mental and physical health screening and intake forms to include questions on family relocation history, and to provide treatment and prevention programs for at-risk children.

### **C. Children's Participation in Sports, the Arts, and Community Programs**

In "Which Children Don't Participate in Sports, the Arts and Community Programs?", Dan Offord, Ellen Lipman, and Eric Duku found that these activities fail to reach large numbers of children. Over two-thirds of children aged 6 to 8, were reported to have "almost never" participated in programs in the past year. With the exception of the arts, girls were less apt to participate in these programs than boys were. Because the data are cross-sectional, the study could not establish causal inferences between the rate of low participation in sports, the arts and recreation programs and the rate of child psychosocial problems.

In general the children who need these programs the most are the ones least likely to get them. Rates of participation vary directly with income level: the very poor were most likely to report that children "almost never participate" in these activities, while the well-off were most likely to be involved. Current municipal preoccupations with finances mean that all too often, programs are targeted to children and families that are the easiest to reach. The authors doubt that municipal recreation has the will to get things right for socially and economically disadvantaged children. They call for community-based voluntary organizations to work with high-risk children and their families.

If we agree that children benefit from participating in sports, the arts and community programs, then unequal participation rates in different subgroups of children should be a concern. Initiatives in sports, arts and community programs should be judged by their ability to attract high-risk

children, particularly children from poor families. Universality in sports, the arts and community programs must have three characteristics: equal access, equal participation, and equitable outcomes. Such programs need to be monitored to determine their outcomes. In addition, we need further studies to determine how to reach high-risk groups.

### 4.3 Ideas for Action

Presenters and participants both expressed strong concern about the limitations of the preliminary data presented at this session on community influences. Cross-sectional analysis of the data suggested that none of the factors in question – quality of neighbourhoods, family socio-economic status, or number and recency of moves – could adequately explain poor outcomes for children. Participants firmly expressed the requirement that programs and policies be based on Canadian values of social and economic justice.

Making a neighbourhood a good place to raise children requires both motivation and resources. It is comparatively easy to identify neighbourhoods with lower-than-average resources and income and higher-than-average numbers of lone-parent families, especially mother-led single-parent households. Low-income families and neighbourhoods have been hit hard by cuts to disposable income and services, as earnings have decreased and government income transfers have been slashed. What is particularly distressing is the lack of public outcry, as the poor and marginalized are abandoned to advocate on their own behalf.

Participants identified the following ideas for research, program and policy action:

- accessibility to stable, affordable housing;
- overcoming barriers to recreational programs; and
- mobilizing communities and neighbourhood stabilization

#### A. Accessibility to Stable Affordable Housing

Community workers dealing with families in social/public and rental housing report that frequent household moves are often associated with the following factors:

- the family's inability to pay rent;
- out-of-home foster care placement;
- domestic violence;
- loss of primary caregiver due to illness or death;
- marital separation and divorce;
- parent's new job; or
- school expulsion

Many participants did not find it surprising that low-income lone parent families tend to concentrate in certain areas. An effective intergovernmental social housing policy, involving the federal, provincial, and municipal governments, could help create more mixed income neighbourhoods. In Ottawa, for example, subsidized housing is distributed throughout the city and single-parent households are not concentrated in large blocks.

Many participants noted a contradiction between government policies that claim a commitment to children's well-being and the lack of any policy to provide accessible, affordable permanent housing for low- and moderate-income families. Between 1993 and 1996, urban poverty has risen sharply. In Edmonton, the Food Bank reports that 73% of its users are paying more for accommodation than they receive in shelter allowance and that 56% do not have a telephone. Moreover, in recent years the responsibility for social and public housing has shifted to the provinces/territories and municipalities. The result has been an increased burden of suffering for children. We need federal initiatives to support co-op housing, which has a wide and well-established record of building and revitalising community.

School closings have a profound effect on urban neighbourhoods. A neighbourhood's school is a physical centre, a hub from which a variety of programs and services can be extended. Schools must not be limited to a single user group. Continued public support for public education is also critical to the preservation of neighbourhoods.

Neighbourhood stability matters. Neighbourhoods with low turnover and stable tenancies also show more stakeholder commitment to neighbourhood security and social development. The sense of safety and security in turn stabilizes households and reduces family stress. Low income and immigrant residents need to be educated about their rights as tenants. Residents who see themselves as long-term tenants or householders are more likely to establish relationships with neighbours and take an interest in the well-being of neighbourhood children.

On the other hand, families that are constantly uprooted are likely to fail to set roots in their communities, for fear of being uprooted again, or simply because they are so stressed that they have little energy to invest. They are unlikely to commit to neighbourhood and community development.

In a dynamic labour market people are changing jobs all the time and therefore moving on a regular basis. Governments encourage mobility, particularly in response to high regional unemployment. Families are not given much choice. An apparent conflict would seem to exist between national and regional labour market and child best-interest strategies. An example: in rural areas of Alberta, where job opportunities are scarce, local authorities have threatened to reduce or stop benefits to families receiving social assistance. Many of these families have been forced to move to the cities and live a transient life, with little stability and few connections.

It is important that we recognise the costs and penalties to children of a labour market that emphasises mobility. Children's interests are rarely factored into cost-benefit analyses of labour market strategies. Mobility weakens social control and bonding for children. Can we quantify the burden of suffering and the cost of remediation to assist children and families with the difficulties associated with moving?

While multiple moves are characteristic of military life, most military housing and facilities are at least standardized and the military recognizes the problems and provides support for families. Family resource centres work actively to help families with their move. Support for relocating families helps parents find out what resources (e.g. resource centres and referral agencies) exist in the new community before they move. Children have an opportunity to ask concrete questions. The literature suggests that there are still high rates of mental health problems associated with moving, but that the burden of suffering on the children and youth is reduced through outreach, sensible planning, and pre-move visits. Some research has been done on the impacts of programs for children of transferred executives. Most of this information is anecdotal and results are mixed.

Some moves are especially traumatic to children, for example moving as the result of family violence, family breakup, or the arrival of a new sibling or family member. Frequent or long-distance moves are more disruptive, but short-distance moves may be the result of family breakup or a job change. The effects of moving also vary with age: children under seven and adolescents are particularly vulnerable.

The Canadian Mortgage and Housing Corporation (CMHC) is engaged in a family violence program to provide shelter enhancements for victims of family violence. Shelters are being located closer to neighbourhoods to reduce disruption for family and child networks. Transportation arrangements/subsidies must also be considered to enable children to stay in the same school.

The frequency of moves and the resulting harm to children in foster and group care who are being shunted about must be addressed. Children who have been abused tend to be moved around more frequently in the care system and are more likely to demonstrate academic underachievement. Our most vulnerable children are often forced to relocate to new schools with some frequency. Open boundaries for school registration on a city-wide basis would offer greater stability to children and youth bounced from placement to placement. Children who are placed in care also need to retain links to their communities of origin.

The NLSCY did not survey children on reserve, and in general, Aboriginal children are underrepresented in the survey. Sixty percent of aboriginal children do not live on reserves. Native Friendship Centres are thought to be doing a good job in helping Aboriginal households with their resettlement in the urban community. But there is no information on how many urban Aboriginal families and children turn to Friendship Centres for support.

## **B. Overcoming Barriers to Recreational Programs**

Participants drafted the following declaration: “Each child must be given multiple opportunities to shine, to express him/herself, to demonstrate competence. Children must be given the opportunity to develop their innate talents and potential in non-school settings. Accessible cultural and recreational opportunities should be a universal entitlement for all Canadian children.”

Children from low-income families face a formidable list of barriers to their participation in sports, arts, and community programs: registration fees, the cost of sports equipment, materials and uniforms, the lack of private transportation and the costs and difficulties of public



transportation (when it exists). In addition, gender, immigrant status, and physical and mental disabilities can restrict children's involvement. Working parents may be unable to take time off to transport children to activities. Parents who do not feel that they are part of the community are less likely to encourage their child's participation in community programs.

Public schools which previously provided universal access to all children have cut back their sports, cultural and recreation programs. Participants felt very strongly that these policies need to be reversed. Schools are a site of children's attachment. Activities need to be child-centred. Programs must offer more than skill development.

Broad recreation policy is generally set at the provincial level, yet it is the municipalities that determine the recreation programs offered in their own communities. Participants noted that in the past year in Ontario, the devolution of public housing to municipalities has resulted in significant cuts to recreation budgets in public housing. These programs had been supported by the provincial housing ministry. In Toronto, the municipal recreation department has not picked up these costs. While these budgets have been slashed, the city has found money to increase the number of security staff in public housing projects.

The Toronto City Council is currently reviewing recreation user fees in an effort to harmonize fees across the recently amalgamated municipality. Instead of beginning with a broad social development plan, one that would put recreation in its human and social development context and assure broad accessibility and stability, the city has opted to focus on revenue flows from user fees. Fees from permits or increases to the property tax base are not being discussed. In taking this approach the Council acts contrary to Dr. Dan Offord's findings.

According to Offord, municipal recreation programs generally do not report to the public on access and participation rates. Nor do they seem to be interested in equality of outcomes. For example, the former City of Toronto, with its "no recreation fees" policy, collected the municipal addresses of recreation users at registration yet did not undertake any analysis of the postal codes to assess who is participating. Outreach efforts are generally not evaluated.

User fees charged by municipalities in Ontario could probably be eliminated by a provincial transfer to municipalities of under \$140 million. Instead the Ontario Government recently made a commitment to allocate \$100 million annually, a relatively small percentage of the revenues from gaming, to the Trillium Foundation to disburse in the areas of building community capacity in social development, the environment, the arts and recreation.

Participants asked whether municipal recreation programs should be universal or targeted to the so-called "at risk"? Does this make for programs that are segregated or judgmental? Participation depends on a sense of inclusion. Labelling children "at risk" in order to get access to subsidies decreases their self-esteem. No one wants a handout. On the other hand, young people themselves often use blunt labelling language to describe the social divisions within a neighbourhood, assigning other youth to various social categories (e.g., hicks, jocks, nerds, dirty people, skids, etc.)

Many YMCAs and Boys and Girls Clubs have successfully used youth workers to connect with disaffected youth. Youth are given opportunities to increase personal sense of pride. Continuity

of funding and staff has contributed to the positive outcomes. One identified outcome to date has been a reduction in vandalism in these communities.

“When children participate and gain skills in the sports and the arts, not only is their present life quality enriched, but there appear to be long term benefits extending into adult life.” We need to ensure that programs are of a high quality, tied to child development goals and strategies and are attractive to all children and young people. A national promotion campaign featuring star athletes and artists endorsing the joy of sports and the arts should be considered.

### **C. Mobilizing Communities for Healthy Families and Children**

What is a good neighbourhood? A good neighbourhood is one in which neighbours know one another, recognise and care about other families, and connect to families with children. Good neighbourhoods provide children with such necessary blessings as good schools with caring teachers, varied and accessible recreational opportunities, and people who are ready to volunteer.

A good neighbourhood has well-maintained parks and safe space for both active and passive play. It has architecture on a human scale that encourages people to engage in front- and back-porch socializing. Its streetscapes are physically appealing, comfortable, and safe to walk. Studies have shown that in New York neighbourhoods that had undergone major property rehabilitation and an increase in neighbourhood security, the homicide rate dropped.

A good neighbourhood is outreaching and inclusive. Schools and parent associations need to make a particular effort to reach families who have recently moved into the neighbourhood. Neighbourhood organizations need to understand and accommodate parents (many of them low-income) who cannot come out to public meetings because they cannot afford to take time off work. Such a neighbourhood focuses on building connections between individuals (particularly for new residents and young people), families and groups rather than on making referrals. It recognises that it is not families and children that are hard to reach. It is often the services that are inaccessible.

Intergenerational activity and reciprocity is one mark of a good neighbourhood. One example that was cited was PROJECT L.O.V.E. (Let Older Volunteers Educate), a program in which seniors provide children with 5-10 minutes of reading support on a regular and sustained basis.

We need to create environments where children are valued. The community must find the means to engage everyone in the community, including all public systems players, in order to improve children’s futures. Schools should work harder at keeping children in school by identifying what each child is good at. The number of school expulsions must be reduced.

Bedroom communities outside large urban areas often lack any real community infrastructure, and young people have too little to do. Special youth advisory councils are needed to identify ways of developing civic neighbourhoods. Youth should be encouraged to come together to identify issues and barriers and propose solutions. For example, at Sudbury’s Better Beginnings site, young people created a wall of helping hands and placed it in a local park. This activity helped to build spirit and a sense of ownership by the local youth and has led to the creation of a Youth Advisory Council.

Family resource centres/networks have demonstrated that they can play an important role supporting families who are new to the neighbourhood. Family Resource Centres need to be actively promoted and to receive on-going public support. For example, a network of community resource (health) centres exists in Ottawa. Community organizers from each centre go out into the community, working with residents to identify issues, build networks, and address social concerns.

Participants recounted lessons they had learned from the Healthy Communities Movement. Each Healthy Community had to work at making its neighbourhood friendlier. What works? Story-telling was one way to engage children and young people. People who make a difference to the neighbourhood, identified through an open nomination process, were celebrated and recognized.

Individual municipalities have examples to offer. Montreal's 1-2-3 GO program, supported by Centre-Aide and other funding partners, promotes the wellbeing of children. In 1-2-3 GO, neighbourhoods mobilize the whole community to provide children with a caring environment. Local parents and residents establish programs using whatever skills they can bring to bear. The community works to identify and make people aware of child development values. Children come to learn that people care about them.

In Vancouver, the community development of neighbourhoods has been decentralized. In some communities, business organizations have become partners with local social organizations and have promoted neighbourhood activity, although in other neighbourhoods businesses have not been engaged.

A former municipal councillor identified ways to approach municipalities to get these concerns heard. Interested parties should contact:

- the Federation of Canadian Municipalities;
- municipal associations in each province;
- the Healthy Communities Network; and
- public housing authorities.

## 4.4 Conclusion

### A. Accessibility to Stable Affordable Housing

Affordable housing is a critical public policy issue. But federal and provincial governments however have stopped funding social housing. Private market accommodation tends to be more expensive and of poorer quality and offers less security than subsidized non-profit housing. *The Progress of Canada's Children 1998* reports that more young and lone-parent families feel vulnerable to housing problems. The federal government must provide national leadership if we are to meet our international obligations.

## B. Barriers to Recreation

Canada is failing to provide healthy environments for all of Canada's children. Extracurricular and non-school activities are not really "extras" but the keys to keeping a young person motivated and interested in school activities (Search Institute). Recreation promotes healthy development, physical and mental health, resiliency, and a sense of involvement and self-worth.

Youth serving organizations can be critical to young adolescents learning the skills and developing the confidence they need to enter the adult world. While a community cannot compensate completely for a lack of a young person's personal assets, it can - and does - have a positive impact on those youth who are most lacking the kinds of internal and family supports that nurture healthy development." (Carnegie Corporation)

Yet by imposing user fees and failing to reach out to the groups that most need these programs, municipal governments are turning away the very children and youth that these programs are so well equipped to serve.

Several policy-research and program interventions HRDC might consider:

- We need comprehensive surveys to assess opportunities (types of recreation and their availability), participation, costs, and other factors affecting accessibility to active physical activity, including sports, dance, outdoor activities, etc.
- More youth are holding down part-time jobs and parents are working longer hours. What are the implications for recreation programming? Are these trends having a deleterious affect on participation rates for some groups?
- An alarming decline in physical activity among children and youth has been reported in recent national health surveys. Two-thirds of Canadian children are not physically active enough. Television, video games, movies, and the new information technology are likely to make the situation worse.
- Very little research has been done in Canada on the effects of participation in informal and organized recreation.<sup>4</sup> We need to determine the effects of these activities on attitudes and habits of effective citizenship. Do they, in fact, help instil tolerance and appreciation of others, self-discipline and commitment to education?
- We tend to see arts programs for children as a frill. Yet imagination, inspiration, creativity and ambition are essential skills for today's workplace. Arts programs promote cognitive development, alternate ways of thinking, and students' motivation and engagement in school. Music and dance performances help create a team spirit and social bonds.<sup>5</sup> A recent U.S. study<sup>6</sup> shows that student involvement in the arts is linked to higher academic performance, increased standardized test scores, more community service, and lower drop-out rates,

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<sup>4</sup> Bruce Kidd and Peter Donnelly, Faculty of Physical Education and Health, U.Toronto

<sup>5</sup> Ontario Arts Council, 1997. "Making the Case for Arts Education." Toronto.

<sup>6</sup> James Catterall, 1998. "Involvement in the Arts and Success in Secondary School," *Americans for the Arts Monographs*, 1(9).

regardless of the economic status of the students surveyed. A similar survey should be carried out in Canada.

### **C. Mobility and Family Instability**

Having to pay too much of their income for housing, coupled with employment insecurity, put many families under acute stress. Combine this problem with changes in family structure resulting from separation or divorce and it is hardly surprising that many families must keep moving household.

A recent U.S. study<sup>7</sup> concluded that disruptive events during the high school years (e.g., family breakdowns or changing schools) affected school attendance and participation in the short term and college entry in the long run. Children and youth who undergo these experiences need to be helped to stay engaged and active in school. They may need more help with the costs of post-secondary education. A similar study might be conducted by the NLSCY in future.

Labour market mobility is a cornerstone of Canada's macro-economic development. Wealth creation, competitiveness, manpower training, trade, attraction of foreign investment, and the portability of employment insurance, health care insurance and social assistance are all elements of this policy. This trend fails to take into account children's need for stability, security, and continuity in their daily lives. The NLSCY should explore this issue further.

### **D. Mobilizing Communities for Healthy Families and Children**

We know that consistent, stable, and caring relationships with adult figures, both inside and outside the family, and close peer relationships are major protective factors for children and youth (Jenkins/Keating). Schoolchildren are not autonomous. They need to be supported and given opportunities to form and maintain lasting relationships. Sports, arts and recreational programs give them a chance to build and maintain lasting, healthy peer relationships. These programs rely on such sites as community schools, playgrounds and parks. Budget-cutting measures like closing neighbourhood schools not only cripple these programs, but put stress on community cohesion. Extracurricular activities are not universally available, nor are they compulsory in provincial school systems. Local government and non-profit structures cannot offer this kind of programming during non-school hours.

Neighbourhood safety and security is critically important. The theme of a recent meeting of North American Police Chiefs of large urban communities was "Fight Crime—Invest in Kids." Community safety councils throughout North America have made it clear that one of the most important ways to address the root causes of crime at the neighbourhood level is to provide social and recreational programs, especially for young people and other high-risk groups. A recent Toronto Task Force on Community Safety reported:

The hallmark of parks and recreation programs must be accessibility, potential to reduce social distance between groups, cultural appropriateness, and effective collaboration. Accessibility must include the need for programs to be financially accessible to those members of our communities most at risk, the need for facilities and programs to be

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<sup>7</sup> University of Wisconsin at Madison, Institute for Research on Poverty, 1998. "Disruptive Events During High School Years and Educational Attainment."

accessible to those with disabilities and differing levels of independence, and the need for programs to be geographically accessible to those most in need.

HRDC should look for opportunities to work with the National Strategy on Community Safety and Crime Prevention, the Federation of Canadian Municipalities, The National Association of Chiefs of Police, and the Canadian Recreation Association, in order to document and evaluate best models of practice.

## 5. Workshop 5: Health

<i>Reporting organization:</i>	<i>Canadian Institute of Child Health</i>
<i>Workshop Chair:</i>	<i>Phyllis Colvin</i> <i>Health Canada</i>
<i>Presenters:</i>	<i>Virginia Caputo</i> <i>Women's Studies, Carleton University</i>
	<i>Mark Rosenberg</i> <i>Department of Geography, Queen's University</i>
	<i>Satya Brink</i> <i>Applied Research Branch</i> <i>Human Resources Development Canada</i>
	<i>Sarah Connor</i> <i>Applied Research Branch</i> <i>Human Resources Development Canada</i>
<i>Commentators:</i>	<i>Lynn Vivian-Book</i> <i>Health and Community Services</i> <i>Government of Newfoundland and Labrador</i>
	<i>Graham Chance</i> <i>Chair, Canadian Institute of Child Health</i>

### 5.1 The Issue

The health and well-being of children and youth in Canada is a federal priority. The NLSCY gives us an overview of the state of Canadian children's health and allows us to draw some preliminary conclusions about factors affecting their health. The good news is that most of Canada's children enjoy good health. This does not, however, mean there are no problems.

For children, a healthy start is a key element of development. Health also interacts in complex ways with individuals' opportunities and choices throughout their lives. It is therefore important that we ensure that children—regardless of age, sex, household income, or place of residence – are healthy. We need to understand the factors that promote children's health and those that put them at risk.

Key questions remain.

- What can we do to maintain the good health of children?
- What can we do to ensure that all Canadian children have good health outcomes?
- How can we minimize the risk factors; or, if children are exposed to risk, how we can maximize protective factors?
- Less obvious, less well-understood factors, linked with social, economic, and political factors, can affect children's health. Do these factors affect child health outcomes? If so, why, and to what extent? And what can we do about the problems?

In responding to these kinds of questions, workshop participants called for action from governments, communities, families, and children and youth themselves. In short, they challenged us to see child health as a high priority for all Canadians.

## 5.2 Workshop Themes

Research presentations focused on the following areas:

- Gender differences in behaviour and health outcomes (presenter: Virginia Caputo);
- The health of immigrant children (presenter: Mark Rosenberg);
- Universal health care and children’s health outcomes (presenter: Satya Brink); and
- Smoking and alcohol consumption during pregnancy (presenter: Sarah Connor).

### A. Gender differences in behaviour and health outcomes

In their paper “Growing up Male and Female in Canada,” Virginia Caputo and Katherine Kelly report that physical health is generally high with no reportable differences among 4- to 11-year-old boys and girls, based on data from the NLSCY. Gender differences emerge only in emotional and behavioural domains.

As early as Grade 1, relationships with teachers become less positive for some boys. Few differences emerge in learning and literacy between boys and girls in the NLSCY, although girls are more likely to be doing “very well” in reading, written work and in school overall. Girls and boys in the NLSCY do not differ in their reported mathematical ability.

Boys aged 4-11 are more likely to watch programs and films that include violence. They are more likely to engage in organized and informal sports and to play video games. Girls in this age group are more apt to read for fun and to take art, music, or dance lessons. Both genders watch the same amount of television, spend the same amount of time in solitary play, and are equally likely to go to camp.

Although most children in the 4-11 range are not identified as having behavioural problems, NLSCY respondents (usually the mother, sometimes the father or other) report that boys are more likely than girls to behave in destructive, violent or anti-social ways. Boys are more likely to experience problems with learning and literacy. The majority of boys and girls do not have friends that “get into trouble”. However, 8- to 11-year-old boys are more likely to have friends who get into trouble than are girls of the same age. NLSCY informants report that girls are more likely to exhibit pro-social and empathetic behaviour than boys.

### B. The health of immigrant children

Audrey Kobayashi, Eric G. Moore, and Mark W. Rosenberg investigated the health of immigrant children and children of immigrants, as well as immigrant families access to social services such as health care. Their paper “How Healthy are Immigrant Children?” also examines access to informal and formal supports and how these might be affected by the particular social, economic, and cultural circumstances of different immigrant families. NLSCY data indicate that immigrant



children are in excellent health, a consequence of the selection process, and are supported by family, friends and professional services. It is important to note that this finding cannot be applied to refugee children, who may have physical and/or emotional problems upon arrival. The NLSCY includes only a relatively small sample of immigrant children. Still, a few additional points can be made.

The NLSCY data indicate that the majority of immigrant children (over 90% of those in the NLSCY database) live in large urban communities. Those that live in well-established ethnic communities fare somewhat better than those in newer or less well-established ethnic communities.

Children in lone-parent families, regardless of immigrant status, are more likely to have poor health and are also more likely to have had recent health problems. This is most likely directly related to the socio-economic status of lone parents as well as the everyday difficulties of lone parenting. The difficulties associated with lone parenting are compounded in situations where language or unfamiliarity with the health care system create additional barriers to access.

New immigrant families, especially women-led, lone-parent immigrant families, tend to lack informal support in the early years after immigration. Their support networks strengthen over time. Use of formal supports also increases over time; this may reflect the growing problems of lone-parenting over time. It may also reflect better awareness of and access to services. Families in established ethnic communities are most likely to turn to religious and spiritual leaders.

### **C. Universal health care and child health outcomes**

Canadians support universal health care insurance as a way to ensure that all have access to health care, regardless of place of residence or income. They feel especially strongly about giving children a healthy start in life. Satya Brink and Peter J. Smith's paper "A Healthy Start for Canadian Children - Does Universal Health Care Meet the Challenge?" examines the health outcomes of children in relation to the socio-economic status of their families and place of residence, with a particular emphasis on access to health care. The authors seek to establish a baseline from which impacts of health reform may be judged.<sup>8</sup>

Access to health care (defined as frequency of use of health care professional services) differed significantly, depending on socio-economic status and region of residence. Compared to children from families in the high socio-economic bracket, children from low- and very low-income families were, respectively, 19.4 and 30.8 percent less likely to have seen a medical professional at all in the previous year. Children in Ontario were much less likely to have seen a medical professional than children from the Atlantic provinces, Quebec, the Prairies, and British Columbia.

Such health issues as low birth weight, obesity, lower motor and social development scores, and long-term physical problems also showed clear and significant variation by socio-economic status and region of residence. Poorer households had more children with below-average birth weights, obesity, and lower health utility index scores than children from higher socio-economic

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<sup>8</sup> At the workshop, experts in the field criticized some of the Brink and Smith paper's methodology. In light of these comments, the authors re-analyzed the data and found and rectified several technical errors. The corrected results are presented here.

households. On the other hand, poorer children had fewer long-term problems like allergies and bronchitis. Regional differences were significant, but not as large as socio-economic differences. For low birth weight, the lowest incidence is in Ontario residents, while British Columbia had the highest rate. Children in the Atlantic provinces were more apt to have long-term physical problems, while those in British Columbia had the lowest incidents of these problems. As for obesity, children in the Atlantic provinces had the highest rate, while those in Quebec were the least likely to have weight problems.

Brink and Smith noted that, in looking at health care reform, we must monitor disparities in health outcomes for children, to ensure that certain groups do not suffer poorer health outcomes as a result of changes to the health system.

#### **D. Smoking and alcohol consumption during pregnancy**

In their paper “How Tobacco and Alcohol Affect Newborn Children” Sarah K. Connor and Lynn McIntyre report on how using tobacco and alcohol during pregnancy can affect children in both the short and long term. The potential consequences of smoking include low birth weight and delivery complications. Smoking is the single greatest identifiable determinant of low birth weight. The potential consequences of drinking include Fetal Alcohol Syndrome (FAS) and Fetal Alcohol Effects (FAE). Because of these issues, the NLSCY asked women about their smoking and drinking behaviours during pregnancy.

The NLSCY found that women are still smoking and drinking during pregnancy. Women with lower incomes, less education, and spouses with lower incomes and/or education were more likely to smoke during pregnancy, as were single mothers and young mothers. Many of these women did not try to stop or reduce smoking during pregnancy. Fewer women reported drinking during pregnancy than reported smoking. These women tend to be older and have a higher level of education. The low reporting may reflect actual low rates of alcohol consumption during pregnancy or simply low rates of reporting.

Regardless of drinking and smoking patterns, first-born children are more likely to experience problems. First-born children are nearly 1.5 times more likely to be of low birth weight and to need special care after delivery, and their mothers are about 2.5 times more likely to have complications during delivery.

Young mothers and single parent mothers are not at greater risk for having a baby with problems at birth, once socio-economic status is taken into account. Teen mothers who smoke and have low levels of education are more likely to have vulnerable children, but no more so than older mothers with comparable levels of education who smoke.

### **5.3 Ideas for Action**

Ideas for action are grouped into four sections: gender differences in behaviour and health outcomes; the health of immigrant children; universal health care and child health outcomes; and smoking and alcohol consumption during pregnancy.

#### **A. Gender differences in behaviour and health outcomes**

Six themes emerged from the group discussion of the gender paper:

- Valuing children's present well-being as well as their future;
- The process of gender;
- How gender affects children's lives and development;
- Parenting styles and gender development;
- School and gender development;
- Outside activities and gender development.

Participants cautioned against focusing too strongly on those factors that influence the way children turn out. We should ensure that children have happy and healthy childhood's without having to justify action on the grounds of future benefits.

Children lead a highly complex life, in a webbing of relationships with family, neighbours, school and day care, friends, and other connections. These relationships involve both protective and risk factors. The complexity and rich texture of children's lives needs to be appreciated by researchers and policy-makers. For example, in developing their gender identity, children draw on what they see around them and what people (especially parents) seem to expect of them.

Caputo and Kelly's paper notes that gender is an on-going process that mediates healthy child development. Yet policy-makers seem not to appreciate this process. We need tools to allow policy-makers to look at gender in relation to a range of variables. We also need ways to help teachers and child care providers help children in their healthy development. The adults in children's lives should confront their own gender stereotyping and should provide love, respect and consistency throughout children's early years.

The NLSCY data suggest that gender roles significantly affect children's lives. Parents, child-care workers, and teachers need to be made aware of this impact and to understand and assess its costs and benefits. The Canadian Girl-Child Initiative seeks to increase our knowledge of how girls' gender roles affect their lives, with the aim of supporting girls as they make the transition to young womanhood.

Participants noted that very little attention has been paid to how boys' gender roles affect their health and well-being. We need health promotion and prevention programs designed to meet the needs of boys, especially as there is little evidence to show that current messages are having an impact. Participants suggested that men should be involved both in research about boys and in the development of programs that respond to their needs, and that men should take more of a role in examining the impact of gender, a field that has been dominated by women.

### ***A.1 Parenting issues***

Participants reaffirmed the need to know more about the relationship between parenting and healthy child development. What effect do parents have in shaping the gender differences identified in the NLSCY? How can they best contribute to the healthy development of their children? What are all the implications of parental time pressures on children? The workshop

group strongly cautioned that identifying the importance of parenting is only useful if we recognize the social contexts in which parenting goes on.

Participants recognized the need to provide practical information on effective parenting. But even more, we must strive as a society to support parents by helping maintain family security. We need policies that promote a balance between work and home. Parents must have the flexibility they need to raise healthy children. This includes offering paid maternity and paternity leaves of sufficient duration, as well as meaningful child benefits and universally accessible high quality day care. Many families make the decision to have one parent work part-time, but this is a costly solution and is not feasible or desirable for everyone.

Fathers need programs that encourage them to become fully engaged in parenting. They need recognition of their family role in the workplace – for example, family-friendly sick day policies and flexible work hours. They need to be given the tools to challenge gender stereotyping and to support their children in the formation of healthy gender identities.

### **A.2 Schools**

Schools, the group noted, are not the “benign interventionists” once thought. Participants expressed concern over the tendency of teachers to segregate children into performance streams. They also expressed concern about the NLSCY findings that teachers tended to be much more pessimistic than parents about the life chances of children from low-income families. Participants noted that teachers are vulnerable to gender stereotyping and self-esteem issues and that this can influence the assessment of behaviour or situations. They need training about child development to offset this tendency.

Children and youth spend a great deal of time in the company of teachers and it is essential that these teachers support their healthy development. In order to do so, teachers must keep in mind the emotional and social needs of children and must be aware of “at risk” variables that might be affecting a child’s life at any time.

The Canadian Institute of Child Health strongly believes that children and youth should be encouraged to actively participate in the planning and development of programs and services for themselves; that parents and teachers are encouraged to build bridges between each other to better support the child in reaching his or her full potential, and; that more male educators are hired for both preschools and schools (CICH, 1994).

### **A.3 Outside influences and activities**

We also need to develop or reinstate media literacy curricula for school children, and younger children, helping them challenge stereotypes. Parents, teachers and communities should work to get this curriculum into their elementary and secondary schools.

The group noted that organized and unorganized sports are more available to boys and men than to girls and women for a variety of reasons. Participation in recreational activities is important to good mental and physical health, regardless of gender.

## **B. The health of immigrant children**

Group discussion about the health of immigrant children revolved around four themes, as follows:

- The family context is crucial.
- We need timely, accessible, and culturally appropriate services.
- Ethnic and community organizations are key players in service development and delivery.
- The special circumstances of refugee children need to be explicitly addressed.

In addition, we must deal with immigrant children as part of immigrant families, ethnic communities, and non-ethnic communities. We need a better understanding of their cultural background. For example, the absence of a father means very different things depending on a family's culture and expectations, and affects families in culturally mediated ways – especially when the father's absence results from war, trauma, or death.

### ***B.1 Family context***

The economic situation of the family has an impact on the well-being of the child. Most lone-parent immigrant families require special assistance programs if they are to avoid slipping into poverty. NLSCY data confirm that, overall, children in lone-parent families are at risk for a range of difficulties. These families need support services to prevent their children from developing on-going health problems and problems associated more with poverty than immigrant status.

The interrelations among health status, informal support, and formal support are most obvious in socially and economically disadvantaged neighbourhoods. Children in lone-parent families are more likely to lack informal supports and to use formal supports than children from two-parent families.

### ***B.2 Access to services***

Policy makers and programmers need to focus on community programs that support immigrant families, especially lone-parent families, and reduce their risk of poverty. This involves developing;

- government policies to support these programs;
- informal support networks, perhaps through "newcomer" programs or programs organized through ethnic community organizations; and
- cultural sensitivity among community service and health providers.

Both new and established immigrant families need timely, accessible, and culturally appropriate services. Most immigrant children live in cities and most cities are well equipped with health, educational, and social services. But we cannot assume that these children and their families are

not facing demographic, language, socio-economic, ethnic or cultural factors that bar their access to services.

Often it is during the second five years after immigration that the children experience the most need—but fewer services are available. Language and cultural differences remain after five years, but "newcomer" services may be less available. For as-yet-undetermined reasons, immigrants' ability to get the help they need seems to diminish after five years. For this reason, identifying barriers to service and breaking them down must become a priority. We need to ensure that immigrants can access the services they need and, when necessary, develop new services to fill any real gaps.

There needs to be continuity in terms of contact, connection, and services from the moment of arrival until the families are well-established. The hurdles faced by newcomers change and evolve over time and with the growth of their children. The needs of mothers and fathers also change as their children grow. ESL programs (English as a second language) are important and should be widely available.

The majority of today's new immigrants are visible minorities. This needs to be taken into account when trying to understand their experiences as immigrants. Visible minorities are more likely to experience racism, a fact that will affect the relationships they establish in Canada.

### ***B.3 Ethnic organizations***

Ethnic organizations are often very effective in helping immigrant families find the services they need. We need to build and foster partnerships among these organizations, among ethnic groups, and between these organizations and services and programs. We need to mobilize immigrant communities to develop and deliver programs that support newcomers. These initiatives could be independent, or they could be part of larger initiatives such as those run by public health authorities. In large urban areas, we can help meet immigrants' health needs by providing specially trained staff at community centres. It is also important to develop health promotion and prevention materials in a variety of languages.

### ***B.4 Refugee children***

Participants noted that refugee children are a distinct group. They are often isolated, marginalized and disconnected. They may be suffering from physical and/or emotional scars as the result of war, torture, or traumatic events in their country of origin. The policies, programs and tools needed to meet their needs differ from those required to meet the needs of immigrant children in general. Refugee children may also face unique hurdles in accessing services such as health care and education. NLSCY questions did not adequately explore the special status and needs of refugee immigrant children, as the sample size did not permit analysis of this group.

## **C. Universal health care and child health outcomes**

Canadians treasure their health care system and are concerned that reforms may jeopardize its quality. In group discussion, participants focused less on universal health care and more on ways to promote universal health. To do this, we need to:

- support all families;

- link health data directly with policy and practice; and
- monitor access and outcomes.

### ***C.1 Supporting all families***

No distinct line separates "families that need support" from the rest of Canadians. There is no identified, labelled, homogeneous group of people in need. Rather, specific life events and circumstances put people into difficulties at different times in their lives. In addition, there are some issues with which many families struggle that could be eased by programs and policies that support families in general. We need to put into place practical, non-stigmatizing supports that can help families maintain their own well-being.

Participants suggested that we develop policies and programs that respond to families' needs for shelter, food and child care. Housing subsidies would help ensure that all people had an affordable place to live. Universal food security would help ensure healthy child development. Hunger and malnutrition diminish children's ability to learn and may cause developmental delays. Finally, a national child-care program would help families balance the responsibilities of home and work and would promote healthy child development.

### ***C.2 Linking health data with policy and practice***

The group strongly supported the position set forth at the NLSCY Conference that, in order to break the cycle of disadvantage, we need to link health data directly with policy and practice. The group cited many examples of programs that endeavour to make this link, such as family literacy programs, parenting programs, Aboriginal Head Start, Nobody's Perfect, and CAPC. Success of these endeavours was linked with the use of social marketing messages that challenge old and established attitudes and beliefs.

One participant described how asthma and anxiety rates both escalate with an increase in unemployment. This led to a discussion of the impact of socio-economic factors on health: many aspects of health are affected by the stressed of unemployment and/or low income. It was concluded that linking health data to policy and practices was most advantageous when the full range of influencing factors was addressed.

### ***C.3 Monitoring access and health outcomes***

The group recognized the real need to monitor access to health care and its relationship with health outcomes. But participants also said that access to universal health care cannot make up for inequities in other areas. That said, they emphasized the need to monitor access in a manner sensitive to socio-economic status and geographic variation. They highlighted the need to address regional disparities and disparities within regions at the policy level and to provide policy makers with the detailed information that they need to proceed effectively.

## **D. Smoking and alcohol consumption during pregnancy**

In discussing alcohol and cigarette consumption, participants emphasized the following:

- Smoking prevention, reduction and cessation programs must target children, youth and adults (both male and female), if we are to reduce the number of women smoking during pregnancy.
- We need models of pre-conception and prenatal health care that value the mother and the fetus if we want to reduce the risk of adverse health outcomes for first-born babies.
- The long-term consequences of exposure to alcohol during fetal development require non-stigmatizing monitoring.

### *D.1 Targeting anti-smoking programs*

In the NLSCY, 84 percent of female smokers indicated that they continued to smoke throughout their pregnancies. This makes it clear that we need to find and promote more effective ways to reach female smokers. In order to lessen smoking during pregnancy, we also need to find more effective ways to reduce or prevent smoking among young people. Above all, we need strategies that help girls and young women choose not to become smokers in the first place.

Connor and McIntyre's paper makes it clear that current strategies, particularly those employing scare tactics, are not working. They do not stop women from smoking. Participants felt that we should instead focus on what works with pregnant women. What are the best practices from around the country? The group suggested that examining these practices would probably lead us away from strategies that rely on guilt and shame and towards strategies that empower individuals to make changes in their behaviour. Pregnancy may prove to be a "learning ready" period if appropriate strategies are used.

The group strongly supported intervention programs that focus on prevention and deal with the reasons why young women begin to smoke. A great deal of progress needs to be made in this area; Canadian girls aged 15 have a very high smoking rate compared to girls from other industrialized nations. Suggestions included:

- developing community-based resources and programs to help women, children, and youth avoid smoking;
- empowering youth and children to develop positive health habits;
- supporting "buddy programs";
- supporting such community-based programs as peer resource mothers, that have been shown to decrease or prevent smoking;
- promoting and monitoring tobacco reduction strategies such as high taxes on tobacco products;
- developing affordable support programs for people who want to quit smoking, especially young people;
- acknowledging the costs of smoking cessation programs and funding these programs from tobacco taxes; and



- helping people deal with the stresses that make them take up or fail to quit smoking.

Canada has resources, models, and information sources developed under the Tobacco Demand Reduction Strategy. But many organizations do not have the money to promote and/or disseminate this material, while others have no money to purchase them. Organizations lack the resources to reprint materials or implement strategies. Adequate, guaranteed funding must be provided, independent of other political or bureaucratic demands.

### ***D.2 New models of pre-conception and prenatal health care***

Research suggests that first-born children are at greater risk than later children because their mothers do not receive sufficient prenatal care. They indicate that we need to focus on ensuring that all pregnant women get prenatal care and that this care begins early in pregnancy, since the first weeks after conception are critical to healthy child development.

We need to educate young women about their reproductive health and the importance of early prenatal care. This education should begin in childhood and continue through the teenage years, so that it becomes deeply ingrained. Boys and men also need to be educated about reproductive health issues.

As a society, we need to value pregnant women. To really do this we must change the context in which pregnancy occurs. We need to implement prenatal policies that encourage mothers to stop working by 36 or 37 weeks, regardless of the sector in which they work. We need to develop more and better prenatal programs, particularly as outreach to marginalized communities. And we need more and better policies that support pregnant women and their families, such as paid leave and rest places in the workplace.

Participants also suggested changes in the way that we provide health care to pregnant women. Physicians and other health professionals often cannot take the time with pregnant women to address their psychosocial circumstances or to advise and help them with health behaviours. As a society, we need to make this kind of prenatal care financially viable. We need to re-examine and reform the current system of care to meet the needs of pregnant women and their families. Alternative, effective models are in practice in other countries.

### ***D.3 Tracking the effects of alcohol consumption during pregnancy***

Fetal Alcohol Syndrome and Fetal Alcohol Effects are serious issues; they are pervasive conditions that permanently affect many aspects of a child's health and well-being. Because FAE is difficult to diagnose, we still have only guesses as to its impact on the population. It is also impossible to say what are safe levels of exposure to alcohol. The consequences may be hard to detect initially or may be misinterpreted as some other problem. Often, accurate diagnosis does not occur until later in the child's life. It is important to recognize that, however difficult to diagnose in infancy, the learning and development difficulties associated with FAS and FAE create life-long difficulties for the affected individuals.

It seems likely that NLSCY findings underestimate the number of women consuming alcohol during pregnancy. Women may not report their drinking habits because of the stigma attached to this behaviour. The NLSCY provides no information on the magnitude of the problem in many Aboriginal communities. We also need more information on drinking among young mothers.

No single strategy to reduce or prevent alcohol consumption will work with all groups. It was recommended that strategies draw upon:

- media literacy programs that challenge media messages about drinking;
- tougher regulations around alcohol advertising;
- role modelling;
- early education about the related health issues.

Waiting for formal scientific proof of the problem or of the success of counter measures could result in delayed action, putting another generation of children at risk. It is better to try out the most promising approaches and see if they make a difference.

## 5.4 Research Priorities

Two research priorities regarding gender emerged from the group discussion around gender and healthy child development:

- *What fosters resilience?* We need to know more about children's resilience. What factors promote well-being? Are these factors different for boys and girls? How do they promote well-being? Do they work for different reasons for girls and boys? Can positive early childhood experiences reduce negative outcomes in adolescence? What influences are present in the lives of resilient children and how can we make sure that vulnerable children have access to these influences?
- *What about boys?* Do we know what we, as a society, want for boys? Why do boys engage in more risk-taking behaviours than girls, even at very young ages? Are we assessing the behaviour of boys appropriately? Why are so many boys diagnosed with behavioural problems? What kinds of policies and practices would benefit boys? How does the social experience of boyhood affect men and fatherhood? The group discussion indicated that there are far more questions than answers. We need more and better research on boys. At present, most research on boys and young men is in the area of criminology. It was suggested that male researchers have a responsibility to take on this research and mobilize around these issues, but both male and female researchers need to acknowledge and try to fill the knowledge deficit.

Two research priorities emerge from the discussion of the health of immigrant children.

- The group recognized the physical, emotion and social vulnerability of refugee immigrant children and noted the absence of sufficient data to assess their needs, their health status and their access to services. The group agreed that increasing our understanding of this population was an important research priority.
- Fatherlessness affects family dynamics in culturally mediated ways. Currently little is known about this issue. This information is necessary if we are to develop programs that meet the needs of these families.

Participants raised three research concerns about maternal use of tobacco and alcohol.

- What are the on-going consequences of FAS and FAE on the development of children? What kind of support is effective? We still know very little about the needs of FAS and FAE children and their families.
- What kinds of specific interventions work for reducing drinking during pregnancy in different communities, such as the youth community or Aboriginal communities? We are beginning to understand that no one solution will work for everybody. Information about best practices in this area would help to inform policy and program development.
- What are the “best practices” to prevent or reduce smoking and drinking in different communities?

These research priorities reflect the pressing need for more information on the health and well-being of Canada’s children—information that goes beyond death and illness to a more complex understanding of what it means to reach one’s true health potential.

## 5.5 Conclusions

How, then, did the child health workshop of the 1998 NLSCY National Research Conference build on current research and contribute to future plans for action? With a wide range of organizations focussing on issues of child health and well-being, the workshop was full of ideas for action. These ideas fit the emerging consensus among child and family organizations that strong communities are crucial to improving the health and well-being of children and youth.

What does it mean to talk about strong communities in the context of child and youth health? On one hand, it means recognizing the importance to children, young people, and adults of opportunity, participation, involvement and empowerment. On the other hand, it means acknowledging the need for appropriate, responsive programs, resources and tools. These factors are equally important whether we talk about alcohol reduction or cessation programs, immigrant child health, healthy gender development or many other child health issues. CICH strongly believes that we, as a society, need to support children in the context of their families and strengthen families in the context of their communities.

Children and youth are not the simple passive recipients of our care. They have important knowledge about what they need to strengthen their personal sense of well-being. They have valuable ideas about ways in which they can contribute to their families and communities. We need to ask them, listen to them, and respond to what they say. Better communication with children and youth can greatly enhance our ability to develop policy and programming that responds to genuine need in families and communities. It is imperative that we develop formal links to the voices.

We need the political will and adequate funding if we want a community-focused approach to improving the well-being of children, youth and families. Municipal, provincial/territorial and national leadership must recognize the urgent need to reshape our priorities, putting children and families high on the political agenda. We need government investment in essential infrastructure

and programs such as recreation, community programming, cultural activities and informal social supports.

Research into healthy child development must rely on knowledge gained at the community level. Research outcomes must be communicated back to the community, as well as to political leaders. The emphasis must be on shortening the length of time between research and relevant, meaningful action that reaches people where they live. In cases where delays can have serious, irreversible health repercussions, efforts to prevent harm should be funded without waiting for conclusive research.

Beyond research, beyond policy and programming, every one of us must work to ensure that future generations are well-equipped to take on leadership roles and adult responsibilities. Given the stresses and complexities of modern life, this directive is even more important. Passing on a legacy of caring in the family and in the broader community is critical.

Finally, if Canadians want to improve the health and well-being of children and youth, then we must determine what helps children turn out right, and promote these factors through policy, programming and social marketing. NLSCY is already a valuable resource for understanding healthy child development. Over time, it will become even more powerful. We should make the most of this chance to understand the needs and strengths of our children and youth, and use it to move in directions that will make a real difference in the lives of our young people.

## 6. Workshop 6: Problem Behaviour

<i>Reporting individuals:</i>	<i>Louise Hanvey and Susan Swanson</i>
<i>Workshop Chair:</i>	<i>Lisa Hitch</i> <i>Department of Justice</i>
<i>Presenters:</i>	<i>Wendy M. Craig</i> <i>Department of Psychology, Queen's University</i>
	<i>Jane B. Sprott</i> <i>Centre of Criminology, University of Toronto</i>
	<i>Debra J. Pepler</i> <i>LaMarsh Centre for Research on Violence and Conflict Resolution, York University</i>
<i>Commentators:</i>	<i>Jane Fitzgerald</i> <i>Nova Scotia Department of Community Services</i>
	<i>Paul Steinhauer</i> <i>Hospital for Sick Children, Toronto</i>

### 6.1 The Issue

All children misbehave at times. Some children, however, show a pattern of persistent aggression and bullying. In addition to the immediate suffering those bullying causes, it may have long-term negative effects on its victims. Recent news coverage has highlighted these problems. Both bullies and their victims are more apt to drop out of school, to get in trouble with the law, and to suffer from unemployment, depression, and anxiety. As adults, they are likely to have lower competence and attain less. These problems affect society at large, not just the individuals involved. Their seriousness creates a need for policy and action.

### 6.2 Workshop Themes

The workshop focussed on the following themes:

- Bullying and victimization among Canadian schoolchildren (presenter: Wendy Craig);
- Childhood problem behaviour and future delinquency (presenter: Jane B. Sprott); and
- Aggression among girls (presenter: Debra J. Pepler).

#### A. Bullying and victimization among Canadian schoolchildren

According to Wendy Craig, Ray Peters, and Roman Konarski's paper "Bullying and Victimization Among Canadian School Children," bullying at school is a significant problem in Canada. In addition to its immediate negative effects, bullying has long-term consequences: "Children who are involved in bullying and victimization are at risk of developing problems later in life, such as school drop-out, unemployment, involvement in crime, depression and anxiety." Children who are bullies tend to carry this behaviour into adulthood, and to have children who are also bullies. Children who are victimized tend to have children who are also victimized. According to this research:

- Among Canadian boys between the ages of 4 and 11, about 1 in 7 will be a bully and about 1 in 20 will be victimized.
- For girls in the same age group, the figures are 1 in 11 and 1 in 14.
- At all ages, boys are more likely than girls to be bullies.
- Victimization increases with age for boys and girls.
- Boys and girls who bully others tend not to be victimized. Likewise, children who are victimized tend not to bully others.
- Boys are more likely to report incidences of bullying behaviour and of being victimized than their parents' report, while girls report less of both than boys.

Children who bully are often involved in a number of other aggressive and antisocial behaviours. These include physical aggression, hyperactivity and property crimes. Also, they demonstrate little positive sociable behaviour. Children who are victims also demonstrate these aggressive behaviours. In addition, however, they have other, internal problems such as anxiety, depression and emotional difficulties. These children tend to be easily aggravated and may have difficulty controlling their emotions. They tend to cry easily, are obviously anxious, lack humour, lack self-confidence and reward their attackers by being submissive.

Children who are bullies often come from families under stress. Their families are more apt to be low-income and low-status and to suffer from unemployment, and their parents may have had children at a young age. Parents of bullies may resort to inconsistent and harsh punishment, and have more negative interactions with their children. This may perpetuate aggressive behaviour in the child.

As with bullying, children who are victimized may come from homes where there are few positive interactions and harsh punishment. Research indicates that children who are frequent victims are likely to have family histories of insecure attachment, child abuse, and unresolved family conflict. These children may enter school with significant exposure to aggressive and angry conflict in the home, and may react to bullies with high anxiety. This behaviour may contribute to their continued victimization.

## **B. Childhood problem behaviour and future delinquency**

As Jane B. Sprott and Anthony N. Doob make clear in their paper, "Can Problem Behaviours in Childhood be an Introduction to Future Delinquency?" young people do not magically start committing offences when they turn 12, the age of criminal responsibility in Canada. They are likely to be troublesome children before this age.

Although police data suggest that they are unlikely to be committing very serious offences before age 12, studies indicate that the origins of criminal behaviour go back to early childhood. Canadians are becoming more concerned about the aggressive behaviour of very young children, and some have called for lowering the minimum age for criminal responsibility below the age of 12.

Sprott and Doob examined the feelings and social relationships of aggressive 10- and 11-year-olds. They studied children who fall in the top 10 percent on the scale of conduct disorder/physical aggression, constructed from NLSCY data by Statistics Canada. These children they defined as aggressive. Sprott and Doob focused on various aspects of these children's lives: how happy they were, what their school experiences were like, etc.

The study looked at aggressive behaviour from three perspectives: the child's; the household adult with the most knowledge about the child (usually the mother); and the child's teacher. While a substantial number of children were rated as aggressive by all three sources, many others were considered aggressive by only one or two of the informants.

Regardless of who rated these children as aggressive – themselves, their parents, or their teachers – Sprott and Doob found that these children present a negative picture of life. They are much more likely than other children to report that their parents reject them, that their teachers are unfair, and that other children say mean things about them. They are apt to be less happy and more solitary than other children, and they report a negative self-image. Parents and teachers are more likely to report that these children feel miserable and have trouble enjoying themselves. Aggressive children are, by their own descriptions, also more likely to be hyperactive.

It is well known that school is particularly problematic for young people who get in trouble with the law. The same seems to be true for these aggressive children. Compared to the less non-aggressive children, they are more likely to report that they are doing average or poor work. They are also less likely to believe that they get help from teachers or parents.

Following these children through the NLSCY should provide data that can be used to study the relationship between aggression and children and delinquent behaviour later on.

### **C. Aggression among girls**

Although many more boys are aggressive than girls, recent data from Statistics Canada indicate that the violence among adolescent girls is on the rise. In 1997, the rate for violent crimes increased 5 percent for girls and decreased 4 percent for boys. Furthermore, longitudinal studies indicate that girls identified as aggressive in childhood may experience a range of problems in adolescence and adulthood including dropping out of school, teen pregnancy, parenting difficulties, harsh punishment of children, and criminal behaviour. Those girls who do become offenders later reveal significant dysfunction, violence, and victimization in their relationships with men and with their children.

In their paper “Aggressive Girls in Canada: Should We Worry About Them?” Debra Pepler and Farrokh Sedighdeilami used NLSCY data on girls and boys aged 10 and 11. They compared aggressive girls to nonaggressive girls, looking at risk factors and psychosocial problems associated with the development of aggression. They also compared aggressive girls to aggressive boys on these factors. Their designation of aggressive included not only physical assault, but also verbal aggression and attacks on others' self-esteem or social status.

The researchers looked problems of hyperactivity and inattention, factors within the family and the peer group, and the psychosocial difficulties associated with physical and indirect aggression. Children with hyperactivity and inattention are at higher risk for developing aggressive

behaviour. In the study, hyperactivity and inattention were associated with aggression for both girls and boys, although girls were less likely than boys to have these problems.

Pepler and Sedighdeilami found that family factors associated with the development of aggression included family violence, ineffective parenting, parent-child conflict, and sibling conflict. Aggressive girls came from families with higher levels of all of these problems than nonaggressive girls and were similar to aggressive boys.

Aggressive children are generally unpopular. In the NLSCY data, aggressive girls experienced more peer problems than nonaggressive girls and were similar to aggressive boys. Aggressive boys and girls reported significantly more peer conflict, poor peer relations, lower peer contact, associations with deviant peers, and victimization. Aggressive girls experienced more psychosocial problems than nonaggressive girls and were similar to aggressive boys on their levels of emotional problems and poor self-esteem. They also reported more academic problems.

In general, aggressive girls may be less troublesome than aggressive boys but their aggressive behaviour appears to be increasing. Further, their aggression in childhood is associated with a range of dysfunctions in adolescence and adulthood with high social costs, especially when these girls later have children of their own. As with boys, aggressive behaviour is a “marker” for other individual, family, and social problems. Interventions to deal with aggressive children therefore need to be at a number of levels and involve the family and community.

### **6.3 Ideas for Action**

#### **A. Interventions must start early**

Aggressive children have a range of other problems and may grow into troubled adults, with a higher risk of criminal activity and poor social integration. While the research papers presented at this workshop looked at aggressive behaviour in school-age children, we know that early childhood experiences influence these children’s behaviour and their present and future well-being.

Children’s physical, emotional, and social development has strong links to their experience before birth and during infancy. In the first year of life, infants lay the groundwork for emotional control and develop a sense of attachment to their caregivers. This sense of attachment is based on the infant’s trust that the caregiver will respond promptly and appropriately, giving the child a sense of security. If the level of trust is high, the attachment is described as secure. Infants and toddlers with a secure attachment have a solid emotional and physical base from which to explore their environment and to increase their self-confidence and competence.

Conception to age 5 is a sensitive and critically important time for brain development. Children at this stage develop language skills and the ability to learn, to cope with stress, to have positive relationships with others, and to have a healthy sense of self. Different aspects of brain development occur at particular periods during these early years. If these sensitive periods pass without the appropriate stimulation, the child’s full potential is lost. Children who lack optimum conditions for brain development during this period have brains that are physically different from those of children who have had these conditions.



Follow-up studies have compared groups of children whose infant/toddler-caregiver attachment was secure to groups whose attachment was insecure. These studies show that children with secure attachment are more positive in their general outlook; have higher levels of self-esteem; are more independent; are more empathetic with others and have greater social competence. They show higher levels of curiosity, are more purposeful and focused in their actions, and are better able to persist in tasks.

Providing early interventions, particularly for children at risk, prevents the development of aggressive and other antisocial behaviour. Two important studies provide evidence for this notion:

- In the **High/Scope Perry Preschool Study**, children were randomly assigned either to a high-quality active-learning preschool program or to a group that received no preschool program. At age 27, the first group showed significant benefits, compared to the second group: one-half as many arrests, one-third more high school completions, higher earnings and more wealth.
- In the **Hawaii Healthy Start Program**, professionally supervised volunteers provided a home visiting program. Mothers and babies at risk for family and developmental problems received frequent home visits to decrease their isolation, to identify potential problems early, to provide education and practical supports, and to help mothers understand their babies' needs. The program led to a significant decrease in violent behaviours in children and adolescents, school failures, child abuse (down by 50 per cent), the number of children in care.

Similar programs have been included in recent Canadian initiatives such as:

- the Community Action Program for Children;
- the Crime Prevention Centre's Community Mobilization Program;
- the Canada Prenatal Nutrition Program; and
- some of the provinces' reinvestment strategies as part of the National Child Benefit.

But early intervention programs are not offered in all communities. They are not always integrated into the mainstream of community services, but are often pilot projects or add-ons.

Public health nurses can provide or facilitate these programs. In many communities nurses have regular contact with mothers and babies. They can do developmental screening and assess parent-child interactions, as well as coordinating and facilitating the family's access to services.

## **B. Parenting and the context for parenting are important**

Competent parenting is critical to the healthy development and safety of children. Children learn to relate to others and to cope with daily challenges by interacting with and observing their caregivers, primarily their parents. Parents foster social and emotional development when they provide affectionate care, show effective communication skills, and use problem-solving and negotiation skills to resolve conflict.

An understanding of child development enables parents to provide age-appropriate supervision and establish rules that are consistent with children's maturity levels. Parenting skills enable rules to be enforced in a non-intrusive and non-coercive manner. Children will feel secure and understand what is expected of them when rules are defined clearly and enforced in a consistent and fair way. Discipline benefits children most when it is directly related to their behaviours and to known rules.

Parent skills training, or parenting education, can be an effective way to promote effective parenting. These programs are most effective when they help parents to:

- provide adequate monitoring/supervision;
- use problem solving and negotiation skills to resolve conflict;
- enforce rules in a consistent and fair way;
- make positive and negative consequences dependent on the child's behaviour; and
- use rewards.

The quality of parent-child interactions depends on parents *and* children. Interventions to improve interactions are most effective when parent skills training is combined with social skills training for children. A program in Montreal, designed to prevent antisocial behaviour in boys who were disruptive in kindergarten, provided school-based social skills training for 7- to 9-year-olds and home-based parent training over a two-year period. The boys who received this program showed significantly improved academic adjustment throughout elementary school and significantly fewer self-reported delinquencies from age 10 to 15 years, compared to the boys who did not receive the program.

However, parents are people first. It is not enough to focus on parents' skills without providing support and assistance with social and economic stressors in their lives. Parents who are poor, live with continuing economic insecurities, live in inadequate housing, or are chronically or frequently unemployed, may have difficulties being good parents. These types of stressors in the family are related to ineffective or punitive parenting practices. Therefore, we as a society need to support parents and to prove that we truly value children and families.

To support families, we need policies that will:

- strengthen our commitment to education and health and social welfare programs,
- help parents who are chronically unemployed or never employed;
- support "family-friendly" workplaces;
- ensure that families have access to high-quality child care; and
- provide for a more equitable distribution of wealth/income.

### C. Interventions: universal *and* targeted; prevention *and* remediation

Aggression is an important marker for a constellation of issues that cannot be resolved simply by targeting the aggression itself. Aggressive kids need intervention at many levels, including the family and community. We need to take two coordinated approaches: universal programs that foster the healthy development of all children; and targeted programs that will allow at-risk children to be identified and referred for intervention. Currently, we have a patchwork of services of varying quality, not always well coordinated. Present comprehensive interventions are not good at referring children with problems to professionals, and professionals are not always good at intervening.

There has, in the past, been disagreement about whether programs for children should be universal (given to all children and families) or targeted to specific at-risk groups. But the two are not, in fact, mutually exclusive. We need to start with the understanding of how children develop and to provide universal and targeted programs that respond to their needs.

For example, families with infants and young children need a coordinated continuum of support and service, including professional, lay or peer, and “parent-to-parent” support. They need at-home visiting services, telephone support services, well-baby clinics/centres, and such community-based agencies as parent resource centres. Now that most new mothers and their babies are discharged from hospital after only a couple of days, it is especially critical to plan proper support.

The same applies to prevention and remediation: the two are not mutually exclusive. For example, schools – which are critical to both approaches – could provide:

- universal strategies such as behaviour codes, charters, peer counselling and mentoring programs;
- targeted strategies such as parent support for parents of children who display aggressive behaviour or who are victimized;
- protocols between parents and the school for identification and support; and
- counselling for children who are aggressive and children who are victimized.

The challenge is the timing and type of universal interventions. To make them effective, we need more research into what children need, and more effective dissemination of what actually works, e.g., comprehensive school programs, well-baby clinics, home visits and family resource centres. We already know that one key determinant of well-being is the development of a sense of belonging and feelings of general competence. What can we do to help children in general develop those strengths? We need to dissuade governments from their tendency to pick today’s hot issue and fund only “the intervention of the month”.

Making all of this happen depends in large part on societal values. As long as society fails to value children, social justice, and equity, nothing will really change. Right now, helping these children depends on the commitment of teachers and others who work with children in the community. We must continue to hope. We know we *can* prevent delinquency, we *can* rehabilitate delinquent children. But do we have the will to do so?

## D. A coordinated approach across sectors and disciplines

*We need a permeable boundary between school and community.* – Jane B. Sprott

Although schools are key players for universal programs for children and youth, we also need collaboration among education, health, social services, recreation and the justice system. For example, recent trends in the field of crime prevention promote a coordinated, universal, social-development approach. This approach addresses the root causes of crime and provides support to families and children, to encourage optimum child development from before birth to age 18.

Communities have a range of programs and resources for children and families, but these programs often work in isolation from each other. Rather than creating new programs, we need to coordinate and enhance what already exists. We need to work together to assess and evaluate what we already do. We need to find new ways to network, to work across disciplines, and to involve community and parents, pooling all of our resources to address common goals.

Professionals should be trained in working with other agencies and sectors and in sharing power and decision-making with parents. Governments are beginning to break down barriers that exist between and within different jurisdictions, departments, and agencies, but we all need more new ways to work together.

Communication between services continues to be poor in many communities; services can be isolated from each other. Service providers, researchers, and policy makers need opportunities to get together and to identify gaps in services for poor families and children. Such opportunities can help community institutions and agencies learn how their programs can support each other. They can also identify what needs to be done on behalf of others.

We need mechanisms for keeping up to date on new findings, such as those emerging from the NLSCY. For example, in Manitoba, the annual Gaps conference brings together service agencies to identify gaps in services for the families and their children. The agencies can then make changes to their own programming and identify what issues they need to advocate. A similar forum could help spread the word on research into children's well-being and healthy development.

The National Crime Prevention Centre has identified a number of ways of creating effective collaboration. They include:

- making a personal commitment to collaboration;
- meeting with administrators and staff of other agencies;
- identifying the potential benefits of coordination;
- exchanging existing information with staff in other agencies;
- identifying obstacles to coordination;
- developing plans to overcome obstacles;

- establishing common objectives; and
- coordinating activities within and between organizations.

### E. Linking home and school and involving children in finding solutions

Children and youth spend most of their time either in school or with their families. If schools do not address the psychosocial problems of their students, there are repercussions for the individual and for others in the school. However, schools should not be left to deal with problem behaviours alone. Teachers need support from mental health workers and children's services/resources in order to identify and work effectively with troubled children. Such interventions must involve the child's family. Schools, mental health services, community based recreation programs, and other children's resources need to share their information, their strengths, and their protocols at both the community and government levels.

Schools need school-wide interventions as well as resources for targeted interventions for children with problems. School-wide interventions for 7- to 9-year-olds play an important role in developing an ethic of respect and in changing the values, beliefs and behaviours of children and teachers in schools. However, to be successful, programs such as these must be multi-faceted, and identified and initiated by the teachers themselves rather than imposed by the school board. If someone from above tries to impose a program on schools, teachers, and communities, it will dilute the program's effectiveness.

Some useful interventions or approaches include:

- **Peer mediation:** Training senior students in conflict resolution and having them patrol the schoolyard at recess cut schoolyard bullying by 50%. In addition, when bullies were trained as mediators, they decreased their own bullying.
- **Working with victims:** Few victims report incidents of bullying, and if they do, they are often re-victimized by others in the school. Teachers need training to develop self-esteem in students to prevent re-victimization.
- **Working with bullies:** Efforts to develop empathy in bullies are questionable. Instead, these children need to improve their skills in problem-solving, social skills and self-regulation. Involving parents is key. Unfortunately, however, parents of the worst bullies are also the most difficult to involve.

Many effective solutions come from children themselves. Universal interventions can encourage more intervening by students and move the entire school population toward being better able to deal with conflict. Most of the time, children can resolve a problem without any intervention for others.

A number of programs have successfully involved children. For example:

- Parents who could benefit most from assistance with parenting skills tend often to be those parents who do not come to the school. One school made the children into the parenting experts. The class did videos of students in skits role playing an effective parent. They took their video home and watched them together with their parents. Parents love to see their

children on video and, on average, the video was watched 13 times in two days. In the process, parents had a chance to see what the school was like and what their children did there. After seeing the videos, parents were more likely to come into the school and talk to the teacher.

- A school was trying to cope with grade 6 troublemakers in the playground. The school instituted a child-to-child program that asked the children for solutions to the playground problems. The children developed 75 classroom manners. They also formed “manners police” and gave tickets to students who showed one of these good behaviours. Parents were concerned when their child came home with a ticket and called the school. They were pleased to hear about the program and to receive good news about their child.
- Bullying on school buses can be a recurring problem, making the bus driver’s already difficult job far harder. One school board dealt with the bullying by training the bus drivers on social skills and peace education.

#### **F. The criminal justice system**

Some people have called for criminalizing violent/aggressive behaviour of younger children. It appears that being violent or aggressive is highly related with being unhappy and unsuccessful, academically and socially. Therefore, policies that depend on punishment would appear, in effect, to punish the most unfortunate and vulnerable in our society. Furthermore, punishment is known to make children angrier, more rebellious and more likely to offend.

Young people in trouble with the law need alternatives to incarceration. Punishment alone is ineffective. Spending time in a closed-custody facility does little to help them meet their real needs. Instead, we need diversion programs that link young people with rehabilitative supports and resources in their own communities.

#### **G. Disseminating research**

The research described in these papers needs to be widely disseminated, so that it can be translated into public policy. For this purpose, we need closer links between research and policy. We also need to look at how governments develop policy. How can we make research timely and usable? How do we get it out to the public?

We need to forge partnerships among governments, universities and non-governmental organizations. In particular:

- We need linkages with and support (including funding) for the voluntary sector, so that its members can get the information into the public arena. They can disseminate through their networks of national, provincial and local volunteers.
- Academics need support and recognition for having their research enter the public policy debate. Currently, there is no reward for academics whose research results are widely publicized.
- Practitioners also need to be involved in these efforts. They need to keep up with current research, comparing their practices to its findings and making appropriate changes.

- Programs, service providers, schools, and practitioners in all sectors have to be prepared to change, as research clarifies what works and what doesn't.
- Communities need to be involved in disseminating research, especially to parents', women's and youth groups and to low-income families.

## 6.4 Conclusion

Participants in the workshop identified a number of future directions for program and policy action.

First, we need universal *and* targeted programs that support early child development, and that support school-age children in the development of social behaviours. These programs should be across sectors and involve children and families in their development and operation.

We must focus on early child development, clearly the most effective way of preventing aggressive behaviour. Programs and policies that support early child development should have a universal component, reaching all families. In addition, we need to identify those families and children at increased risk for developing aggressive behaviour, so that they can receive more targeted interventions. Effective targeted interventions include home visiting programs and preschool education.

Parenting is important. Parents need support to develop the parenting skills that enable them to foster positive social and emotional development in their children. This, again, will involve universal parenting education programs, accessible to all parents, and more targeted programs for those parents who are having difficulties. Since the quality of the relationship between a parent and child is determined by both of them, these targeted interventions are most effective when combined with social skills training for children.

Parents do not operate in a vacuum. We need public policies to make it easier for parents to be effective. These include policies/programs to support parents who are chronically unemployed or never employed, "family-friendly" workplaces, universally available high-quality child care, health and social services, and a more equitable distribution of wealth/income.

We need a range of community-based supports. These include access to recreation for all children, family resource centres, home visiting programs, well-baby clinics, counselling for children and families in need, support for children with special needs, practical supports to cope with poverty, shelters for women and children escaping from violence, counselling for men who use violence in relationships, support to combat isolation and respite care for high risk families. These programs should work closely together.

The school is a central player in preventing and dealing with aggressive behaviour. Schools need universal programs, as well as resources for targeted interventions for children with problems. However, schools cannot do it all; they have to work closely with parents, mental health services, social services, recreation services, and other children's services.

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## 7. Workshop 7: Childhood Experiences

<i>Reporting organization:</i>	<i>Research Unit on Children's Psychosocial Maladjustment (GRIP), University of Montreal</i>
<i>Workshop Chair:</i>	<i>Marta Morgan Social Policy Branch Human Resources Development Canada</i>
<i>Presenters:</i>	<i>Dafna E. Kohen Department of Health Care and Epidemiology University of British Columbia</i> <i>Lynn McIntyre Faculty of Health Professions Dalhousie University</i> <i>Robert O. Pihl Department of Psychology, McGill University</i>
<i>Commentators:</i>	<i>Jessica Hill Integrated Services for Children Government of Ontario</i> <i>Dick Stewart Regional Municipality of Ottawa-Carleton</i>

### 7.1 The Issue

The findings of the first wave of data from the National Longitudinal Survey of Children and Youth (NLSCY) show that the majority of Canadian children are well adjusted. However, about one Canadian child in four can be considered vulnerable as a result of risk factors inside and outside the home. These stresses can compromise the child's development and create behavioural and emotional problems. This workshop focuses on a few of the many childhood experiences that can hinder a child's optimal physical, social, emotional, and cognitive growth: child hunger; maternal drinking; and frequent changes in care arrangements, residential location and school settings.

Good childhood experiences are an important part of growing up. Children need stimulation and learning opportunities for their development and well-being. Some transitions, such as moving to a new house or going to a new school, are expected, and most children adapt and accommodate well to them. On the other hand, other changes in children's lives are disruptive and traumatic, having a negative effect on their development in the short and (possibly) the long term. If children undergo too many stressful situations, they may be overwhelmed. Instead of coping, they may display problematic behaviour. Children in low-income lone-parent families are more apt to experience such multiple stresses. Some conditions are detrimental to academic performance and behavioural adjustment and should, if possible, be prevented. Children experiencing other changes, such as household moves, should be supported through the change to prevent adverse effects.

This workshop addressed the following questions:

- How can we prevent child hunger? Failing prevention, how can we alleviate hunger? Who should take the lead? What concrete measures can we suggest?

- Existing policy mechanisms such as public education seem to have little effect on the prevalence of alcoholism. How can we get better results? To whom should these interventions be directed?
- When children experience change and instability in their lives, what steps can be taken to promote adjustment? What can parents do? What can be done at schools? What roles can professionals play?

## 7.2 Workshop Themes

Research presentations focused on the following areas:

- Child hunger in Canada (presenter: Lynn McIntyre);
- Mothers' heavy alcohol use (presenter: Robert O. Pihl); and
- Environmental change (Dafna Kohen, presenter).

### A. Child hunger in Canada

Lynn McIntyre, Sarah K. Connor, and James Warren's paper, "A Glimpse of Child Hunger in Canada" reports on a problem that few Canadians acknowledge. According to the NLSCY data, an estimated 57,000 Canadian families have gone hungry because the family has run out of food or money to buy food. Over a third of these families have to cope with hunger frequently.

Who are these hungry families? In fact, they look very like other Canadian families. More than two-thirds of the NLSCY mothers who reported hunger had completed high school and more than half of them had some post-secondary education. However, families with the following characteristics were over-represented among the hungry families:

- lone-parent families headed by women;
- households with very low household income, including the working poor;
- First Nations members off-reserve;
- families with health problems; and
- families in large cities.

While families on social assistance or welfare are more likely to report hunger, more than a third of the hungry families also reported wages and salaries as a source of income. More than half of the mothers ever experiencing hunger also indicated a chronic health condition, such as back problems or migraines. Almost 20% of the hungry mothers reported that these chronic conditions resulted in some activity limitation. In addition, almost half of the mothers from hungry households reported daily cigarette use.

Children in hungry families were also more likely to suffer from poor health. Almost one-quarter of the children in hungry families were reported to suffer from asthma.

How do families cope with hunger? Parents are seven times more likely to go hungry when there is no food in the house or money to buy food than are their children. The two most common coping strategies in the face of hunger are seeking help from the food bank and seeking help from relatives. However, different types of families appear to use these two strategies. Food-bank users are more likely to be single parents (mostly mothers), Ontario residents, and parents free of activity limitation. Households with fewer children, a higher income, both biological parents living at home, and no chronic condition in parents were more likely to seek help from relatives.

### **B. Mothers' heavy alcohol use**

The paper "Children with Mothers Who Drink A Lot" (by Robert O. Pihl, Pierre McDuff, Wendy Strickler, Jean-Marc Assad, Étienne Dubreuil, and Richard E. Tremblay) focuses on problem drinking by mothers. The NLSCY reveals that 3.5 percent of children under 12 live with a mother who drinks heavily (5 or more drinks on more than 12 occasions per year).

Heavy-drinking mothers are found more often among lower-income and lone-parent families.

They are more apt to smoke cigarettes daily and to have related health problems such as bronchitis and emphysema. While lone-parent families report more heavy drinking by mothers and have poor family functioning, NLSCY results suggest that heavy-drinking women in intact families report the greatest level of family dysfunction. Mothers who drink a lot engage in fewer positive interactions with their child and evaluate themselves as more hostile and ineffective toward them.

If a mother drinks heavily, her children are apt to show behavioural and emotional problems. This is true even allowing for variables such as socioeconomic status, maternal depression, intact vs. non-intact family status. Mothers who drink a lot perceive their child as more problematic. They are more likely to rate their offspring as more emotional and anxious, more hyperactive, more directly and indirectly aggressive, as displaying more separation anxiety and as committing more property crimes than children of mothers in the comparison groups.

Older children (10-11 years old) of these mothers reveal that they have more trouble getting along with peers and are more likely to have drunk alcohol and be questioned by the police. Teachers report that these mothers are less involved in their child's schoolwork and less supportive of school activities.

### **C. Environmental changes**

In their paper "Environmental Changes and Children's Competencies," Dafna E. Kohen, Clyde Hertzman and Michele Wiens examine the effects of change on children. According to the NLSCY data, most preschoolers and school-aged children experienced at least one change in care arrangements, school, and/or residential location.

About 40 percent of infants, toddlers, and preschoolers and 26 percent of school-aged children required care arrangements while their mothers were at work or studying. Changes in care arrangements for these children were most often linked to programs becoming unavailable. About a third of the children changed schools after their entry into elementary schools; most of these changes followed a household move. A significant number of preschoolers (23 percent)

and school-aged children (41 percent) have experienced up to three or more such transitions during childhood.

Children who experienced numerous changes in schools and the most household moves were more likely to live in families that:

- have low household income;
- are headed by a single mother;
- have a mother with little formal education; and
- have a mother with poor mental health.

Children who had undergone much environmental change showed lower competence, even allowing for socioeconomic factors. The more transitions, the worse the child's outcomes. Changes in care arrangements were associated with difficult temperament ratings, especially for boys, who are more likely to experience changes in care arrangements than girls. Preschoolers who had undergone changes in child care showed poorer verbal competence, while school-aged children showed more behavioural problems. Residential mobility was related to poor verbal abilities, especially for preschool girls, and to lower math scores, failing a grade, and behaviour problems for boys and girls of school age. Children who change school as a result of household moves are more apt to show lower academic achievement scores, increased grade failure, and greater behavioural problems.

### 7.3 Ideas for Action

The research presentations led to a lively discussion on ways to prevent the adverse consequences associated with negative childhood experiences. Discussion ranged over a wide variety of issues, especially the need for partnerships to promote healthy development of children. Participants called for close coordination of interventions by local, provincial and federal governments. They also identified areas where more research should be conducted.

The three research papers had one common factor: children who experience hunger, heavy maternal drinking, and frequent environmental disruptions tend to come from low-income families, often headed by a single mother.

#### A. Poverty

In 1994-1995, about 15 percent of Canadian children lived with a female single parent.<sup>9</sup> Close to three-quarters of these children lived at or below the Statistics Canada low income cut-off; the figure for children in two-parent families was one in six.<sup>10</sup> Poverty, with its pervasive

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<sup>9</sup> D.P. Ross, K. Scott, and M.A. Kelly, 1996. "Overview: Children in Canada in the 1990s." In *Growing Up in Canada: National Longitudinal Survey of Children and Youth* (Ottawa: Human Resources Development Canada/ Statistics Canada) (hereafter cited as *Growing Up In Canada*): 15-46.

<sup>10</sup> E.L. Lipman, D.R. Offord, and M.D. Dooley, 1996. "What Do We Know About Children from Single-Mother Families? Questions and Answers from the National Longitudinal Survey of Children and Youth." In *Growing Up In Canada*: 83-92.

impact on parental adjustment and child development, seems therefore to be the paramount issue to address if we want better child outcomes.

The difference in income between Canadian families that experience frequent hunger and those that do not is only about \$5,000 per year. These families include both lone-mother families on social assistance and the working poor. Raising both social assistance benefits and the minimum wage could eliminate the distress of hunger and its impact on children's health and behaviour.

But increasing these families' income is by no means the whole answer to hunger. According to Statistics Canada, families in poverty generally buy foodstuffs that are high in fats and carbohydrates, often because these foods are cheaper than more nutritious products. It is possible to eat a good, balanced diet on a small budget, but this requires more understanding of nutrition, good meal preparation techniques, intelligent shopping, and often a change in food preferences.

Since 1981, food banks have helped an ever-growing number of families to cope with occasional or frequent food shortage. Although they are important community initiatives, they are purely palliative. Their existence indicates a much larger problem. Food banks depend on donations and often lack a large enough supply to provide for all the needy. Moreover, they cannot provide a balanced diet, since they have only non-perishable items – and often not a wide enough range of even these. Children need fresh products such as milk, fruit, and vegetables, which food banks cannot offer. Calling upon a food bank can also be a humiliating experience for parents, something that may discourage some hungry families from taking advantage of them.

In 1997, Canada ranked first on the United Nation's human development index since it had the lowest poverty rate of all the industrialized countries. This year Canada has fallen to 10<sup>th</sup> place, a result of massive cutbacks in social spending.<sup>11</sup> Currently 90 percent of single mothers under the age of 25 and about a third of couples with dependent children are poor.<sup>12</sup>

A growing number of Canadian children now suffer from conditions that, especially in their early years, affect their health, their well-being, and their ability to learn and adapt throughout their entire lives. Articles 6, 24, and 27 of the International Convention on the Rights of the Child adopted by the United Nations in 1989 stipulate that every child has the right to:

- a safe and happy home
- help to survive and to develop;
- good health and proper health care; and
- an adequate standard of living which will help the child to develop socially, morally, spiritually, physically, and mentally.

Too many Canadian children now fail to meet this simple standard.

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<sup>11</sup> C. Montpetit, 1998. "L'UNO blâme le Canada." In *Le Devoir*, 5 December 1998, section A2.

<sup>12</sup> Federal/Provincial/Territorial Working Group on Social Development Research and Information, 1998. *Construction of a Preliminary Market Basket Measure of Poverty* (Ottawa).

## B. Interventions

Subsidizing nutritious breakfasts and lunches at school for children from poor families is a worthwhile investment. Hungry children cannot concentrate or learn, and their school performance suffers. We also need to teach people to make the most of their food dollars. To this end, we should:

- teach children and young people about nutrition and provide them with the necessary shopping and meal preparation skills through courses such as family studies or home economics;
- ensure access to affordable healthy food, especially in rural areas;
- ensure access to adequate kitchen facilities; and
- provide community services that teach parents to budget, shop, and cook.

If, however, we want to ensure that Canadian children receive what they are entitled to, we have to adopt a more global perspective. Interventions to promote optimal child development must begin before birth. The prenatal period lays the foundation for a child's physical well-being and cognitive development. The unborn child's nutrition depends on its mother's nutritional level. Low-income pregnant women are more likely to have diets lacking adequate protein, mineral, or vitamin intake. Furthermore, single mothers and those on welfare are more likely to smoke during pregnancy and therefore to have low-birthweight babies. These babies have a higher incidence of neurological disabilities and subtle "minimal brain dysfunctions" that affect the development of essential language, cognitive, and emotional skills.<sup>13</sup> To foster children's optimal development from as early on as possible, we must reach out to pregnant women at risk of inadequate nutrition and unhealthy lifestyles during pregnancy. This could be accomplished through:

- accessible community resources that provide information on good nutrition and health behaviour;
- home visits to provide support and information during pregnancy;
- financial or other incentives to encourage at-risk mothers to seek prenatal care; and
- comprehensive multi-disciplinary approaches to reach the most vulnerable pregnant women, such as teen mothers.

After birth, breast-feeding remains the most recommended feeding method for infants. It improves the bond between mother and child and stimulates the infant's social development. The fats contained in breast milk contribute to healthy brain and nervous system development. Furthermore, breast-fed babies are better protected against infectious diseases. Infant feeding practices vary with socioeconomic characteristics, including family income, marital status, and

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<sup>13</sup> G. Doherty, 1997. *Zero to Six: The Basis for School Readiness*. (Ottawa: Human Resource Development Canada).

the mother's education level.<sup>14</sup> This suggests that poor and single-mothers are less likely to breast-feed their infants.

Breast-feeding has so many long-term benefits that it should be actively encouraged through:

- providing information about the benefits of breast-feeding during prenatal services to at risk mothers;
- working to increase self-esteem and confidence of at-risk mothers with respect to breast-feeding, since many poor mothers feel that their milk is "bad" and unfit for their baby;
- promoting breast-feeding in hospital after delivery, with nurses or special consultants who helping new mothers get started on breast-feeding;
- following up by home visits to provide information, encouragement, and help for potential breast-feeding difficulties; and
- educating the public and encouraging accommodating attitudes towards breast-feeding mothers.

Studies have shown the negative effects of drinking alcohol during pregnancy. Prenatal drinking affects children's physical, psychological, and intellectual development. But few studies have examined the effect of maternal alcohol dependency during later phases of the child's development. Although research is still too scarce for broad policy formation, the NLSCY findings suggest that children of mothers who drink heavily are seriously affected. Further research is needed to examine the link between alcohol consumption and family status.

Alcohol abusers seldom seek out treatment; therefore, interventions need to be proactive. But initiatives such as public education programs have been criticized on a number of fronts. For instance, analyses of the impact of drug resistance programs show that they have some effect on smoking, but little or no effect on later alcohol and drug use.<sup>15</sup> In fact, some purely informative programs seemed actually to increase drug experimentation.<sup>16</sup> The current approach is to favour primary prevention and early intervention for at-risk youth and to focus on the social and behavioural correlates and precursors of drug abuse.<sup>17</sup>

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<sup>14</sup> L. Dubois, 1998. "Infant Characteristics: Diet." In *Santé Québec, In 2001 ... I'll be 5 Years Old! Survey of 5-Month-Old Infants. Preliminary Report of the Longitudinal Study of Child Development in Québec*. Québec: Ministère de la Santé et des Services Sociaux: 79-96; P.L. Williams, S.M. Innis, and A.M. Vogel, "Breast-Feeding and Weaning Practices in Vancouver." *Canadian Journal of Public Health* 87(4): 231-236.

<sup>15</sup> S.T. Ennett *et al.*, 1994. "How Effective is Drug Abuse Resistance Education? A Meta-Analysis of Project DARE Outcome Evaluations." *American Journal of Public Health* 84(9): 1394-1401; S.T. Ennett *et al.*, 1994. "Long-Term Evaluation of Drug Abuse Resistance Education." *Addictive Behaviours* 19(2): 113-125.

<sup>16</sup> K.J. Brower and M.D. Anglin, 1987. "Adolescent Cocaine Use: Epidemiology, Risk Factors, and Prevention." *Journal of Drug Education* 17(2): 163-180.

<sup>17</sup> J. Reynolds and DL. Cooper, 1995. "A Community and School Approach to Drug Prevention and Early Intervention with High-Risk Elementary School Children." *Journal of Primary Prevention* 15(4): 377-385; J.G. Dryfoos, "Adolescents at Risk: A Summation of Work in the Field: Programs and Policies." *Journal of Adolescent Health* 12(8): 630-637.

To increase public awareness of the problem and lay a solid basis for future programs, we should:

- sensitize the public, service providers and practitioners to the fact that heavy alcohol consumption is a significant risk factor, even if the mother did not drink during pregnancy;
- encourage research in this area;
- make schools aware of the pervasive effects of parental alcohol use; and
- provide schools with resources to determine if “problem” children may come from families with an alcohol problem and to provide support and services to both parents and children in these families.

### **C. Environmental changes**

While most children adapt well to changes in child-care arrangements, residential location, or school environment, a subgroup of youngsters – especially those who have gone through many such changes – may have poorer outcomes. Environmental changes often lead to a loss of social relationships that may have been protecting the children from stress. Practitioners and policy makers must be sensitive to meeting the needs of children in periods of transition. The educational system may play a particularly important part in developing initiatives to support children who are undergoing these changes. To mitigate the disruptive effects of numerous environmental transitions, we should:

- ensure the stability of child care programs and facilities;
- provide peer-support groups or welcoming clubs to help integrate new kids and their parents into new school settings;
- recognize that teachers, who have a profound impact on the child's academic and social adjustment, have the time to develop a meaningful relationships with all children, including those adapting to the new setting; and
- encourage initiatives to welcome new neighbours in a community, with a focus on helping relocated children and their parents adjust to their new surroundings and to develop social bonds with members of the community.

## **7.4 Conclusion**

Children and their families need support to counteract the effects of adverse conditions in their lives. In dealing with children’s outcomes, “an ounce of prevention is worth more than a pound of cure.” Encouraging the healthy development and well-being of all Canadian children is a matter of laying a proper foundation for our future.

### **A. Protective Factors**

The literature on families and children shows that even in the face of great difficulties, some children in high-risk families do not develop later problems because they are simply more



resilient. While various definitions have been proposed, resilience is usually described as “manifested competence despite significant challenges or exposure to stress-related events or trauma.”<sup>18</sup> In examining resilience, researchers are trying to determine why some children come through trauma or stress with such positive outcomes.<sup>19</sup> If we can determine what factors help some individuals overcome adversity, it may help us develop preventive measures that maximize adaptation and competence in individuals.

Some participants called for a shift away from looking at risk factors and towards looking for protective factors. That is, instead of treating deficits, we need to focus on and reinforce strengths in children and their families. In fact, in the past ten years, research has made considerable progress in identifying social and personal protective factors help determine health outcomes. These factors fall into three categories:

- personal characteristics of the child, such as high intelligence and good coping and social skills;
- relationship and familial factors, such as parental attachment and support; and
- extra-familial factors, such as support from the social environment and the community.

In terms of policy implications, we need to find ways to enhance these protective factors and counteract risk in this vulnerable population.

## **B. Single mothers**

The number of Canadian children experiencing parental separation has grown significantly over the past decades. Since most children remain with their mothers after parental separation, the number of families headed by single mothers has increased dramatically. Single-mother families are a heterogeneous group composed of women who have chosen single parenthood and mothers who have lost their partners through marital breakdown, the end of a common-law relationship, or death. These women share one common factor: they are far too likely to be poor.

For most women, family disruption entails a serious drop in income. A woman in this position may be forced to move to cheaper housing, often in a new neighbourhood. This means new schools or child-care arrangements for her children. The children, in short order, face the loss of their father and their former family constellation and often a radical change in lifestyle. On top of this, they may lose their former teachers and school friends, their child-care provider, their home, their neighbourhood, often their friends and extended family. It can be an overwhelming trauma.

Single mothers are under intense stress. They often lack social support networks that could help them balance work and family responsibilities. They have neither the time nor the resources for

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<sup>18</sup> A.S. Masten and J.D. Coastworth, 1998. “The Development of Competence in Favorable and Unfavorable Environments.” *American Psychologist* 53(2): 205-220.

<sup>19</sup> E.E. Werner, 1990. “Protective Factors and Individual Resilience.” In S.J. Meisels and J.P. Skonkoff, eds. *Handbook of Early Childhood Intervention* (Cambridge: Cambridge University Press), 97-116; S. Wolff, 1995. “The Concept of Resilience,” *Australian and New Zealand Journal of Psychiatry* 29: 565-574.

self-care and recreation. They are burdened by heavy responsibility, limited resources, isolation, fear for the future, and the implicit condemnation of society, which does little to build their (often damaged) sense of self-worth. Not surprisingly, depression is extremely common among single mothers, especially among those with little education and low income.

While many single mothers manage to provide for their children by working, single mothers are all too likely to slide into poverty, especially if they have few job skills and have to depend on social assistance. These less employable mothers tend to be those with little education and those who had children at a young age. Working mothers, on the other hand, have to juggle job and family responsibilities single-handed, often in occupations that are anything but family-friendly.

Children from single-mother families and children from low-income families are more likely than other children to experience emotional, behavioural, academic, and social difficulties. More children from single-mother families are poor and are therefore at greater risk. But single-mother status is also associated with a number of negative child outcomes, whether or not the family is poor.<sup>20</sup> This finding has important implications for interventions. What factors associated with single-mother status explain their children's outcomes? Of course we should try to eradicate child poverty, but other interventions may be needed for single mothers and their children.

The isolation, high stress, and depression that many single mothers struggle with often affect their ability to respond to their children. For example, mothers reporting high levels of stress are less responsive to their infants, provide them with less stimulation, and are more apt to use authoritarian, harsh, and aversive disciplinary measures than mothers reporting less stress.<sup>21</sup> Parenting styles and the tone of the interaction between the parent and the child have been shown to contribute significantly to child outcomes. For example, Landy and Tam noted that “children in at-risk conditions who enjoyed positive parenting practices achieved scores within the average range for children in Canada. Sometimes their outcomes even surpassed those of children who were living in more favourable sociodemographic conditions but who were exposed to less positive parenting practices”<sup>22</sup> (p. 109).

In addition to alleviating poverty, we need to find ways to enhance children's and families' coping skills and protective factors. These interventions might include:

- programs to help young mothers with little education become more employable and move toward better jobs;

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<sup>20</sup> Lipman, Offord, and Dooley, 1996, *op. cit.*; “What Do We Know About Children from Single-Mother Families? Questions and Answers from the National Longitudinal Survey of Children and Youth.” In *Growing Up In Canada*: 83-92; D.R. Offord and E.L. Lipman, 1996. “Emotional and Behavioural Problems.” In *Growing Up In Canada*: 119-126.

<sup>21</sup> K. Crnic *et al.*, 1983. “Effects of Stress and Social Support on Mothers and Premature and Full-Term Infants.” *Child Development* 54: 202-217; S. Crockenberg, 1987. “Support for Adolescent Mothers During the Postnatal Period: Theory and Research.” In C. Boukydis, ed., *Research on Support for Parents and Infants in the Postnatal Period* (Norwood, NJ: Albex): 25-40; G.R. Patterson, 1993. “Stress: A Change Agent for Family Process.” In N. Garnezy and M. Rutter, eds. *Stress, Coping and Development in Children* (New York: McGraw-Hill): 235-264.

<sup>22</sup> S. Landy and K.K. Tam, 1996. “Yes, Parenting Does Make a Difference to the Development of Children in Canada.” In *Growing Up in Canada*: 109.

- family resource centres in the community to help relieve the stress on single mothers by providing food, clothing, information on low-cost housing, parenting workshops, and support for children;
- in-home visiting programs to bring resources for at-risk mothers with young children;
- multi-disciplinary prevention and early intervention services to improve parental adjustment and the social and emotional development of young children in impoverished neighbourhoods; and
- daycare programs that are affordable and accessible and that offer high-quality services promoting children's well-being and development.

Preparing children to be productive adults needs the involvement not only of the family but also of the community in which the family lives and of society as a whole. We need close collaboration among service providers, schools, health boards, and ministries to ensure that we make the right and sufficient investment in our most important resource, our children.

*Windows of Opportunity* is an example of such a partnership. This coalition of more than 50 community and public child, youth, and family services agencies in Vancouver is strongly committed to a universal, comprehensive prevention-oriented approach supporting child, youth, and family development. It aims to improve and coordinate prevention and intervention services and supports for children and youth. It builds community capacity, expertise, commitment, and leadership and enlists ongoing support from community and government funders.

### **C. Future research**

Researchers and policy-makers now know much more about how children and youth develop and about what can be done to ensure their competence and healthy development. While the NLSCY has provided important first-wave cross-sectional data, we need further studies taking a long-term approach to verify all the preliminary findings. For policy development, we need a clear understanding of the issues, strengths, and coping strategies of children and their families faced with adversity – a qualitative approach. We also need ways to evaluate programs based on these findings, to ensure that they are efficient.

The public needs to become aware of the reality confronting Canadian children. The findings of the NLSCY need to be popularized to promote public education and awareness of the issues confronting families with young children. We must dispel the myths—for example, that all women confronted with poverty and hunger have low education, or that all children from single-mother families have problems. Stigmatizing poor and single-parent families only worsens the load they have to bear. Giving these families hope and a belief in their own abilities would help them invest in their own futures.

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## 8. Workshop 8: Vulnerable Children

*Reporting organization:* Invest in Kids Foundation

*Workshop Chairs:* Margaret Biggs

*Strategic Policy*

*Human Resources Development Canada*

*Geoff Hole*

*Social Survey Methods, Statistics Canada*

*Presenters:*

*Kwok Kwan Tam*

*Hincks-Dellcrest Centre, Toronto*

*Jenny Jenkins*

*Department of Human Development and Applied*

*Psychology, University of Toronto*

*Morton Beiser*

*Culture, Community and Health Studies*

*Clarke Institute of Psychiatry*

*Commentators:*

*Doris Mae Oulton*

*Manitoba Children and Youth Secretariat*

*Len Kennedy*

*Children's Aid Society of Ottawa-Carleton*

### 8.1 The Issue

Certain conditions in children's lives have a strongly negative effect on their development. One key area of interest to researchers and policy-makers is the relationship between risks, protective factors, and child outcomes. Who are the vulnerable children—those most likely to develop emotional or behaviour problems, poor health, or school problems?

Risk factors may be associated with the parent (e.g., alcoholism), family circumstance (e.g., low income), parent-child relations (e.g., ineffective parenting), or the child (e.g., health problems). Research is now providing more information on the relationship between such risk factors and child outcomes.

Some children are able to cope with many stressors successfully, while others develop emotional or behavioural problems, do badly in school, or have health problems. Some exposure to risk is a normal part of growing up and helps children develop resilience and adaptability. But exposure to multiple risks, with no compensatory protective relationships, inevitably has high individual and public costs.

Each year Canada spends billions of dollars on children's physical and mental health, child welfare, child care and education. The size of this investment, especially combined with the moral commitment we have for future generations, compels us to make our services and policies as effective as possible. The answers to questions presented in this workshop on vulnerable children are crucial to policymakers, program directors, researchers and people who care about Canada's children.

The following questions formed the basis for discussion among researchers, policy and practitioner commentators, and the workshop participants:

- What policies and programs would most help vulnerable children?
- How can we develop support systems to help these children and their families?
- How can we ensure early intervention?
- How can we design age-appropriate interventions for vulnerable children?

## 8.2 Workshop Themes

The research papers presented focused on the following themes:

- The effect of multiple risk factors on child outcomes (presenter: Kwok Kwan Tam);
- The role of sibling, teacher, and friendship relationships for highly stressed children (presenter: Jenny Jenkins); and
- Stress among new immigrant children (presenter: Morton Beiser).

### A. The effect of multiple risk factors on child outcomes

Sarah Landy and Kwok Kwan Tam, in their paper “Understanding the Contribution of Multiple Risk Factors on Child Development as Children Grow,” examine what happens when children aged 2-3 and 4-11 are exposed to a variety of risk factors. They also looked at the effects of different parenting and discipline styles in moderating the relationship between risk factors and developmental problems.

The risk factors in this study included: single parent family, teen parent family, parental depression, parents with little education, low family income, and family dysfunction. The paper looked at the relationship between these risks and the chances of developing one or more of the following problems:

- Children aged 2-3 years: aggressive behaviour, hyperactivity, emotional disorder.
- Children aged 4-11: conduct disorder, hyperactivity, emotional disorder, repeating a grade in school, having relationship problems.

Landy and Tam's research showed the number of children with problems increases as the age of the child increases. About 15 to 20 percent of 2- and 3-year-olds have at least one emotional or behavioural problem. Between ages 4 and 8, the percentage rises to about 30%, and levels off at around 30% between ages 8 and 12.

Landy and Tam's research also showed that as the number of risk factors increases, the prevalence of children with problems also rises. The relationship is simple and linear.

Number of Risk Factors	Percentage of Children	Percentage of Those Children with Problems
0	60.0	20
1	20.0	25
2	10.0	35
3	5.0	40
4	2.0	40
5	0.4	50
6	0.1	80

They found that boys are more likely than girls to experience at least one problem at every age. In young children boys were more likely to be both hyperactive and aggressive than girls.

In examining the relationships between risks and problems in very young children, Landy and Tam found the greatest influences of children's outcomes rested within the mental health, parenting style or discipline style of parents. Some findings:

- Parental depression and family dysfunction were the best predictors of emotional problems
- Ineffective parenting increased the chances of both emotional problems and aggressive behaviour.
- Consistent parenting reduced the chances for aggressive behaviour and hyperactivity by over 50%.

For these very young children (aged 2-3) Landy and Tam uncovered two counter-intuitive findings:

- Living in a lone-parent family or having been born to a teen mother was unrelated to the number of problems in these very young children.
- Positive parenting had little effect in reducing problem outcomes (although consistent parenting and ineffective parenting are very significant).

In contrast, for older children (aged 4-11 years old) positive parenting significantly reduced chances for problem outcomes: a decrease of 25 percent for conduct disorder, 27 percent for relationship problems, 41 percent for emotional problems, and 52 percent for repeating a grade in school.

The best predictors of repeating a grade in school are, however, economic and structural: family income, parental education and lone-parent family. The best predictors of emotional and behavioural problems relate to parents' mental health and ability to function, especially parental depression and family dysfunction.

For older children, ineffective parenting practices raised the chance of every type of problem outcome, from an increase of 1.4 times for repeating a grade in school, up to 5 times for conduct disorder. Consistent parenting was also important and reduced the likelihood of hyperactivity, conduct disorder, and relationship problems.

In contrast to very young children, living in a lone-parent family was found to be a significant risk factor for older children (ages 4-11). But as in younger children, the effect of having been born to a teenage parent was not by itself a significant risk factor for older children. Again, the risks to these children result from other factors such as poverty and parenting problems.

Throughout childhood, risk factors directly related to the immediate social relationships of the family pose the greatest threat to the children's social and emotional development. Parental depression and family dysfunction are critical and are strongly associated with children's emotional difficulties and behaviour problems. Ineffective parenting is highly associated with child problem outcomes. On the other hand, positive and consistent parenting practices significantly reduced the odds of a child having one or more problems.

### **B. The role of sibling, teacher, and friendship relationships for highly stressed children**

Why are some children able to cope successfully with a multitude of stressors, while others develop behavioural problems? One difference may be in the quality of their relationships. In their paper, "The Importance of Sibling, Teacher and Friendship Relationships for Children Experiencing High Levels of Stress," Jenny Jenkins and Daniel Keating examine the effect of good sibling relationships, friendships, and teacher relationships on the behaviour of 6- and 10-year-olds with serious family problems. Their aim is to determine whether good non-parental relationships could offset the stress these children undergo in daily life.

The serious family problems in question included: parental alcohol abuse, parental marital dissatisfaction, divorced parents, inadequate family income, more than four children in the family, teenage pregnancy, parental depression, hostile parent-child relationships, and learning disability in the child. The children of interest in this analysis had 3 or more risk factors. Only 4 percent of Canada's children experience this level of risk, but 50% of these children show serious behavioural problems at school. They may exhibit externalized disorders (lying, stealing, anger, aggression, and getting in trouble with the police) or internalized disorders (withdrawal, unhappiness, loneliness, anxiety, and depression).

As in the Landy and Tam report, boys showed more externalizing behaviour than girls did. There was also a simple linear increase in behavioural problems as the number of risk factors increased. It should, however, be noted that boys in both age groups (6 and 10) were less likely than girls to have positive relationships.

**Siblings:** Both 6- and 10-year-olds showed more disorders when they had poor sibling relations. In 10-year-olds, having good sibling relationships made little difference if the family had only one or two risk factors. But when the family suffered from three or more risk factors, 10-year-olds with good sib relationships had fewer internalizing disorders. In fact, these children showed the same rate of internalizing disorders as children from families with no risk factors.

**Friends:** If 10-year-olds have good relationships with friends, they exhibit fewer external behaviour problems at school. In fact, the level of these problems is comparable to that in children with no risk factors. When children have less satisfactory friendships, their level of disorder is high.

**Teachers:** Both boys and girls whose relationship with their teachers is poor showed more internalizing and externalizing behaviour at school. However, there were important gender



differences. Older boys with poor teacher relationships exhibited high levels of externalizing behaviour, regardless of whether their families had few or many risks. Only girls with multiple risks benefited from having a strong relationship with their teacher; they showed rates of externalizing behaviour comparable to girls with no risk factors.

Is having one good relationship more protective than having several? In answering this question Jenkins and Keating found an age difference. For high-risk 6-year-olds: having one good relationship is better than having none; but there is no additional advantage to having more good relationships. For high risk 10-year-olds: having two or three good relationships was better than just one good relationship, and one good relationship was better than no good relationships. The fewer positive relationships, the greater the behavioural problems displayed.

### C. Stress among immigrant children

In “New Immigrant Children: How are They Coping?” Morton Beiser, Fen Hou, Ilene Hyman and Michel Tousignant examine family factors that mediate the effects of poverty on the health, mental health, and achievement of new immigrant children. The authors defined as new immigrant children both children who entered this country as immigrants, and children from families in which at least one parent had been in Canada less than 10 years. The category includes all new immigrants, regardless of country of origin or migration circumstances.

In the NLSCY, 30 percent of these children live in poverty. This is more than double the overall Canadian rate (13 percent). Yet this study, like others reporting positive outcomes for new immigrant children, found that new immigrant children surveyed by the NLSCY had significantly lower rates of psychiatric disorders than non-immigrant Canadian children.

	New Immigrant Children	Non-Immigrant Children
Hyperactivity	4%	11%
Emotional disorder	5%	9%
Conduct disorder	7%	13%

For both immigrant and non-immigrant children, emotional and conduct disorders are higher when children are poor – that is, poor immigrant children have more disorders than non-poor immigrant children. This repeats the pattern in the general Canadian population.

As the authors report, “If anything achievement data are even more encouraging. Studies suggest that immigrant children consistently out-perform native-born children in school and are more likely to be class valedictorians or salutarians.”

Why do new immigrant children fare so much better in the face of poverty? Compared to new immigrants, families in the national population are significantly more likely to have a drinking problem, family dysfunction or ineffective parenting, or to use non-parent child care. Poor majority-culture families are more likely than the non-poor to be dysfunctional, to be headed by a lone parent, to include a depressed parent, or to feature parental alcohol abuse or mental illness. All of these factors lead to poor parenting. In addition, poor majority culture parents were more likely to use non-parental care for their children. With the exception of ineffective parenting (an area in which immigrant parents have significantly lower rates than national population parents),

there were no significant differences in risk factors between the non-poor new immigrant and non-poor national families.

There is, however, one major difference between new immigrant families and non-immigrant Canadian families: hope. “It is almost as if, for many new settlers, unemployment and poverty are part of the process of becoming a Canadian, but that the promise of better things to come sustains people during an initial period of adversity.” For the majority culture, “poverty tends to be part of a cycle of family dysfunction, single-family structure, less than optimal parenting, alcohol abuse, and parental mental illness, each of which jeopardizes the mental health of children. It is often a cycle that offers little hope of escape.”

### 8.3 Ideas for Action

The workshop’s two sessions produced substantially different discussion and directions. The first session was smaller and was attended primarily by academics, bureaucrats, and representatives of national advocacy groups. The second, larger workshop had more service providers from smaller more grassroots organizations. These programs provide mittens and winter clothes, recreation and peer-mentoring programs, family violence programs, counseling services for children and parents, breakfast programs, drop-in programs, literacy programs, toy-lending programs, and many more family support and education programs. This report synthesizes the responses from both groups.

Doris May Oulton, from Manitoba Children and Youth Secretariat, and Len Kennedy, from the Children's Aid Society of Ottawa-Carleton, were the workshop’s policy and practitioner commentators. Ms. Oulton noted 4% of Canadian children have multiple high risks. While that may seem like a small proportion, it translates into **236,000 children across Canada** (i.e., 4% of the 5,900,000 kids in Statistics Canada’s 1996 Census). Of this number, 50%, or 118,000, will have behavioural problems in school. Furthermore, the researchers showed that not all children will have problems in school. They can have disorders and dysfunctions that show up primarily with their families, friends, and neighbourhoods. In short, research shows Canada has a troubling high number of high-risk children and youth.

Ms. Oulton and Mr. Kennedy had similar view of what should be done to keep children from becoming high-risk and to provide services for children and youth with problems. We should provide:

- early intervention strategies for low-income and high-risk families;
- family supports for those at highest risk: lone parents, parents suffering from depression, and adolescent mothers;
- ways to mitigate the effects of poverty;
- support for relationship building in schools and communities (for example, teachers, after-school recreational activities);
- specialized professional training and assessment tools for front-line clinicians and home visitors

- greater access and community support for immigrant families, to maintain their remarkably healthy families in good mental health and to avoid the depleting effects that long-term poverty has even on strong families.

### **A. What policies and programs would most help vulnerable children?**

**Parents:** Both the Landy and Tam and the Beiser *et al.* reports showed that we need to help parents interact with their children in a more emotionally positive way. Programs such as interactional coaching, parent training, and education are presently underway in many communities across Canada. We also need to make sure there is adequate funding for adult mental health services for parents to address their own depression and hostility. This means that in addition to standard mental health services, there should also be adequate funding for post-natal depression services and family violence prevention services.

**Counselors:** The Jenkins and Keating report suggests that we need to expand the repertoire of counseling services to include working on positive relationships among brothers and sisters, in addition to the traditional focus on marriage and parent-child relationships. Participants agreed strongly with this approach, which has been tried throughout Canada, primarily by child welfare agencies. But this approach has mostly been grounded on observational data, rather than the quantitative results found in the NLSCY.

**Teachers and schools:** Participants described about a dozen programs from across Canada that focus on training teachers and principals to develop cooperation, interdependence and trust among children. These included a variety of anti-bullying programs, as well as Peacemakers and others. The teachers who attended the workshop sessions said they very much want to facilitate more opportunities for high-risk children to develop friendships with their classmates. But it is crucial that teachers have the time, knowledge and skills to build positive relationships with their most challenging and difficult children. This is very difficult when teachers are being told to put more time strictly into teaching.

**Trained non-professionals:** Participants pled for extra training and support to be given to leaders in all programs touching the lives of children (recreation and sport, after-school activities, and mentoring such as Big Brothers/Sisters) so that leaders can build lasting relationships with children, especially those that are most at risk. Canada is blessed with many of these types of programs. But they require enough funding to allow these people, who are so important in the lives of young children, to have the training and time to build good relationships with their charges.

**Universal screening at birth, with ongoing monitoring, assessment and developmental clinics, available through childhood:** This recommendation was put forward because of the key finding that risks increase as children grow older. Right now, between birth and kindergarten Canada's infants and young children generally are out of sight. Even their periodic check-ups with physicians focus almost solely on physical development. Canada needs universal screening programs at birth, with follow-up assessments for those found to be at risk. In addition, we need infant and young-child monitoring programs, where parents and other caregivers are willing participants in informal and formal evaluations of healthy child development. The early years are crucial to setting the stage for social, emotional and cognitive development. But clearly children acquire more risks the older they become. Therefore, monitoring, assessment, and developmental

clinics need to be present throughout childhood. For many countries, such as Wales, this approach has been in place for so long that the programs are monitoring 5<sup>th</sup> and 6<sup>th</sup> generations of the same family at the clinics.

***Ecological models of child and family supports in high-risk neighbourhoods:*** Two research reports and several speakers recommended this approach, because of the finding that larger numbers of children from these neighbourhoods are at risk, from both economic and inter-personal factors. We need to move this approach into mainstream service delivery.

***Comprehensive, coordinated education, training, employment, child care, and income support for low-income families:*** The most important word in this recommendation is “comprehensive.” Too often these supports fall under different legislation or levels of government, and they are only rarely well coordinated. Low-income families with young children need a comprehensive, coordinated strategy to address the risks faced by so many Canadian children, simply due to the economic circumstances of their family of birth.

## **B. How can we develop support systems to help vulnerable children and their parents?**

***Adequate funding:*** In spite of the range of services available for vulnerable children, participants said that most of these services are inadequately funded. Participant after participant said that funding has been cut to the point where program quality is rapidly eroding. They would love to provide outreach, mentoring and close relationships to the high-risk children and families they serve that the research papers recommend. But the scope of their programs is being reduced and staff are being laid off. Even with ideal coordination, participants said, present funding is just too low.

***Coordination:*** Coordination is, however, far from ideal. While every level of government has some excellent programs underway, there is little or no coordination among the levels. At the local level it can be feast or famine. Additionally, funding groups such as foundations, religious groups, charities, and service organizations all have their own strategies and programs. Again, coordination is a problem. Family support and education programs will only become a system when all parties providing funding agree to harmonize their mandates and strategies.

***Balance between social and economic supports:*** Some children are vulnerable because their parents and other caregivers lack personal and inter-personal abilities; some children are vulnerable because their parents are poor and lack opportunities to provide basic supports and opportunities for their children. The workshop participants fully expect any effective system for vulnerable children to provide both economic and social supports to families with young children.

## **C. How can we ensure early intervention?**

***Screening and assessment tools:*** To identify children at risk or in need, people who regularly work with children need reliable, valid, specifically Canadian screening and assessment tools. Canada currently has a patchwork of screening and assessment tools, some better than others, used haphazardly across the country. Almost none of them is based on Canadian norms. A few municipalities, provinces and sectors are starting to put in place widespread screening and assessment tools, based on norms in their sector or geographic area. Screening is usually driven by public health and child welfare authorities. To ensure early intervention, we need to move

toward national screening and assessment at regular intervals throughout childhood. In addition to clinical screening and assessment, we need more informal, non-threatening, self-administered screening and assessment tools for parents, child-care givers and non-professionals who work regularly with young children.

**Training:** Professionals, para-professionals and non-professionals who work regularly with young children need training in healthy child development, so they can identify potential problems early, before they can become serious. Surprisingly few professionals are actually trained in *healthy* child development, and even fewer volunteers have any formal background. We need a complete review of all professional training, to determine whether the basics of healthy child development are being taught. Grassroots services providers are also very interested in providing high-quality training on child development to coaches, child-activity leaders, and other mentors.

**Research:** Some participants called for high-quality research on Canadian models of early intervention. Such research should measure outcomes of children and families and evaluate the program's processes, to determine what works. Most research quoted by policy makers is not Canadian. Worse still, the very people who rely on non-Canadian research often do not support high-quality Canadian research. On the other hand, some participants expressed frustration with what they perceived as an over-emphasis on evaluation. They believe that we already know what works.

#### **D. How can we design appropriate interventions for vulnerable children?**

**No single solution:** While some key findings in the research papers could help guide or refine the design of appropriate interventions, one point is crystal clear: children's vulnerability depends on a complex interaction of risk factors (personal, family, and community) and protective factors (personal, family, and community). Any effective interventions will therefore have to be ecological and comprehensive, tailored to individuals and subgroups, yet coherent and non-stigmatizing.

**Gender differences:** Two of the research papers showed important differences between boys and girls in the complex interplay of risk, protective factors, and behavioural problems. These findings raise the tantalizing question: should interventions be tailored differently for boys and girls?

**Immigrant/non-immigrant differences:** two of the research papers showed that immigrant children have fewer emotional and behavioural problems than children born in Canada. This is despite the fact that almost 30% of immigrant children live in poverty, which is almost always associated with poor mental health. The NLSCY showed immigrant children come from families that are less dysfunctional and whose parents are in better mental health. Researchers familiar with the survey selection procedures are concerned that these findings may result from the decision to survey only those immigrant parents who speak English or French well enough to answer its complex questionnaire. Since about 250,000 new immigrants come to Canada each year, the survey will have to address questions about the validity of surveying immigrants before program planners can generalize from these findings.

**Universal and targeted interventions:** Findings from all of the research papers for the Vulnerable Children Workshop clearly recommend targeted interventions for the relatively small group of children with multiple risks, for whom the likelihood of problematic development is particularly high. From other studies, we know that these families' problems are difficult to resolve quickly or easily. Consequently, early intervention and prevention programs should be directed to children and families who are most likely to fall into this high-risk group. These programs are usually connected with education, recreation, or public health systems. We therefore need to have alert, trained, supportive personnel in schools and services that reach all children, to identify high-risk children, to work with them, and to help resolve the underlying risk factors.

**Adequate funding:** The research reports' recommendations do not, in fact, require huge increases to funding. The infrastructure for mentoring and family support programs already exists. Yet participants reported the infrastructure is being eroded. Both small grassroots programs and large national institutions of public health, education, child welfare, and mental health reported funding problems. Some have undergone major reductions, while others have been held to no-growth budgets for a number of years. In addition, participants noted that cutbacks to welfare, training, and child care have the most severe impact on the most vulnerable children. The workshop participants suggested re-examining the impact of funding cuts, to determine their effect on families with young children.

## 8.4 Conclusions

### A. The importance of relationships

All three research reports emphasized the importance of social relations:

- Relationships are central to children's well-being.
- The quality of the parent-child relationship is important for healthy child development.
- Other relationships with (for example) siblings, friends, and teachers are also important, especially when children are at high risk

The NLSCY showed that problems in relationships closest to the child (for example, parental depression, family dysfunction, ineffective and inconsistent parenting) have the greatest impact on children's well-being. The quality and consistency of parenting practices is a critical variable in healthy child development. In the face of multiple risk factors, it becomes even more so.

As a society we are woefully inadequate at preparing parents to become good parents. Almost everyone, even the most educated, learns to be a parent through trial and error—often a lot of error. Although we are living in a time when neuroscience is documenting the importance of early brain development, infant capacities and early childhood competencies, very little useful and practical information is going to parents and parents-to-be. Myths abound.

We need to provide venues for parents to learn about child development – the normal capacities of children, and the importance of parents' role in helping their children develop these capacities.

Parent education could involve large-scale multimedia public education campaigns (similar to PARTICIPACTION) and enhanced parent education and training programs.

The NLSCY showed that relationships outside of the parental relationship are also important to children, particularly when they are exposed to multiple risks. Having good relationships with siblings, peers, and teachers can significantly moderate the impact of poor parenting, neighbourhoods, temperament, and other stresses. The problem is that children at high risk are also apt to have problems establishing and maintaining these relationships.

We need to train professionals on how to build good relationships with and among children. Conflict resolution and anger management programs for children, and special training for teachers in reaching out to the most at risk students, are currently underway across Canada. But we also need to ensure all professions that regularly work with young children receive adequate training on healthy child development.

### **B. Not all children are equally at risk**

Low-income children were found to be at risk for poor development. We need public policies that reduce poverty, or at least minimize the effect of poverty on child development. The approach should be comprehensive and coordinated, including income supports, child care, employment and training.

Boys were found to be at greater risk than girls. We need further examination of the underlying causes in boys' special vulnerability to emotional and behavioural disorders.

New immigrant children were found to be at far less risk than children in the national population. We need to re-examine the sample selection procedures for immigrant children to ensure that the findings on mental health are not due to a selection bias based on language or country of origin.

### **C. The need for early intervention**

Finally, two most basic findings from the research reports are:

- the number of risk factors increase as children grow older; and
- children exposed to multiple risk factors are more likely to experience significant emotional and behavioural problems.

Participants concluded that we must intervene early to limit the number of negative conditions in a child's life, before risk factors accumulate. We need universal *and* targeted programs, beginning before birth and continuing through childhood to support healthy child development and to provide effective services when problems first appear. This means strong basic institutions, such as public health, child care and child welfare, but it also means recreation programs and family resource programs tailored to families and communities.

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## Conclusion

### Summary – Future Directions

Conference participants were in agreement that the findings provided by the NLSCY will assist all sectors in advocating for change in support of the well-being of Canada's children. In evaluating the conference, most rated it highly, considered it well thought out with a good cross section of participants. To quote one attendee, "*The topics and variety of professionals gathered made an interesting blend of front line practitioners and policy makers, as well as researchers; greater collaboration between professions is desperately needed*". For another, "While the quality of research and discussion was very good, more work should be done to ensure presenters make the findings understandable to a non-academic audience".

Information provided in this summary of future directions for policy and program development is drawn directly from the discussions held during the conference workshop sessions and reflects the opinions of the participants. The summary is divided into six broad discussion themes:

- Both Universal and Targeted Interventions
- Early Intervention
- Parenting
- Partnerships and Service Integration
- Home, School and Community
- Work and Income.

The discussion themes are meant to be a general summation of the workshop interactions. Necessarily there is some overlap, which is consistent with the approach of the NLSCY of measuring outcomes and supporting the understanding of factors affecting child development and well-being holistically. For a more detailed presentation of issues specific to each workshop topic, the reader is referred to the individual workshop chapters.

While the first cycle of data from the NLSCY are exceptionally useful, researchers and workshop participants caution that the early stage of this longitudinal research makes any attempt to form specific policies based on these findings premature. Ideas put forth during the workshop sessions should be viewed only as potential areas for intervention or policy support. Over the next few years patterns will emerge through the NLSCY longitudinal investigation that will reveal further insights into many of the factors associated with child well-being, and will assist researchers in addressing several critical research issues. Empirical evidence supports the measurement of progress as well as identifying gaps in knowledge leading to subsequent policy and programs/services development. It assists with planning and through the general acceptance of indicators expressed in a common way, enables initiative, both individual and collective, on behalf of children.

## **Theme 1: Both Universal and Targeted Interventions**

Generally, there are two service delivery approaches that can be taken when providing support to children and families. Universal programs provide a broad population-wide level of support, while targeted primary prevention strategies focus on those identified to be most at risk. Discussions during the workshops contributed to the ongoing debate about which approach would be most beneficial to Canada's children as a whole.

The discussions supported the need for universal population programs that build and strengthen the capacity of all communities and families to improve outcomes for children. It was also clear that to be most effective targeted programs for at-risk families should be situated within a strong universal system. The location of effective targeted interventions, whatever the nature of the intervention, is best within a well-grounded universal system of education, recreation, social service and public health. The success of targeted interventions is dependent on having well-trained support personnel in all service areas that reach all children, with a goal of first identifying those at risk, then working with these families to reduce vulnerability. The two systems work interdependently, therefore a combination of universal and targeted programs is essential.

NLSCY research findings revealed that there exists a small but very important group of children with multiple risks for whom the likelihood of problematic development is quite high. A wide range of factors has been connected with these at-risk children and their families. Most children, including the majority of those in lone-parent families, are doing fine; however, when problems occur, they are frequently related to a cluster of characteristics that are over-represented among lone-parents, which in the majority of cases are lone-mothers. Factors such as low income, parenting problems, depression, and lack of social supports, when combined with lone-parenthood or single-mother status, were consistently associated with child difficulties. These findings have important implications for policy and program development.

In the absence of further research revealing which factors associated with single-mother status explain childhood well-being, a focus on child poverty would be an important first step. However, income support alone may not be enough. During workshop discussion, participants emphasized the importance of non-economic strategies that may enhance protective factors and act as promising alternatives or additions to economic assistance aimed at improving the life circumstances of single mothers and their children.

While certain family characteristics may provide guidance to where policy assistance can be focused, a blanketing of any one sub-group with intervention initiatives would be misguided. Healthy child development policies should be aimed at the whole population with the objective of assisting all types of families. Special initiatives for at-risk children and their families must be considered an essential component of this comprehensive system of support.

## **Theme 2: Early Intervention**

Participants in workshops consistently confirmed that the provision of prenatal education and postpartum support services to new parents, then continuing that support for months or even years following the birth of a child, is a high priority. The early care and support provided to families will have a decisive and lasting impact on later development - including the child's physical, intellectual, and emotional growth - and for parents, will significantly enhance positive, healthy, child-rearing skills.

It was suggested that during periods of substantial economic change, young families, especially mothers often experience increased challenges that affect the children within those families. Workshop discussions clearly supported the need for early intervention strategies to encourage healthy child development. Programs and policies supporting early child development should have a universal component where first and foremost all families are supported.

Within these programs a process for the identification of those at-risk should exist so that higher need families can receive more targeted interventions. Support initiatives would include prenatal nutrition and education; home visiting programs; preschool education; mobile and satellite community programs; and community "house" and community development initiatives. In particular, home visiting to new mothers was seen as a welcome universal intervention as it would create a context in which a health professional could observe and arrange for follow-up services for those perceived to be at increased risk.

Universal screening at birth with ongoing monitoring and developmental assessments should also be made available throughout childhood at regular intervals for all children. NLSCY findings indicate that for some infants and young children, the number of risk factors to which they are exposed can be an important predictor of future problems. Early intervention to limit or modify the negative conditions in a child's life before risk factors accumulate is essential. The early years are crucial to setting the stage for social, emotional and cognitive development. Universal screening will enhance early intervention by providing practitioners with the opportunity to catch those infants most at risk.

Unfortunately, early intervention programs are not uniformly available across the country. They are not offered in all communities and where they do exist, they are not always integrated into the mainstream of community service. This is an area policy-makers must turn their attention to. The well-being of our children has its roots in this early developmental stage, particularly in the first three years of life. Investments made during this period have been proven to set the base for competence and skills development affecting life-long learning, health and behaviours, and to be more cost effective than dealing with the long-term consequences of not investing.

### **Theme 3: Parenting**

As evidence about the influence of the family on early child development grows, a deeper understanding of the costs associated with not providing effective early prevention programs becomes more evident. Growing concerns with abuse and neglect, child hunger, and dropping out or school failure point out the need to support parents and reinforce the importance of their child-rearing roles. Workshop participants expressed concern that as a society we are woefully inadequate in preparing parents for the responsibilities of parenting. Competent parenting was viewed as critical to the healthy development and safety of our children.

Recent neuroscience research has clearly documented the importance of early brain development, and its impact on infant capacities and childhood competencies, yet the message is not always getting out to parents. Venues where parents learn about the capacities children need for development, and the importance of their role in facilitating the learning process are needed. Parents require a solid understanding of child development to enable them to provide age-appropriate supervision and establish rules that are consistent with children's maturity levels.

To provide parents with these skills, conference participants recommended support for universal parenting education programs. Parents need support to develop their skills in order to foster positive social and emotional development in their children. Classes should include ongoing skills-building components for parents to take as their children reach each new stage of development. With the demanding schedules of working parents and hectic pace of today's family life, parents must be encouraged to remain engaged with their children at all developmental stages. Though the type and intensity of parental interaction changes as children grow, the child's need for parental contact is paramount for healthy development.

All parents should have access to parenting programs. More targeted programs for those parents facing greater difficulties should also be available. Programs are best presented in a format that minimizes barriers to access (e.g., location, transportation costs, child care, literacy levels) and encourages full participation.

What was also clear to workshop participants was that parents develop, maintain and improve their parenting abilities in the context of their lives. This context may include separation and divorce, relocation to another community or a significant change in income. It is not sufficient to focus on parent education alone, without providing support and assistance, taking into account the social and economic stressors in the lives of today's parents. Successful early prevention programs have not just concentrated on helping families with parenting, they have helped parents deal with problems in the context of their lives. Policy must be directed towards putting solidly in place those structural supports that make family life easier.

Public policies are needed to lessen the effect of poverty on child development. Families living in poverty need support through financial supplements, subsidized child care, and educational opportunities. Assistance to parents who are chronically unemployed or never employed or attempting a return to the work force are key to lifting these families out of difficult circumstances. Such comprehensive interventions would reduce the likelihood that children would be exposed to high levels of risk resulting in poor outcomes and in turn would lead to an environment in which children are nurtured. Meeting the basic needs of Canadian children, such as adequate nutrition and the security of living in a safe and happy home, is imperative.

## **Theme 4: Partnerships and Service Integration**

Workshop participants noted that there are a multitude of excellent programs and resources available for families and children, however, they often work in isolation of each other. The issue is not always a matter of developing additional supports for families, rather, it is the challenge of turning existing supports into an effective system. Inter-sectoral and cross-disciplinary collaboration must be enhanced and innovative methods to connect prevention and intervention services need to be established. A more effective manner of delivering health and support services at the community level will reduce fragmentation of service delivery and facilitate future community linkages between service providers.

To strengthen families and improve the health and well-being of children, a community-based “system” which is comprehensive, coordinated and family-focused is required. The daily issues faced by disadvantaged families require comprehensive interdependent solutions.

The system envisioned by workshop participants was one that would provide both economic and social supports to families with young children. It will include a range of community-based supports coming from such sources as education, health, social services, recreation and the justice system. This must be a priority for the best interests of children and their families at higher risk of slipping through the safety net where the inter-sectoral links are not solidly in place. Current thinking increasingly reflects the movement from programs to systems of community-based support services for families. There is a need to develop long-term public policy leading to a better community support system.

This new approach will not be achieved until there is increased sharing of information and therefore public understanding of the importance of early childhood development. A coherent and comprehensive approach will have to build on existing community strengths and capacity and encourage leadership from the private sector, as well as the non-governmental sector and all levels of government. As child development takes place across a range of areas (cognitive, social, physical, and emotional) and through multiple, interacting environments, a broad approach is needed. For example, income support ideally is coupled with social supports, such as supportive workplaces, quality child care and safe communities. Partnerships among individuals (including parents), agencies and institutions who understand the value of working together are essential to the improvement of outcomes, and provide the greatest opportunity for success.

## **Theme 5: Home, School and Community**

Research has often focused on the impact children's individual, family and peer characteristics may have on their healthy development. Considerably less is known about the role the child's community plays in the development process. However, workshop participants voiced concerns with regard to the instability of many low-income neighbourhoods and their inability to build a foundation for a healthy community environment. The lack of affordable permanent housing for lower income families and the impact this has on the quality of the community is an important issue. Residents who are transient are less likely to establish relationships with neighbours or have an interest in the well-being of neighbourhood children, thus decreasing the cohesiveness and safety of the community. Schools, particularly in high-risk neighbourhoods, must remain in place to support the community by acting as catalysts for community development, providing a hub for activities, and drawing residents together in support of a local cause.

Children and youth spend a great deal of time in the company of teachers. For this reason it is essential that teachers have the tools and skills necessary to support healthy child development. However, schools cannot act alone. Teachers need to be able to work in partnership with parents, mental health services, social services, recreation services and other children's services to effectively support all children in reaching their full potential. Policy must focus on building bridges between parents, teachers, and the community support services in place for children.

Workshop discussion on educational issues also centered on factors that promote school success. Given that a child's readiness to learn is heavily dependent upon his or her surroundings, consideration must be given to providing environments at home and at school that are conducive to good teaching and learning. In ideal circumstances, students will have a high willingness to learn, their parents will be very involved in their academic pursuits, and teachers will have time to provide quality instruction. Clearly these factors are interdependent and again involve the participation not only of well-qualified teachers, but also of parents and students themselves. Those who receive a quality education will be better prepared to lead productive, healthy lives.

Past research has shown that the risk experienced by many young children can be countered by what have been identified as protective factors. These factors have potential to foster resiliency in youngsters and assist them in enduring despite chronic stressors. The protective factors include: families and schools that provide a caring and nurturing environment; opportunities for children to participate and contribute to their community, and strong external support systems with a focus on the school and surrounding community. Provided with these types of support the effects of stressful circumstances are ameliorated for many children and they may even be strengthened as a result of their experience.

Discussions also focused on the availability of neighbourhood resources for children and families, and accessibility to amenities such as recreational and cultural activities. Participants agreed that efforts must be directed at reducing barriers to access such as income, transportation, equipment costs, gender or immigrant status so that every child can be given the opportunity to participate. Neighbourhood initiatives to ensure the availability of recreational spaces such as parks and community centres, the accessibility of sports programs as well as mother-toddler programs, quality child care arrangements and after school programs are essential.

With appropriate supports, many communities have the capacity to run community development projects that improve children's outcomes. Policy-makers must focus attention on the total

community and the many protective factors that influence a safe and healthy community setting. As a society we must support children in the context of their families while at the same time strengthening families in the context of their communities.

Parents, teachers, community organizations and others all play a role in our children's education and development of life skills. To achieve an integrated approach that acknowledges the role of each of these actors, policy must focus on interventions that are broad, multi-layered and involve the family, community and school working together.

## **Theme 6: Work and Income**

Of all themes that ran through the workshops, the strongest and most consistent was the link between poverty and poor child incomes, in every aspect of life – school achievement, health, problem behaviour, community cohesion, participation in sports and arts activities, family functioning. Poor children are at risk simply because they are poor. Their lives are disrupted, stressed and limited in ways that are difficult for middle-class people to imagine. Something as simple as a school outing can become an occasion for pain, stress, and difficulty.

Their parents, too, are under stress – trying to make ends meet, to find affordable shelter, to hold down shift-work or low-value jobs, or to struggle with welfare. While some parents, unusually strong and adept, raise their children capably in poverty, in many cases, stressed parents are less effective parents. Depression and family dysfunction are can be endemic among these families.

For modern-day families maintaining their standard of life often (perhaps usually) requires two incomes. Parents who work or study outside the home need child care, which itself has important implications for children's well-being. Taken in the context of child development, child care programs that involve parents of young children can influence how they relate to and care for their children, and improve outcomes.

Parents who chose to stay home with their children make real and profound sacrifices, not just of income, but also of professional advancement. The working poor face particular challenges – of unstable, low paying jobs, often involving shift work and high stress, and of trying to juggle children and work, often without private transportation. Perhaps the families under the most stress are those headed by working single parents, who must juggle all the responsibilities of homemaking, child-rearing, and work, without any respite. Again, some parents do manage well, but at what cost to themselves?

At the same time, Canada's workplace adds to the difficulty. Our current emphasis on a high-pressure high-mobility job market is apt to disrupt families by forcing parents to work longer hours and move frequently – and frequent moves are very hard on children. For example, the research shows that young people who move frequently are more likely to have problems in school, exhibit difficult behaviour and abuse substances. At a number of workshops, participants called for more family-friendly workplaces, ones that allowed employees to be more involved in their children's school activities.

As was often repeated, parents often find it difficult to balance work and family. We need to find ways of supporting parents so that they have the freedom and ability to focus more on this most essential task of raising happy, healthy children and work.

If we are truly concerned about the well-being of all of Canada's children, we must look at income security as a fundamental necessity. However, all families with children need support, whether it is high-quality child care for working parents or financial support to allow a parent to stay home or creative measures designed to provide flexibility as situations and aspirations change.

We also need to address the shortage of affordable housing, a problem that pushes the families into poverty and as they are constantly on the move in search of cheaper accommodation,



disrupts their lives significantly. Cuts to subsidized and co-op housing have made the situation very difficult for low-income families; moreover, the cuts to recreation programs associated with these projects have excluding children from low-income families from these activities.

Income supplements for families with children should be considered an investment over the long term. Collaboration among governments can ensure delivery systems that respond both to the needs and choices of families with children.

## Critical Research Issues

During the conference the critical research issue of monitoring and measuring the *vulnerability* of children was identified as key to our future understanding of child development. J. Douglas Willms, during his luncheon speech to the conference delegation, explained the significance of current work that focuses on the development of a vulnerability index. Willms cited flaws in past risk factor research that typically based results on a single outcome and provided limited insight into our understanding of the impact of multiple risk factors.

Dr. Willms has developed an index of vulnerability that is constructed of the most valid and reliable behavioural, affective and cognitive NLSCY measures across each age group. Children with low scores on the index are considered vulnerable in the sense that without some type of intervention, the outcomes or life chances for these children would not be good. Using the index, research findings have revealed that than an estimated 1.2 million children in Canada are considered vulnerable. This represents 26.3% of the child population under 12. The vulnerability index is a potential method for tracking the progress of our children over time. If we are to reduce the number of vulnerable children, who live in all income groups, family types and locations, the development and refinement of the vulnerability index is one way to continue the discussion on this critical research issue. It can provide a marker of our investment in children.

Participants commented that the effects of income appear somewhat weaker than had been expected. The explanation for this finding is believed to be largely the result of using cross-sectional data. Of the families who were reported as poor at the time of data collection in 1994, some would have been poor for long periods of time while others may have been poor for only that year. Given that membership in this income category may have been short-lived for some, the effects of income are expected to carry less impact for these individuals than for those who have been poor for some time. Therefore the use of cross-sectional data has potential to dilute the effect of persistent poverty, making it difficult to measure the true impact of poverty on child well-being.

As NLSCY data collection continues and longitudinal patterns of income are captured, it is expected that the effect of income should increase significantly. With future cycles of data researchers will be able to examine relevant questions with regard to *economic security*, expanding our understanding of the effects of income on families.

Longitudinal investigation will reveal further insights into many of the factors associated with child well-being. The NLSCY is a valuable resource for understanding child development issues and can be used to promote public education, dispel myths and reduce stigmatization of poor or non-traditional families. For example, NLSCY research indicates that the majority of children in non-traditional family arrangements, especially those living with single mothers, are healthy and doing well. Further investigation will examine which factors connected to single-parenthood status are most influencing child well-being and what type of policy interventions would be most effective for single mothers and their children. This would also include the measurement of factors contributing to enhancing parental capacity to raise healthy children.

Another area of future investigation is the *influence of community/neighbourhood* on child development. Overall, the researchers found that less desirable neighbourhoods had a higher incidence of children with lower cognitive scores and more behaviour problems. Family

characteristics were found to reduce the effect of neighbourhoods on very young children, however, some neighbourhood factors remained for pre-schoolers. These findings suggest that even prior to the start of schooling, toddlers can be negatively influenced by their neighbourhood and this influence appears to increase as children grow older.

Despite strong theoretical arguments that community/neighbourhood variables are important determinants of child development, these factors have not been studied sufficiently and many questions remain. Community research is relatively new and existing indicators of community influence, especially for young children are limited.

Future cycles of the NLSCY will address such questions as what are the most important variables to measure and how do these factors influence children of all ages.

Recent research has increased our knowledge of the importance of this critical period of human development; however, in order to assess our progress in providing our children with the best possible start, there is still a further need to improve national knowledge and understanding of children's first six years of development. Another critical research area which requires attention is the examination of factors contributing to child development during the infant and pre-school years, the important indicators of *readiness to learn* and how they are best measured.

Work has begun at the Applied Research Branch, HRDC to frame the components of school readiness in a broader context, understanding the importance of the very early years in laying the foundation for achievement and adult success in all aspects of life. The impact of the availability of various family and community resources on later outcomes will be a feature of the research.

## Final Words

There is no doubt that child development is a complex process. As researchers, policy-makers, teachers, parents and community service providers, our aim is to understand the many factors that play a role in the biological, social and emotional growing process. Being able to monitor and predict what normal development is, then determine which policies and programs need to be in place to assist those experiencing difficulties is for many of us the main objective of our work.

While findings such as those generated by the NLSCY shed light on issues, we will never have complete answers. In reality, no perfect research design exists, and in research there are always trade-offs. Limited resources, limited time, and limits on our capacity as human beings to truly understand our environment dictate these trade-offs.

The data collected through the NLSCY research initiative provides researchers with information from a sample of children that is representative of the population of children in Canada. The advantage of this large data set is in its power to facilitate comparison and statistical aggregation. For the time being, the NLSCY cannot be used to study selected issues in depth and detail, instead its strength is in its capacity to address the broader issues. At the same time, the NLSCY has several strengths allowing researchers to adopt a much different approach to analysis and improve on these previous investigations. The NLSCY contains data across a wide range of variables that in turn can be linked to other data describing the children's schools, neighbourhoods and communities. Relationships among all these variables will be examined over time.

The NLSCY will provide stakeholders with the information required for evidence-based decisions during policy formulation and will make a significant contribution to our future understanding of children's issues. It will also continue to raise many new and critical issues.

At the broadest level, Canadian society has a vested interest in making certain NLSCY findings are used to encourage dialogue, public debate and research on children's issues. We must ensure that children's best interests are a primary consideration in policies and actions that ultimately affect them. As a signatory to the UN Convention on the Rights of the Child, Canada has already made this commitment.

Governments are responding to these challenges through the development of the National Children's Agenda. It will initiate a process to develop a common vision for Canada's children and common concepts of goals and priorities and underscore our collective responsibility to ensure that every child has the opportunity to grow up in a healthy, caring and safe environment. Measuring child well-being and monitoring progress will be important elements of any new strategies.

The impact of the NLSCY is reflected in the many references to the Survey in research and policy documents. The Canadian Policy Research Network's Family Network supports multidisciplinary research focussed on the achievement of positive child outcomes throughout the life cycle and cites the NLSCY as providing researchers with data that will create leadership capacity in policy relevant child outcome measurement and evaluation. From a workshop to develop its two-year research project, *What is the Best Policy Mix for Canada's Children?* the CPRN draws on the NLSCY among other studies to propose five key developmental outcomes.

In CPRN's words, the outcomes are broad and generic enough to be relevant across a range of disciplines, yet specific enough to lend themselves to effective research and policy making. This represents a substantial shift of emphasis in how child outcomes are reported, and is largely attributable to this major new research tool.

Similarly, the NLSCY has informed the work of the *Early Years Study*, commissioned by the Province of Ontario in the spring of 1998 to provide options and recommendations for preparing all of Ontario's young children for scholastic, career and social success. The report emphasizes the development of the whole child and presents strategies to build comprehensive models of support, directed toward improving outcomes.

It will continue to be important not to lose sight of the goal of the *Investing in Children* conference to promote action based on the research findings and to develop new knowledge for the benefit of all children. *Investing in Children: Ideas for Action* is intended to stimulate further discussion on what steps can be taken by professionals, communities, and organizations across all sectors. Most importantly, the ideas generated by participants can serve to motivate and involve all of us in improving the lives of Canadian children.

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## Appendix—The Research

### Workshop Papers

The research papers referenced in this document are listed below. These are shorter versions of the full research papers by the same authors, and were written to focus more on key findings than on methodology. They were presented at the workshops and distributed at the conference. They can be found on the conference web-site: [www.hrdc-drhc.gc.ca/arb/conferences/nlscyconf/](http://www.hrdc-drhc.gc.ca/arb/conferences/nlscyconf/)

W-98-34Es	October 1998	W -98-24Es	October 1998
How Tobacco and Alcohol Affect Newborn Children		New Immigrant Children : How Are They Coping?	
Sarah K. Connor, Lynn McIntyre		Morton Beiser, Feng Hou, Ilene Hyman, Michel Tousignant	
W-98-33Es	October 1998	W-98-23Es	October 1998
The Importance of Quality Child Care		The Importance of Sibling, Teacher and Friendship Relationships for Children Experiencing High Levels of Stress	
Dafna Kohen, Clyde Hertzman		Jenny Jenkins, Daniel Keating	
W-98-32Es	October 1998	W-98-22Es	October 1998
Do Parenting Practices Make a Difference?		Understanding the Contribution of Multiple Risk Factors on Child Development as Children Grow	
Ruth K. Chao, J. Douglas Willms		Sarah Landy, Kwok Kwan Tam	
W-98-31Es	October 1998	W -98-21Es	October 1998
Myths of Balancing Work and Family		A Healthy Start For Canadian Children - Does Universal Health Care Meet The Challenge?	
Cynthia D. Cook, J. Douglas Willms		Satya Brink, Peter J. Smith	
W-98-30E s	October 1998	W-98-20Es	October 1998
Aggressive Girls In Canada : Should We Worry About Them?		How Healthy are Immigrant Children?	
Debra J. Pepler, Farroukh Sedighdeilami		Audrey Kobayashi, Mark Rosenberg	
W -98-29Es	October 1998	W -98-19Es	October 1998
Can Problem Behaviors in Childhood be an Introduction to Future Delinquency?		Growing Up Male and Female in Canada	
Jane Sprott, Anthony Doob		Virginia Caputo, Katherine Kelly	
W -98-28Es	October 1998	W-98-18Es	October 1998
Bullying and Victimization Among Canadian School Children		Which Children Don't Participate in Sports, the Arts, and Community Programs?	
Wendy M. Craig, Ray de V. Peters, Roman Konarski		David R. Offord, Ellen Lipman, Eric Duku	
W-98-27Es	October 1998	W -98-17Es	October 1998
Children With Mothers Who Drink A Lot		What Does Moving Do To Your Children?	
R. O. Pihl, Pierre McDuffy, Wendy Strickler, Jean-Marc Assaad, Etienne Dubreuil, Richard Tremblay		David J. Dewit, David Offord, Kathy Braun	
W-98-26Es	October 1998	W -98-16Es	October 1998
A Glimpse Of Child Hunger In Canada		Do Places Matter?	
Lynn McIntyre, Sarah Connor, James Warren		Michael H. Boyle, Ellen Lipman	
W-98-25Es	October 1998	W-98-15Es	October 1998
Enviromental Changes and Children's Competencies		Affluent Neighbourhoods and School Readiness	
Dafna Kohen, Clyde Hertzman, Michele Wiens		Dafna Kohen, Clyde Hertzman	

W-98-14Es                      October 1998  
Academic Achievement In Early Adolescence: Do  
School Attitudes Make a Difference?  
Jennifer Connolly, Virginia Hachette, Loren  
McMaster

W-98-13Es                      October 1998  
How Do Families Affect Children's Success In  
School?  
Bruce A. Ryan, Gerald R. Adams

W -98-12Es                      October 1998  
Working Mothers and Their Children  
Pierre Lefebvre, Philip Merrigan

W-98-11Es                      October 1998  
What About Children In Lone Mother Families?  
Ellen L. Lipman, Michael H. Boyle, Martin D.  
Dooley, David R. Offord

W-98-10Es                      October 1998  
Growing Up With Mom and Dad? Children and  
Family Instability  
Nicole Marcil-Gratton

W-98-9Es                      October 1998  
Do Children In Post-Divorce Custody Have More  
Problems Than Those In Intact Families?  
Tony Haddad

W-98-8Es                      October 1998  
Comparing Children In Lone Parent Families:  
Differences and Similarities  
David P. Ross, Paul A. Roberts, Katherine Scott

W-98-7Es                      October 1998  
How Do Lone Parent Children Differ From All  
Children?  
David P. Ross, Paul A. Roberts, Katherine Scott



## Appendix (cont.)

## Research Papers

The full research papers, on which the workshop papers are based, are listed below. They have been published in the Applied Research Branch Working Paper Series, both in hard copy form and electronically. Ordering information is on second page of this document.

- |   |              |  |              |
|---|--------------|--|--------------|
| W-98-30E  | October 1998 | W-98-18E   | October 1998 |
| Aggressive Girls in Canada  |              | Sports, The Arts and Community Programs: Rates and Correlates of Participation   |              |
| Debra J. Pepler, Farrokh Sedighdeilami  |              | David R. Offord, Ellen L. Lipman, Eric K. Duku   |              |
| W-98-29E  | October 1998 | W-98-17E   | October 1998 |
| Who Are The Most Violent Ten And Eleven Year Olds? An Introduction To Future Delinquency        |              | The Relationship Between Geographic Relocation and Childhood Problem Behaviour   |              |
| Jane B. Sprott, Anthony N. Doob   |              | David J. DeWit, David R. Offord, Kathy Braun   |              |
| W-98-28E  | October 1998 | W-98-16E   | October 1998 |
| Bullying and Victimization Among Canadian School Children                                       |              | Do Places Matter? A Multilevel Analysis of Geographic Variations in Child Behaviour in Canada                            |              |
| Wendy M. Craig, Ray Dev. Peters, Roman Konarski   |              | Michael H. Boyle, Ellen L. Lipman  |              |
| W-98-27E  | October 1998 | W-98-15E   | October 1998 |
| Alcohol and Parenting: The Effects of Maternal Heavy Drinking                                   |              | Neighbourhood Influences on Children's School Readiness  |              |
| R.O. Pihl, Pierre McDuff, Wendy Strickler, Jean-Marc Assaad, Étienne Dubreuil, Richard Tremblay |              | Dafna E. Kohen, Clyde Hertzman, Jeanne Brooks-Gunn   |              |
| W-98-26E  | October 1998 | W-98-14E   | October 1998 |
| A Glimpse of Child Hunger in Canada   |              | Early Adolescence: Links with Personal Attitudes and Parental and Teacher Support for School                             |              |
| Lynn McIntyre, Sarah Connor and James Warren  |              | Jennifer A. Connolly, Virginia Hatchette, Loren E. McMaster  |              |
| W-98-25E  | October 1998 | W-98-13E   | October 1998 |
| Environmental Changes and Children's Competencies   |              | Family Relationships and Children's School Achievement: Data from the National Longitudinal Survey of Children and Youth |              |
| Dafna E. Kohen, Clyde Hertzman, Michele Wiens   |              | Bruce A. Ryan, Gerald R. Adams   |              |
| W-98-24E  | October 1998 | W-98-12E   | October 1998 |
| Growing Up Canadian - A Study of New Immigrant Children   |              | Family Background, Family Income, Maternal Work and Child Development  |              |
| Morton Beiser, Feng Hou, Ilene Hyman, Michel Tousignant   |              | Pierre Lefebvre, Philip Merrigan   |              |
| W-98-23E  | October 1998 | W-98-11E   | October 1998 |
| Risk and Resilience in Six- and Ten-Year-Old Children   |              | Children and Lone-Mother Families: An Investigation of Factors Influencing Child Well-Being                              |              |
| Jenny Jenkins, Daniel Keating   |              | Ellen L. Lipman, Michael H. Boyle, Martin D. Dooley and David R. Offord  |              |
| W-98-22E  | October 1998 | W-98-9E  | October 1998 |
| Understanding the Contribution of Multiple Risk Factors on Child Development at Various Ages    |              | Custody Arrangements and the Development of Emotional or Behavioural Problems in Children                                |              |
| Sarah Landy and Kwok Kwan Tam   |              | Tony Haddad  |              |
| W-98-20E  | October 1998 |  |              |
| Healthy Immigrant Children: A Demographic and Geographic Analysis                               |              |  |              |
| Audrey Kobayashi, Eric Moore, Mark Rosenberg  |              |  |              |

W-98-8E                      October 1998  
Mediating Factors in Child Development Outcomes:  
Children in Lone-Parent Families  
David P. Ross, Paul A. Roberts, Katherine Scott

W-98-7E                      October 1998  
Variations in Child Development Outcomes Among  
Children Living in Lone-Parent Families  
David P. Ross, Paul A. Roberts, Katherine Scott