

Investing in Early Child Development: The Health Sector Contribution

**Prepared by the Federal/Provincial/Territorial
Advisory Committee on Population Health (ACPH)**

Working Group on Healthy Child Development

for the

**Conference of Federal/Provincial/Territorial
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1.0 Background on this Report

There are three essential premises that underpin the recommended actions put forth in this paper:

- Healthy childhood leads to healthy, skilled adulthood, which in turn leads to a healthy, prosperous and productive society.
- While families are responsible for raising their children, they do not do it alone. Cross-sectoral action is needed to promote healthy child development.
- Governments are committed to measuring and monitoring children's health, well-being and development.

This paper builds on the March 1998 report of the Federal/Provincial/Territorial (F/P/T) Advisory Committee on Population Health (ACPH), *Building a National Strategy for Healthy Child Development*, which was a contributing factor to the development of the National Children's Agenda.¹ It also underscores the critical importance of a population health approach that addresses the key influences on or determinants of healthy child development.

This document identifies key opportunities for action in response to the wishes of F/P/T Ministers of Health for the health sector to facilitate a cross-sectoral collaboration on early child development, expressed at their September 1998 meeting; and to the request by the F/P/T Deputy Ministers of Health for recommendations on what the health sector can contribute to healthy child development and the National Children's Agenda. The focus is on early child development (0-6 years), the primary investment period to improve outcomes throughout the lifespan. A discussion paper has also been developed on intersectoral action, *Intersectoral Action...Towards Population Health*, and another paper addressing healthy adolescent development will be prepared in the near future.

The health sector is the primary public contact point for all expectant parents and families with young children, particularly children under the age of 4. As children mature, other sectors, such as the education system, become more involved in their development. There are valuable opportunities for the health sector to organize services to more effectively meet the needs of families with young children and to work across health disciplines and with other sectors and other jurisdictions to improve the health and well-being of young children.

¹ Quebec agrees with the objectives of the National Children's Agenda. However, the Government of Quebec has decided not to participate in its development because it wishes to assume full control over programs aimed at families and children within its territory. Furthermore, Quebec has not signed the Social Union Framework Agreement. Consequently, any references to joint F/P/T positions in this text do not include Quebec.

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Building on the population health framework and current research in the area of healthy child development, the health sector can significantly contribute to the National Children's Agenda in the early childhood period by:

- Maintaining and enhancing universal access to quality health care and public health services;
- Establishing an integrated system of health services for young children and their families that links with other sectors;
- Collaborating at the F/P/T level (across jurisdictions and with other sectors) to develop and implement national strategies to improve parenting, prevent injuries and address environmental health issues;
- Contributing to measuring and monitoring healthy child development; and
- Establishing a cross-sectoral and cross-jurisdictional research agenda and dissemination strategy to improve outcomes for children.

2.0 Context for this Report

Research clearly demonstrates the strong links between an adult's health status and his or her coping skills, sense of identity, competence and personal effectiveness. There is strong evidence to support the fact that the development of these important coping skills along with resistance to health problems and overall health and well-being are profoundly influenced by early childhood experiences.

“The foundation for healthy growth and development in later years is established to a large degree in the first six years of life.”

Toward a Healthy Future: Second Report on the Health of Canadians
F/P/T Advisory Committee on Population Health (1999)

“There is powerful new evidence from neuroscience that the early years of development from conception to age six, particularly for the first three years, set the base for competence and coping skills that will affect learning, behaviour and health throughout life.”

Early Years Study
McCain and Mustard (April 1999)

The National Children's Agenda, developed by the F/P/T Council of Ministers on Social Policy Renewal, has captured the interest of the Canadian public and engaged them in an important dialogue around healthy child development. This vision document has garnered good support among Canadians, and its publication offers a unique and timely opportunity to underscore the early child development period as an area worthy of distinct action.

In Canada and around the world, there is growing consensus on the need for ongoing, reliable and timely information on children's health, well-being and development to inform and guide policies and programs at all levels. The health sector has particular expertise in, and is widely recognized for its early contributions to, the field of indicator development (i.e. mortality, morbidity, birthweight, etc.), measuring and monitoring, and evaluation. Measuring and monitoring are essential functions if governments, service providers and citizens are to be able to determine if our actions are making a positive difference – for both the whole population and specific groups within the population. In collaboration with other sectors, governments are actively developing measures to support the evaluation and monitoring of children's initiatives. Measures are also being developed through the National Children's Agenda. The table on page 12 provides some examples of outcomes for children that are directly linked to health sector activities.

3.0 Early Child Development (0-6 Years)

Each of the phases – preconception, pregnancy, birth, infancy and early childhood – lays the foundation for a child’s development and impacts on health and well-being throughout the lifespan.

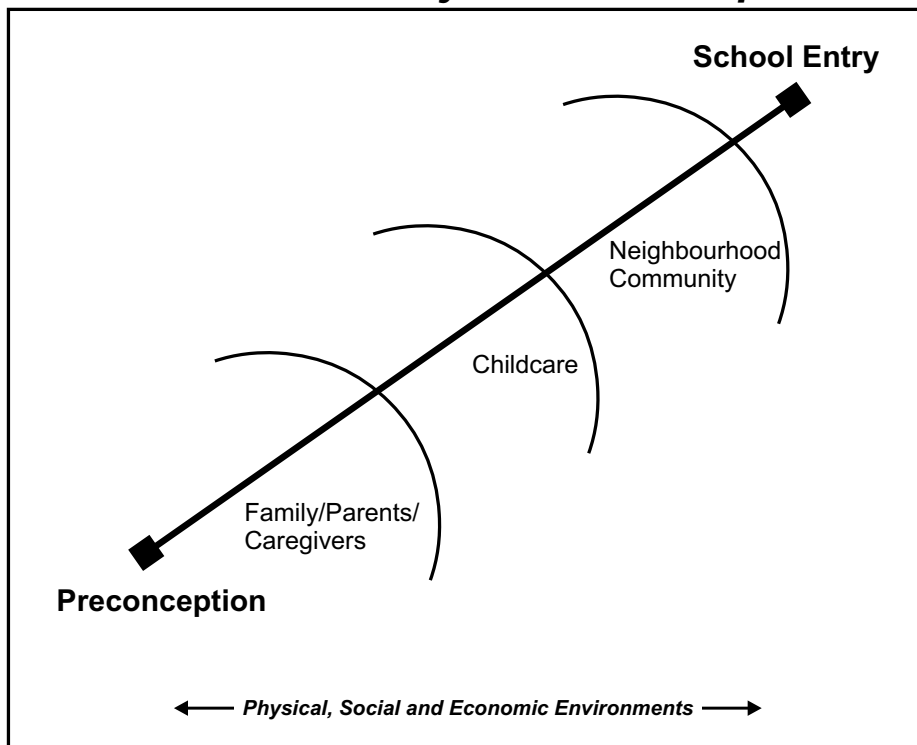
Health status and lifestyle of parents before conception and environmental conditions and parental lifestyle during pregnancy influence the health of the fetus and the outcome of the pregnancy. Inadequate nutritional intake, use of tobacco, alcohol and/or drugs, stress and violence are significant contributors to poor pregnancy outcomes, such as pre-term labour and low birthweight. Early access to quality prenatal care and appropriate and coordinated services and supports have been demonstrated to positively influence outcomes.

Mothers and fathers of young children are sometimes unprepared and undersupported in their role as parents. In order to grow up healthy and well adjusted, infants and young children need responsible, consistent, appropriate care within a safe, stimulating and supportive environment. Such environments promote physical health and social and emotional well-being, inspire learning and build self-esteem. Parents and caregivers require the necessary knowledge, skills and supportive conditions in order to be able to effectively provide the underpinnings of lifelong health and well-being for their children.

High-risk children often face cumulative effects of multiple and complex problems. Communities are caring for a greater number of children with medical or behavioural problems requiring immediate and comprehensive responses. Communities and society-at-large have critical roles in ensuring that expectant parents, parents, caregivers and children have the necessary conditions that foster healthy early child development within safe and supportive environments.

The following chart represents the influences on early child development from preconception to school entry and illustrates the social and physical environments that each child will experience. Each of these environments includes significant determinants of healthy child development.

Influences on Early Child Development



4.0 The Population Health Approach: Changing Roles

The healthy development of children can be achieved only through the collaborative efforts of many sectors. The health sector has a unique and critical role to play in healthy child development. Traditionally, the health sector has provided universal access to health care and public health services, which has significantly improved the health status of Canadian children. As well, the sector has made crucial contributions to research in maternal and child health. It has advanced understanding of health promotion, disease and injury prevention and, more recently, the critical determinants of population health.

A population health approach considers all factors that influence or determine health. By working across the range of health service providers and with other sectors to improve those conditions and environments that determine the health of the entire population, including those most at risk, the health of Canadians has been, and can continue to be, improved. This approach is particularly crucial to improve outcomes during the critical prenatal, birth and early childhood phases. A population health approach confirms the need for continued investments to ensure:

- Universal access to quality health care and public health services;
- The integration of services across the health sector and with other sectors that provide services and supports to expectant parents and families with young children; and
- The implementation of public policies to ensure supportive environments for young children and their families.

Working in a population health model has involved a change in the roles, practices and skills of health care professionals. Health care professionals must continue to build strategies that address the needs of the whole population of children, families and community while they continue to serve the individual children and families they work with. Health care professionals need to continue working collaboratively with other sectors and sharing their knowledge with others, such as family resource centre workers, childcare workers, outreach workers and peer supporters.

Throughout Canada, governments are implementing broad structural reforms to their health systems. These reforms provide the health sector with the opportunity to ensure that healthy child development is the foundational building block of an effective health system. As the primary and often sole public contact for young children and their parents/caregivers, the health sector has a unique role to play in the early years of development. It is important that integrated cross-disciplinary and cross-sectoral systems for supporting expectant parents, young children and their families are embedded in health policies and in all planning and restructuring initiatives.

5.0 What the Health Sector Can Do: Priorities for Action

In preparing this paper, the ACPH Working Group on Healthy Child Development examined the many areas where action by governments and other sectors is needed to improve outcomes for children. Deliberate choices for recommended priority actions have been made that reflect the best opportunities for a health sector contribution. Some of these priorities are broad in nature, requiring ongoing, longer-term action at the systems development level. Others address specific health concerns for young children in support of both the articulated goals of all jurisdictions for healthy child development and the goals of the National Children's Agenda.

Partnerships that are multi-sectoral and multi-jurisdictional will achieve the greatest success in ensuring that young children are well prepared and ready to learn when they enter school and in ensuring healthy development throughout the lifespan.

5.1 Access to Quality Health Care and Public Health Services

A critical element for the health and well-being of children is a strong, universally accessible system of health care and public health services. The health system is a major contributor to the improved health status of Canadian children.

Broad structural reforms to health systems in most jurisdictions provide an opportunity for the health sector to ensure that healthy child development is embedded as the cornerstone of any restructured health system. Enhanced professional education and skills development in the area of early child development for primary care providers are essential. In addition, it is important to be sensitive to and provide services in ways that respect the needs and rights of children and their families.

Recommended actions:

- ◆ Improve access to services for children and families in rural and remote areas
- ◆ Enhance professional education in early child development for all primary care providers
- ◆ Improve human resource planning to provide an optimum mix of programs and services
- ◆ Investigate innovative forms of access (e.g. tele-care)

- ◆ Explore various practice models in partnership with communities
- ◆ Examine ways to improve access to non-insured health services, such as prescription drugs, dental care and optical care

5.2 An Integrated System for Early Child Development

The health and well-being of children cannot be achieved solely through the health sector. A number of government departments and sectors are involved in the provision of services and supports to expectant parents and families with young children. Families often experience fragmentation and difficulties in accessing needed services and supports.

Many governments are currently implementing reforms in primary care, hospital service delivery and community health services, such as long-term care, in order to ensure more cohesive or “seamless” systems. Often, these initiatives are not focussed on the development of a coordinated child- and family-focussed service delivery system. Of those that are coordinated, many focus on high-risk families rather than all expectant parents and families with young children. As well, health service restructuring has not always involved other sectors, such as social services, recreation or municipal services, as full partners in designing a restructured integrated system of services and supports.

There is a need for the health sector to integrate the range of health services and health supports and to link this system to a more comprehensive and coordinated system of services and supports for expectant parents, children and their families. Models for providing more accessible and coordinated child- and family-focussed health and social services should be supported.

A primary care practitioner (e.g. physician, nurse, midwife) is usually the first point, and sometimes the only point, of contact for an expectant parent. It is essential that primary care practitioners be linked to a network or system of services that can support expectant parents through pregnancy, birth and child rearing. Education and preventive care, including screening, mental health care, family planning and sexual health advice, on-call services, after-hours services and access to a coordinated system of hospital and community services and supports are crucial components of an integrated system to support all expectant parents and families with young children. It is critical that primary care providers have sound knowledge about healthy child development, determinants of health and the full range of services and supports in order that timely and appropriate referrals can be made.

5.2.1 Preconception

Prenatal experiences have a profound effect on the health and well-being of infants and young children, and on adults later in life. Therefore, efforts should be undertaken to increase the health of the entire population during the preconception period, so that women and men are as healthy as possible when pregnancy begins. Strategies should target children, youth, parents, caregivers and the general population in their reproductive years and should be integrated into schools and community-based organizations.

Providing adequate care and support during the preconception period should be a priority for the health sector, as there is a gap in this area.

Some programs and services that could be enhanced:

- ◆ Sexual health and family life education (particularly for adolescents)
- ◆ Knowledge and information on planned pregnancies
- ◆ Healthy lifestyle choices, including tobacco use/reduction; alcohol and other drug use; nutrition/diet; physical activity

5.2.2 Prenatal and Perinatal Care and Support

Expectant parents and families with infants require easy access to a comprehensive range of health and social services and supports. A prenatal and infancy service system includes easy access to information; opportunities for parental training and skills development and support through a variety of programs and services; health professionals well trained in healthy child development and well informed about the supports and services in the community; family-focussed care, including after-hours services and family involvement in all aspects of decision-making; early and appropriate screening of parents and newborns; and timely referrals to appropriate services and supports.

Many early childhood intervention programs and strategies have been proven to work. For example, research on home visiting has demonstrated that it is a crucial component of early intervention and prevention services, not only to identify expectant parents and families with difficulties and to provide service for them, but also to link them to relevant services. Expansion of home visiting programs could improve the developmental outcomes for a number of children. While such programs do not solve all problems in families, they provide an early entry point into the service system for parents and sustained support for those with a greater

need. Several criteria are important: home visiting must be one component of an integrated service system to be effective, and it must link families to health care, social services and the education system. Universal contact is important to identify those who may benefit from other services. When para-professionals are providing home visiting services, training is critical to enable them to deal with the complexities that many families face. In addition, the framework for home visiting programs must be one of early child development.

Since healthy birthweight – and, specifically, the prevention of pre-term labour – is a significant contributor to early healthy child development, community-wide, population health approaches that focus on promoting healthy birthweight and preventing pre-term labour are essential.

Some programs and services that could be enhanced:

- ◆ Early and ongoing assessment of the physical/psychosocial health of mother, fetus and infant
- ◆ Screening, risk assessment and referral (violence, drug and alcohol use)
- ◆ Support for women to reduce/eliminate drug and alcohol use (prevention of Fetal Alcohol Syndrome/Fetal Alcohol Effects)
- ◆ Help for pregnant smokers and reduction of infant exposure to second-hand smoke
- ◆ Nutritional assessment and support
- ◆ Medical and psychosocial support and referral
- ◆ Health education and promotion
- ◆ Support for breastfeeding
- ◆ Effective parent education and parenting skills development
- ◆ Home visiting services
- ◆ Family-focussed primary health care services
- ◆ Case coordination and easy access to a coordinated system of prenatal and child development services

5.2.3 Families with Young Children

The health sector can support parents in developing and maintaining effective parenting practices that nurture, support and stimulate young children. The early postpartum period and first few months of life are critical to the secure attachment between the parents and baby, the baby's physical and emotional development and the development of parenting skills. This period is also a prime period for families to interact with the health sector through multiple contact points (immunization, well-baby clinics, family resource centres, etc.).

Families typically come into contact with the health care system during their baby's first 18 months for recommended immunizations. While this period of contact with the health care system may be episodic, it is crucial to use these opportunities to assess health and psychosocial problems, provide parenting education and link families to appropriate services and supports, as families are often "invisible" to other formal systems at this stage.

Some programs and services that could be enhanced:

- ◆ Early and ongoing assessment, monitoring and support of the infant's physical health and development
- ◆ Support for breastfeeding
- ◆ Nutritional assessment and support
- ◆ Access to parenting information, education and support
- ◆ Home visiting services
- ◆ Screening, risk assessment and referral for at-risk families
- ◆ Coordinated health promotion and prevention programs and services focussed on healthy lifestyles (e.g. active living, smoking cessation programs, positive mental health and nutrition)
- ◆ Community-based family resource centres

The following table presents examples of services that the health sector can contribute within an integrated system of services for children and families, together with examples of expected results linked to the health sector activities.

Health Sector Activities Within an Integrated System of Services for Children and Families

	Preconception	Prenatal	Birth	to 3 years	to 6 years
<i>Examples of Services</i>	<ul style="list-style-type: none"> ◆ Sexual health education ◆ Family life education ◆ Counselling and support for healthy lifestyles 	<ul style="list-style-type: none"> ◆ Prenatal education/support ◆ Prenatal screening ◆ Environmental assessment (nutrition, violence, isolation) 	<ul style="list-style-type: none"> ◆ Screening (physical and psychosocial) ◆ Breastfeeding support ◆ Discharge planning ◆ Immunization ◆ Home visiting 	<ul style="list-style-type: none"> ◆ Immunization ◆ Support and education to parents and childcare providers ◆ Monitoring and assessment ◆ Referral to health and social services (housing, childcare, etc.) 	<ul style="list-style-type: none"> ◆ Ongoing assessment, monitoring and support ◆ Consultation and coordination with other service providers
<i>Examples of Results</i>	<ul style="list-style-type: none"> ◆ Planned, healthy conception ◆ Reduction in unplanned pregnancies ◆ Healthy lifestyle choices 	<ul style="list-style-type: none"> ◆ Prevention of alcohol, tobacco and drug use ◆ Healthy pregnancies ◆ Full-term labour 	<ul style="list-style-type: none"> ◆ Healthy birthweights ◆ Secure attachment ◆ Safe and supportive environment 	<ul style="list-style-type: none"> ◆ Children achieve developmental milestones ◆ Families are linked to services and supports 	<ul style="list-style-type: none"> ◆ Children achieve developmental milestones ◆ School readiness

5.3 Parenting Education, Skills Development and Support

Secure attachment to a significant adult is the best predictor for a child to become a healthy, productive adult.

Raising a child is probably the single most crucial personal challenge parents face, and a nurturing, supportive family is the best foundation for good child development. Parenting education, skills development and support for parents and families are essential to improve circumstances for children.

New research on early child development confirms that a key requisite for optimal child development is secure attachment to a trusted caregiver, with consistent caring, support and affection early in life. Effective parenting practices, along with family stability, security and close, warm and supportive relationships, are some of the most important protective factors in promoting optimum early child development.

The health sector can support parents in developing and maintaining effective parenting practices that nurture, support and stimulate young children.

Recommended actions:

- ◆ Provide supports to parents and expectant parents
- ◆ Promote effective parenting skills and practices (nurturing skills and recognition of potential for, or existence of, violence/abuse)
- ◆ Disseminate knowledge targeted to families and the general public (promotion of secure attachment, emotional control, emotional development, injury prevention, effects of second-hand smoke)
- ◆ Develop social marketing campaigns to promote key messages, such as “Parenting is an important job,” “All parents need support at some time,” “Reading to your children meets many developmental needs”
- ◆ Encourage collaborative development of models and program resources (e.g. educational, promotional and informational)

5.4 Injury Prevention

Injuries remain the leading cause of death for children and youth after their first birthday and a major cause of hospitalization and disability. Aboriginal children are six times more likely to die by injury, poisoning or violence.

Childhood injuries are preventable. Governments, communities and industry all play a crucial role in ensuring that children are safe. Parents and caregivers also need to be aware of common safety hazards and the steps they can take to reduce hazards. Actions are required across jurisdictions and across sectors to ensure safer homes and childcare settings, safer communities, reduced motor vehicle accidents, and reduced deaths and disabilities due to suffocation, burns, poisoning, drowning and falls. The health sector needs to work in partnership with other sectors on a range of initiatives to prevent childhood deaths and injuries.

Recommended actions:

- ◆ Improve surveillance of childhood injuries and their determinants
- ◆ Develop and enforce more rigorous standards to ensure the safety of homes, childcare settings, children's toys and equipment
- ◆ Initiate broad-based community efforts to encourage the use of child safety seats, smoke detectors, window guards and flame-retardant sleepwear and to reduce the temperature of tap water in homes and childcare settings
- ◆ Increase intersectoral collaboration on best practices, standards/legislation

5.5 Environmental Health

Young children are particularly vulnerable to environmental health risks. There is substantial evidence linking the effects of both natural and human-made environments to early child health and development, including prenatal health and development. Because of their rapid growth and their physiological and metabolic immaturity, the fetus and child are often at increased risk from exposure to toxic substances in their environments. In addition, greater air, food and fluid intakes relative to body weight compared with the adult increase the child's potential for excessive exposures. The crawling stage of infancy and the play patterns and short stature of toddlers also increase their exposure to dust and heavy and volatile substances that accumulate near the floor.

The exposure to environmental toxicants is compounded by social factors, such as poverty. Living in poor-quality houses, near hazardous sites, in former industrial properties, and in overcrowded circumstances, often without quality recreational space, has a negative impact on health. The effects from childhood exposure to chemical and other hazards are often not seen for decades.

Asthma is the most frequent childhood illness after the "common cold," and it is the leading cause of hospitalization for infants and young children. Air quality, particularly exposure to second-hand smoke, is an important environmental health concern.

Addressing environmental health threats with a specific focus on children requires coordination across sectors, such as health, environment and others. The health sector has an important role to play not only in research and surveillance, but also in public awareness, education and regulation.

Recommended actions:

- ◆ Develop national multi-sectoral actions on environmental impacts on healthy child development
- ◆ Initiate monitoring and surveillance (i.e. respiratory illnesses such as asthma)
- ◆ Increase public awareness and education (i.e. second-hand smoke)
- ◆ Implement regulation/legislation (i.e. environmental pollutants)

5.6 Monitoring and Measuring

Regular measuring of and reporting on the development of children provide governments and others with a powerful tool to inform and improve policy-making and to ensure that actions are as focussed and effective as possible. Effective monitoring and measuring offer an opportunity for governments to share information on effective practices and consequently improve outcomes for children.

The National Children's Agenda proposes an outcome-oriented approach to monitoring that reflects our understanding of the key stages of child development and the environments that influence that development. The health sector has been and will continue to be an important partner in the work of the National Children's Agenda. Determinants of health and health status outcomes along the lifespan should be monitored. Some indicators include birthweight, emotional and behavioural indicators and academic achievement. The data should describe current status and trends over time. It is also important that the data be compiled at the community level, as well as at provincial/territorial and national levels, so that communities and governments can monitor their progress and community and regional comparisons can be made.

Existing data sources, such as census data, population health surveys and major surveys like the National Longitudinal Survey of Children and Youth, will provide baseline data with which to compare future outcomes. The adoption of a standard set of indicators of healthy child development will ensure that governments are able to measure the immediate and longer-term impacts of programs and policies on children and their families.

Recommended actions:

- ◆ Continue to build health sector commitment to monitor health and well-being
- ◆ Further develop health sector capacity for health status monitoring
- ◆ Develop and adopt mutually agreed-upon indicators
- ◆ Partner with other sectors, as well as through the National Children's Agenda process, for outcome-oriented measuring and monitoring of early child development

5.7 Research, Knowledge Development and Dissemination

Research is the foundation of evidence-based decision-making and is critical to self-correcting, informed public policy that promotes the health of the population. Both qualitative and participatory research are required to complement quantitative methods of investigating healthy child development. In addition, the dissemination of research findings as well as the capacity of the entire child-serving community to apply research findings need to be emphasized. Governments have a key role to play in synthesizing and disseminating results from research, policies, programs and projects.

Developing capacity for the uptake of research findings throughout all sectors of the child-serving community will aid in the identification, development and dissemination of knowledge.

Recommended actions:

- ◆ Establish a cross-sectoral, cross-jurisdictional research agenda
- ◆ Influence existing research initiatives
- ◆ Encourage a variety of research methodologies
- ◆ Encourage intersectoral, collaborative research
- ◆ Encourage the use of applied research to validate findings and conduct cost-benefit analyses
- ◆ Encourage neuro-biological research
- ◆ Encourage research into models of service provision (prenatal and infant care service models, mix of universal and targeted approaches)

- ◆ Use research to create a more knowledgeable public on issues of child development
- ◆ Develop networks for the dissemination of research information (i.e. use knowledge about what works from Health Canada social marketing projects)
- ◆ Increase the sample size of the National Longitudinal Survey on Children and Youth
- ◆ Establish an F/P/T platform of early child development and infant mental health for one of the Centres of Excellence for Children
- ◆ Develop training and education for health care professionals

6.0 Conclusion

Healthy early child development is a very powerful determinant of health. More and more, research demonstrates the effect of prenatal and early childhood experiences on subsequent adolescent and adult health, well-being and competence. The period of early childhood represents the primary investment period to improve outcomes throughout the lifespan.

Of all the sectors, the health sector is the primary public contact point during the prenatal period and early childhood. As such, the health sector can significantly contribute to intersectoral action on early child development and to the National Children's Agenda in the early childhood period, through maintaining and enhancing universal access to high-quality health care and public health services; establishing an integrated system of health services for young children and their families that links with other sectors; collaborating at the F/P/T level (across jurisdictions and with other sectors) to develop and implement national strategies to improve parenting, prevent injuries and address environmental health issues; and establishing a cross-sectoral and cross-jurisdictional research agenda and dissemination strategy to improve outcomes for children.

The health sector has a crucial role to play in healthy early child development and the consequent long-term benefits. A strengthened intergovernmental and intersectoral approach will be necessary for the health sector to continue to improve the quality of early child development in Canada.

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