Presentation to the Senate
Subcommittee on Population Health

Dr. Kathryn Bigsby
Chair, Child Health Working Group
Canadian Medical Association

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Check against delivery

A healthy population...a vibrant medical profession
Une population en santé...une profession médicale dynamique
The Canadian Medical Association (CMA) is the national voice of Canadian physicians. Founded in 1867, CMA’s mission is to serve and unite the physicians of Canada and be the national advocate, in partnership with the people of Canada, for the highest standards of health and health care.

On behalf of its more than 67,000 members and the Canadian public, CMA performs a wide variety of functions, such as advocating health promotion and disease/injury prevention policies and strategies, advocating for access to quality health care, facilitating change within the medical profession, and providing leadership and guidance to physicians to help them influence, manage and adapt to changes in health care delivery.

The CMA is a voluntary professional organization representing the majority of Canada’s physicians and comprising 12 provincial and territorial divisions and 45 national medical organizations.
Introduction

On behalf of the CMA, I thank you very much for the opportunity to be here today and commend the Subcommittee for focusing on the critical issue of child health.

My presentation today will focus on three areas:

1. What the CMA has done and plans to do in the area of children’s health;
2. Why the CMA has chosen to focus on the early years as a priority; and
3. What the CMA recommends to the Subcommittee and government for action in the area of children’s health.

The CMA’s Role & Next Steps

Physicians see the adverse effects of poor child health all too often and we strongly believe that all children should have access to the best possible start in life. That healthy start includes opportunities to grow and develop in a safe and supportive environment with access to health services as needed.

The CMA is proud to have been a partner in the Child Health Initiative (CHI), an alliance between the CMA and the Canadian Paediatric Society (CPS) and the College of Family Physicians of Canada (CFPC) that has pressed for improvements in child health and the development of Child Health Goals.

The CHI held the Child and Youth Health Summit last year where it developed a child health charter based on three principles:

- a safe and secure environment;
- good health and development; and
- a full range of health resources available to all.

The Charter states that all children should have things such as clean water, air and soil; protection from injury and exploitation; and prenatal and maternal care for the best possible health at birth. Further, the charter recognizes the need for proper nutrition for proper growth and long term health; early learning opportunities and high-quality care, at home and in the community; and a basic health care including immunization, drugs, mental and dental health.
Delegates at the Summit also endorsed the Child Health Declaration and the Child and Youth Health Challenge, a call to action to make the charter a reality.

Going forward, the CMA will invest considerable time and effort to develop policy targeting children from birth to five years of age.

To that end the CMA will host the Child Health Expert Consultation and Strategy Session on June 5-6, 2008. The purpose of this consultation is to create a discussion paper to:

- First, identify how CMA can help physicians improve the health of children under five; and second,
- Identify the key determinants of early child health and identify goals and recommend ways to achieve optimal health outcomes for children under five.

This paper will inform a Roundtable Discussion of Child Health Experts in Fall 2008 where we hope to produce a final report on the Key Determinants of Children’s Health for the Early Years.

We then hope to be invited to come before this Subcommittee once again to present this report and discuss our conclusions and recommendations.

**Why the Early Years**

The CMA is focusing on the period from birth to five years old because it is a critical time for children and when the physicians of Canada are perhaps in the best position to make a difference.

Recent human development research suggests that the period from conception to age six has the most important influence of any time in the life cycle on brain development. As well, we are all well aware that Canada could be and should be performing better in comparison to other OECD nations in a number of key areas such as infant mortality, injury and child poverty.

We also know that:

- Early screening for hereditary or congenital disease must take place between the ages of zero and five in order to provide effective intervention; and
- Brain and biological pathways in the prenatal period and in the early years affect physical and mental health in adult life.

Physicians are well positioned to identify and optimize certain conditions for healthy growth and development. Physicians can identify and prescribe effective interventions following many adverse childhood experiences in order to improve health outcomes for children and as they grow into adults.
Recommendations

The CMA believes that there are a number of actions government could be taking today in the area of children’s health.

First, Canada should not be at the bottom of the list of developed countries when it comes to spending, as a percentage of GDP, on early childhood programs and development. Investing in early development is essential for an optimal start to life and a physically, mentally and socially healthy childhood.

Second, we need to improve our surveillance capability to better monitor changes in children’s health because we can’t manage what we can’t measure. That is why the CMA recommends the creation of an annual report card on child health in Canada.

Third, nearly one child in six lives in poverty in Canada. This can impact a child’s growth and development, his or her physical and mental health and ultimately the ability to succeed as teenagers and adults. Governments can and must do more.

Finally, there are a number of recommendations within the recently released Leitch Report in areas such as injury prevention, environment vulnerabilities, nutrition, aboriginal and mental health. The CMA strongly supports these recommendations and urges this Subcommittee to consider them.

However, if there are two recommendations within the Leitch Report that the CMA believes government could and must act upon immediately, they would be the creation of a National Office of Child Health and a Pan-Canadian Child Health Strategy.

Conclusion

In conclusion, the CMA strongly supports the Subcommittee’s work and its focus on child health.

Again, we hope to return to see you again this fall with specific recommendations to address child health determinants, especially those affecting children from birth to age five.

Canada can and should be among the leading nations on earth in terms of children’s health status. Our children deserve no less.

Thank you.