



THE FONDATION DR JULIEN INITIATES A CALL TO ACTION FROM CANADA'S SOCIAL PEDIATRICIANS:

Let's stop the silent epidemic of toxic stress in children now!

The primary objective of Canadian health care policy is to “protect, promote and restore the physical and mental well-being of Canadians and to facilitate equitable access to health services without financial or other barriers.”¹ Canada's ratification of the Convention on the Rights of the Child in 1991 also commits us to ensuring the full development and health of Canadian children. But progress on this front has fallen short, particularly for the many children living in vulnerable circumstances. And these children represent a significant percentage of the Canadian population.

- We are social pediatricians who work in collaboration with care providers from different sectors to improve the accessibility and quality of care for vulnerable children, many of whom who are not receiving the support they need to grow up healthy and reach their full potential.
- Health inequalities continue to increase in this country. The gap between disadvantaged and more affluent children is not improving – in fact, it is widening. In our clinics, we observe on a daily basis the devastating effects of this situation on the health, development and well-being of children.
- Every day, we see parents frustrated and helpless as they try to navigate a system that is institutionalized and fragmented, a system that questions their parenting ability yet offers only partial and ineffective solutions.
- The toxic stress that vulnerable families experience has direct and far-reaching effects on their children: cognitive delays, physical and emotional deficiencies, difficulties at school and with learning, major health problems that can persist into adulthood and become permanent, and elevated rates of mental illness beginning very early in life.
- Most of these problems can be prevented. Corrective actions taken in early childhood can check the effects of toxic stress on the brain and put the child back on a trajectory of healthy development.

¹ Canada Health Act (Section 3). <http://laws-lois.justice.gc.ca/eng/acts/C-6/page-1.html> (April 11, 2018)

Science has shown that adverse childhood experiences (ACEs) like poverty and violence have a significant effect on health, greatly increasing the risk of mental illness, cardiovascular disease, substance abuse, obesity and other disorders in adulthood. As a result, life expectancy between “rich” and “poor” neighborhoods can vary by as much as 21 years.² It is now clear that the production of cortisol caused by toxic stress affects the development and architecture of the young child’s brain. Note that in Canada, 27% of children entering grade 1 show vulnerability in at least one developmental sphere (social, cognitive, linguistic, physical, emotional). In disadvantaged neighborhoods, the proportion rises to 36%.³ Despite the well-documented association between poverty and toxic stress, 22.2% of Canadian children – that’s some 1.2 million children! – still live in poverty.⁴

We call for action to ensure all vulnerable children have access to comprehensive, quality health care and services that enables them to develop to their full potential, and that these services be provided in a way that respects their rights and dignity.

- We know that poverty-reduction initiatives improve health. Therefore, we ask that poverty be acknowledged as a major factor underlying the social determinants of health, and that poverty-related issues that impact the health of children be prioritized by governments. These include food, shelter, early stimulation and bonding, access to integrated health care, access to appropriate educational resources, and full support for parents.
- As health professionals who play a special role in caring for children, we ask that our plea to remedy the effects of poverty on child health be heard, and that our expertise be called upon and our recommendations taken into account when taking action.

We call for the prevalence of toxic stress in children to be recognized for what it is – an epidemic – and for it to be labelled as such; for the impact of toxic stress on children to be identified as *post-toxic stress developmental disorder*⁵; and for the creation of a coordinated action plan at the national level.

- We ask that politicians, institutions, professionals and the population be made aware of the prevalence of this disorder in Canadian children.
- We ask that children be heard, that they be recognized as full members of the community, that their fundamental rights be defended, and that their social and economic value in a

² *Health Care in Canada: What Makes Us Sick?* Canadian Medical Association, July 2013.

³ Canadian Institute for Health Information. *Children Vulnerable in Areas of Early Development: A Determinant of Child Health*. Ottawa, ON: CIHI; 2014.

⁴ UNICEF Office of Research (2017). “Building the Future: Children and the Sustainable Development Goals in Rich Countries,” *Innocenti Report Card 14*, UNICEF Office of Research – Innocenti, Florence.

⁵ N. Steinmetz (October 2017). *Toxic Stress in Early Childhood – A Silent Epidemic*. Communication presented at the Annual Conference of the Canadian Association of Paediatric Health Centres, Montreal.



healthy society be acknowledged. Their voice is essential and must inform any actions undertaken.

- The commitment to this cause must be formal and sustained.

We call on politicians and government leaders to make it a national priority that every child, whatever their economic, cultural or social situation, receives the support they need to develop to their full potential.

We call on clinicians, professionals, care providers, members of the community, and children to come together and build a system of comprehensive health care and services that is accessible, integrative and based on the needs and rights of the child.

