

The Health of Canada's Children: A CICH Profile

INCOME INEQUITY

The *Health of Canada's Children: A CICH Profile, 3rd Edition*, is based on a comprehensive review of national and provincial data sources and extensive consultation with experts from many fields. The *CICH Profile* contains ten chapters and 398 charts pertaining to the health and well-being of children and youth. It provides a relevant and clear picture of children today, and gives some direction for assisting them as they explore their futures.

Income inequity:

- Research demonstrates that wide disparities in wealth are intricately connected with the health of a population. The greater the level of income inequity, the poorer the population health. Those with the lowest incomes have the worst health outcomes, but the negative impact of inequity is felt among all.

Poverty:

- The after-taxes poverty rate for children is significantly higher in Canada (14%) than in countries such as Sweden (3%), the Netherlands (6%), France (7%), Germany (7%) and the United Kingdom (10%). The after-taxes poverty rate for children is significantly lower in Canada than in the United States (22%).
- The number of children living in poverty (below the Statistics Canada Low-Income Cutoffs) in Canada grew by over 700,000 between 1981 and 1996. One in four children lived in poverty in 1996 compared with one in eight in 1981.
- In all provinces, younger children are at greater risk of poverty than older children. The national poverty rate for children under the age of 7 climbed to 25% in 1996. It was 13% in 1981 and 21% in 1991. For children between the ages of 7 and 17, the poverty rate in 1996 was 19%.

Social assistance and minimum wage:

- In 1998, across Canada, social assistance provided lone-parent families with one child with an income that amounts to between 50% (in Alberta) and 69%

(in Newfoundland) of the poverty line. Social assistance, therefore, did not provide these families with adequate incomes to ensure that they could meet their needs. Housing and food security is jeopardized for these families.

- To reach the Statistics Canada low-income cut-offs, families working for minimum wage must work long hours. This is true for lone-parent and two-parent families. Depending on the province, lone-parent, one-child families needed to work between 61 and 80 hours per week in 1996. Two-parent, two-child families needed to work between 89 and 118 hours per week. Research shows that families working under these conditions can experience extreme stress that may compromise family functioning.

Risk factors:

- Living in a lone-mother family is a risk factor for poverty. Between 1981 and 1997, the rate of poverty for children in lone-mother families was dramatically higher than the rate for children in two-parent families. In 1997, the rate of poverty for children in lone-mother families was 60% - for children in two-parent families it was 13%.
- Children who are from visible minority groups are at elevated risk of living in poverty. 43% of children under 15 years of age who belonged to visible minority groups lived in poverty in 1995.
- Aboriginal children are at increased risk of poverty. 52% of Aboriginal children under the age of 15 years lived in poverty in 1995.
- Children under the age of 15 years who have an activity limitation are more likely to live in poverty than children of the same age with no activity limitation (37% compared to 23%). The families of children with activity limitations must often reduce or modify their workforce participation in order to care for their children in the absence of appropriate child care, respite and family responsibility leave policies.

Inequity and child health:

- Children who live in poverty encounter more hurdles to healthy development and are, consequently, at an elevated risk for a wide range of negative health outcomes.
- Babies born to low income parents are at an increased risk for low birth weight. In 1994-95, where the household income was less than \$30,000, the low birth weight rate was 7%. Where the household income was greater than \$60,000, the rate of low birth weight was 4%.
- Income and injury are inversely related for boys. Males from birth to 19 years of age in the poorest quintile had an injury death rate of 22/100,000 compared to 15/100,000 for male children in the richest quintile. The higher rate of injury death among male children in low income families may be attributable to unsafe housing, a lack of safe play spaces and limited access to supervised recreation and sports.
- The poorest 20% of children are at greater risk of dying in a fire or a homicide than other children. The rate of death in fires was 1.7/100,000 for the poorest children compared to 0.4 to 0.1 for other children. The rate of homicide death was 2.5/100,000 for the poorest 20% of children compared to 1.1 to 0.5 for other children.
- Children living in households with incomes less than \$20,000 per annum are at considerably elevated risk of “hyperactivity” and “delinquent behaviours”.



For information about the sources of the data, please refer to *The Health of Canada's Children: A CICH Profile, 3rd Edition*. To order your copy of the *CICH Profile*, please contact:



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