



Child & Youth
Advocate
Défenseur
des enfants et de la jeunesse



CHILDREN IN CARING COMMUNITIES: FROM KNOWLEDGE TO RESPONSIBILITY

The 2013 New Brunswick State of the Child Report

And

The Children's Rights and Well-being Framework for New Brunswick

November 20th 2013

Child and Youth Advocate (Office)

The Child and Youth Advocate has a mandate to:

- Ensure that the rights and interests of children and youths are protected;
- Ensure that the views of children and youths are heard and considered in appropriate forums where those views might not otherwise be advanced;
- Ensure that children and youths have access to services and that complaints that children and youths might have about those services receive appropriate attention;
- Provide information and advice to the government, government agencies and communities about the availability, effectiveness, responsiveness, and relevance of services to children and youths; and
- Act as an advocate for the rights and interests of children and youths generally.

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Children in Caring Communities: From Knowledge to Responsibility

Introduction

Recalling that, in the Universal Declaration of Human Rights, the United Nations has proclaimed that childhood is entitled to special care and assistance,

Convinced that the family, as the fundamental group of society and the natural environment for the growth and well-being of all its members and particularly children, should be afforded the necessary protection and assistance so that it can fully assume its responsibilities within the community,

Recognizing that the child, for the full and harmonious development of his or her personality, should grow up in a family environment, in an atmosphere of happiness, love and understanding,

Considering that the child should be fully prepared to live an individual life in society, and brought up in the spirit of the ideals proclaimed in the Charter of the United Nations, and in particular in the spirit of peace, dignity, tolerance, freedom, equality and solidarity...

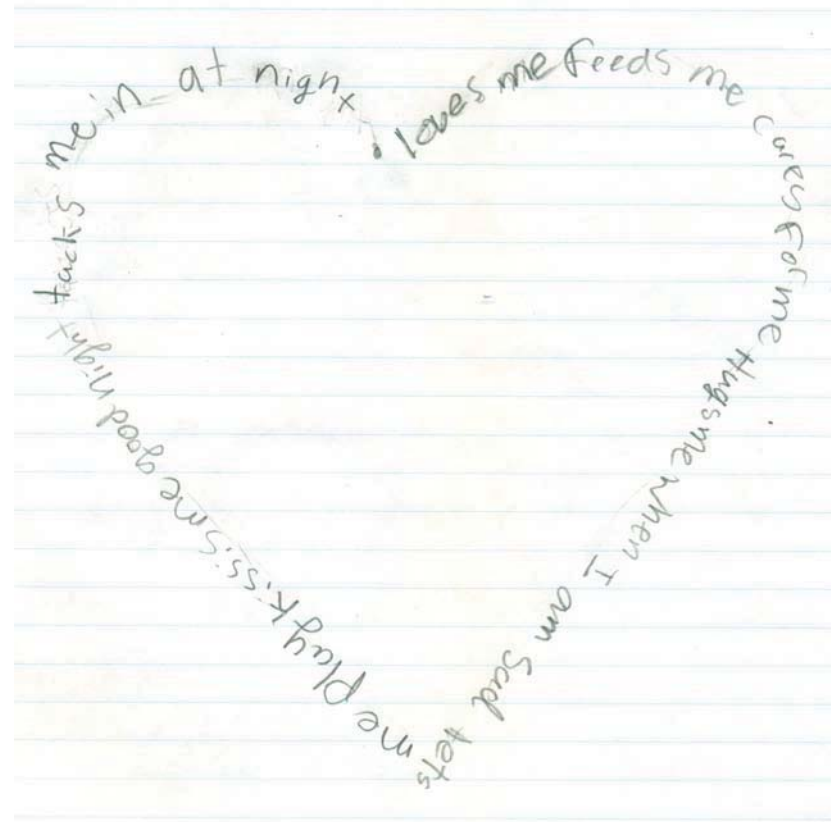
Preamble to the UN Convention on the Rights of the Child

“[T]he child should grow up... in an atmosphere of happiness, love and understanding.” These words, taken from the Preamble of the United Nations *Convention on the Rights of the Child*,¹ form an ideal, a deeply held human aspiration that guides, or should guide, the action of every person and organization the world over in our relationships with children. More than anyone, children speak to us as representatives of future generations and remind us of our obligations towards others.

As in Glooscap’s Creation stories, in the Mi’kmaq and Wolastoqiyik tradition, children look to us with dazzling eyes, they draw us outside of ourselves and force us to focus on others – those who will follow us tomorrow and those around us today. Children remind us of our common human dignity and worth, and that the global human rights agenda is not about personal emancipation and unbridled freedom. It is instead about setting ground rules for respectful and responsible relationships towards one another – moving from “me” to “we”. That is what we learn when we are raised with happiness, love and understanding. That is what we claim as a birthright for ourselves and for our children.

The vision and the goal set out in the *Convention on the Rights of the Child* (often referred to in our report as the “Convention”) is a good one, a powerful universal aspiration. The problem, of course, is in living this vision and keeping it always in mind. The Child and Youth Advocate’s annual State of the Child report is a reference tool to help strengthen and achieve that vision in the Province of New Brunswick. We believe that New Brunswick can

and should be a world leader in respecting children’s rights, empowering their voice, providing all children with equal opportunities and protecting them from harm.



In the past two years, with the help of the New Brunswick Health Council and representatives from all child-serving government departments and agencies, the Advocate's Office has published an annual Children's Rights and Well-being Framework. Building off the data monitoring and reporting in State of the Child reports since 2008, the Children's Rights and Well-being Framework constitutes a national best practice for measuring and monitoring the implementation of children's rights at home.

In previous reports we echoed the advice from departmental officials that in relation to child well-being in New Brunswick we were data rich and information poor. The Children's Rights and Well-being Framework has now changed that. We are no longer information poor. We have now achieved the goal of having a standardized annual outcome measurement tool with indicators and outcomes for all the fundamental rights of New Brunswick children. We can now see three years of comparable data, disaggregated by gender and with specialized data in relation to First Nations children in our province comparing their wellness to their peers right across Canada. We can determine at a glance where we are helping our children thrive, where they are facing new challenges, and also where we are failing them by refusing to act. With information, however, comes knowledge, and with knowledge comes responsibility.

When we see the problems clearly, we are better-equipped to address them. It is troubling to see our rates of childhood obesity flatline at the bottom of the pack in Canada year after year, despite warnings from pediatricians, kinesiology experts and the

Advocate's Office. It is discouraging to see the average use of screen time per day increase significantly. On the other hand it is encouraging to see that when we act on our knowledge base with responsibility we can get good results. In the promotion of breastfeeding for infants, and breastfeeding exclusively for children up to at least six months of age, we are seeing good results. Many stakeholders have been working toward reducing criminalization of youth, and here again the results, though somewhat modest, are encouraging. When responsibility is met with understanding, action and resolve, children's lives improve. That is what is required in order to put children's rights promotion into action. We need to do more of this in order to ensure that our children are resilient, respectful, healthy and happy.

In 2011 and 2012, our State of the Child reports focused on Article 31 of the *Convention on the Rights of the Child* and the child's right to play, rest, leisure, recreation, and to participate in the arts and culture of his or her community. This focus was strategic because:

- i) it is a fundamental human right that is specific to children,
- ii) it is a basic building block for all of the child's future development; and
- iii) it was an excellent means of engaging communities in a serious conversation about respecting the rights of children.

In our 2012 report *Play On! Children Helping Children*² we wanted to demonstrate how the data in the Children's Rights

and Well-being Framework should be used. It is not good enough to analyze the data and make information available; we also have to act on that information. In *“Play On!”* we therefore introduced a targeted action plan for Article 31, nine action items to improve children’s lives through rest, play, sports, arts and culture. Our exercise was meant to be illustrative, but we will be following up with various government departments in the coming months to determine what progress we can make on the proposed targeted action plan. This year we have been more deliberate and collaborative in our approach.

In the spring of 2013 the Child and Youth Advocate’s Office initiated a process to help the Province move from knowledge to responsibility with respect to child rights implementation. Inspired by the UN’s Concluding Observations to Canada³ on our implementation of the *Convention* and the UN’s recommendation for a Coordinating Framework, or Plan of Action for child rights implementation, we looked to the data and the *Convention* to determine, after Article 31 and play, what should be the next basic building block in making New Brunswick more child-centered and child friendly. The obvious starting point, from our perspective as a Child and Youth Advocate, was to address the most urgent cases; cases with which our Office is all too familiar – cases of abuse, neglect and maltreatment.

Encouraged by the success of the Working Group on Child Rights Impact Assessments that we co-chaired with the Executive Council Office last year, we wrote to the Deputy Ministers of Executive Council’s Office, Education and Early Childhood

Development, Social Development, Health, Justice, Public Safety, Post-Secondary Education, Training and Labour, and Healthy and Inclusive Communities and asked them to designate a senior official within their Department to help develop a provincial strategy to reduce and prevent harm to children for the Province of New Brunswick.

With this year’s State of the Child Report, our office and these government departmental stakeholders are seeking to engage with business leaders and non-governmental stakeholders to develop a Provincial Harm Prevention Strategy for Children. The goal is to develop the Strategy over the next twelve months, based on consultations launched with the release of this report. Minimally, the Harm Prevention Strategy for Children will inquire into broad areas of harm to children including:

- i) a focus on our child protection, foster care, and adoption systems to ensure that when children are removed from harm’s way, they are then made safe and secure and their lives improved;
- ii) a focus on determinants of health and well-being to ensure that child and adolescent mental health is improved and that children are lifted out of conditions of poverty that may cause them harm;
- iii) a focus on our youth criminal justice system to ensure that institutional harm to children is reduced as much as possible while meeting our public safety goals; and

iv) a focus on standards of care applicable to the community sector and on the establishment of an accountability process to ensure that children are safe from harm when in the care of community programs, whether artistic, cultural, sport, recreational, religious or other.

Other priorities and areas of focus may emerge as consultations with New Brunswickers unfold. The Advocate's Office will emphasize in all its consultations the importance of consulting New Brunswick children and youth with respect to their lived experience of abuse, neglect or maltreatment. All persons interested in coming forward and sharing their advice or experience are encouraged to write to the Child and Youth Advocate's Office and request meetings or submit briefs.

To be successful, the Harm Prevention Strategy for Children will require combined leadership from children and youth themselves and their parents and families, from government, from the business sector and from community leaders across the province. This year's State of the Child report begins the process of community mobilization to ensure better implementation of a child's right to be safe from all forms of harm. Part I of this report

looks at defining the scope of a child's rights under Article 19 of the *Convention on the Rights of the Child*, defining harm to children where it occurs. It also considers how harm needs to be addressed by governments through preventative and punitive measures.

Part II expands on that overview looking at all the data in the 2013 report. It addresses the inter-relation between Article 19 and all the other rights of the child. These rights are clustered in groupings of rights and their implementation is measured in the nine tables of the Children's Rights and Well-being Framework. Part II of the report seeks to provide an overview of the situation of harm to children in New Brunswick. Finally, it will look at all the trends in relation to this year's statistical portrait of NB children and youth and identify other areas of concern beyond the focus on reducing harm to children.

Following the conclusion to this year's report, in Part III we have published a consultation document to engage New Brunswickers in a collective exercise of reflection, to inform and direct the proposed Harm Prevention Strategy for Children.



PART I – A FOCUS ON ARTICLE 19

Article 19

1. government shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.

2. Such protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment..

United Nations Convention on the Rights of the Child

The broad goal of protecting children from all forms of harm requires a good understanding of Article 19 of the *Convention on the Rights of the Child* ('the *Convention*'). The United Nations uses the expression 'all forms of violence' as an umbrella term for each aspect of Article 19 of the *Convention*.⁴ Article 19 refers to "all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse." For the purposes of this year's State of the Child report, we will refer to 'all forms of *harm*' to include every aspect of Article 19.

The *Convention on the Rights of the Child*, as international treaty law, places binding obligations on governments that ratify the treaty. In Canada, different levels of government have duties in relation to implementing children's rights, based upon the division of powers in our federal system of government. The provincial government has Constitutional and statutory obligations to children that are interpreted and applied in light of the *Convention*.⁵ These obligations also extend to how we regulate society, and the private sector (both non-profit and business), in order to protect children and ensure that their fundamental rights are respected. In this sense, all parts of New Brunswick society have responsibilities. We all have to help prevent harm to children. It is a collective problem for all of us to address and that is why we propose a Harm Prevention Strategy for Children that is lead by governmental and non-governmental leaders from every sector of society.

Article 4

Government shall undertake all appropriate measures for the implementation of the rights recognized in the present Convention. With regard to economic, social and cultural rights, Government shall undertake such measures to the maximum extent of their available resources.

United Nations *Convention on the Rights of the Child*

The idea of a Harm Prevention Strategy for Children is not original. Its merit stems from the fact that it is the current recommended approach universally. In the United Nations Committee on the Rights of the Child's General Comment 13, a targeted and intersectoral approach to preventing harm to children is recommended:

In order to establish a more feasible and flexible instrument, the Committee is proposing a "coordinating framework on violence against children" for all child rights-based measures to protect children from violence in all its forms and to support a protective environment...

This coordinating framework can provide a common frame of reference and a mechanism for communication among government ministries and also for state and civil society actors at all levels with regard to needed measures at each stage of intervention identified in article 19. It can promote flexibility and creativity and allow for the development and implementation of initiatives led simultaneously by both government and community, but which are nonetheless contained within an overall cohesive and coordinated framework.⁶



General Comment 13 is also helpful in explaining why preventing violence to children is so critically important. To summarize, we are reminded that the time prior to adulthood – in New Brunswick defined as prior to age 19 – is characterized by an intense period of physical, social, and psychological development. It is also the time when we are most vulnerable to the effects of harm. Harm to children can result in physical health problems, as well as substance abuse, aggressive behavior, and various forms of self-harm.⁷ It can also lead to psychological problems such as anxiety, fear, stress, insecurity, and low self-esteem, feelings of rejection, attachment issues, trauma, alienation, depression and suicidal tendencies. Long-term consequences may include higher vulnerability to cognitive, social and psychological impairments throughout an entire lifetime.⁸

It is a sad fact that harm perpetrated against children is less likely to be brought to light than against adults.⁹ When children, especially those under the age of 12, are victims of violence, these incidents are less likely to be reported to the police than incidents involving adults.¹⁰ And yet a Canadian study from ten years ago estimated the total costs of child abuse and neglect in our country to be \$15.7 billion.¹¹ The Provincial Harm Prevention Strategy for Children will have to engage in a thorough costing not only of proposed solutions but also of the failure to bring forward solutions.

Mindful of our obligations and mindful also of the importance of our task, we are immediately confronted with numerous questions. What do we need to do as a province to ensure that everyone who is in contact with children (in government, in families, in communities, and children themselves) are able to recognize the risk factors and the signs of harm, and understand how to take appropriate action? Fear is one explanatory factor in the failure to report violence, abuse and neglect. We can understand more easily why children and youth may be afraid to report. What are the barriers that inhibit or prevent professionals or other witnesses of possible harm to children from acting on their concerns? How can we ensure that those concerns are diligently and competently addressed? Are there presently sufficient confidential, accessible, well-publicized and effective means of reporting?

What kind of minimal standards do we need in New Brunswick for anyone working or volunteering to work in a relationship of trust with children? Our review to date has revealed that the Child Victims of Abuse and Neglect Protocols,¹² the central guidelines for coordinated government response in relation to child abuse and neglect in New Brunswick, have not been revised in over a decade. The problem of a lack of a central coordinating secretariat for all services to children, which the Child and Youth Advocate has previously recommended, is emphasized by situations such as this wherein a collaborative project among various areas of government seems to have no catalyst for action. Several departments now train new staff with the Protocols with

hesitation given the references to outdated practices and lack of references to current practices.

“Securing and promoting children’s fundamental rights to respect for their human dignity and physical and psychological integrity, through the prevention of all forms of violence, is essential for promoting the full set of child rights in the Convention.”

UN Committee on the Rights of the Child,
General Comment 13

In the wake of recent child abuse cases that have come to light in the province, several community members have come to the Advocate seeking our Office’s support for more rigorous standards to protect children in the care of public, non-profit or private service agencies and other social and recreational clubs and organizations. Should there be a legislated standard of care and harm prevention practice for all civil society members who are working with children in either a staff or volunteer capacity? What training programs should be made available to staff and volunteers who work with children? Should these be legislated, or should we develop an accreditation program that non-profit

organizations and donors could recognize as a symbol of quality assurance in preventing harm to children? What happens when youth are no longer in school and stray from other positive relationship supports? Do we have sufficient supports to keep them from further harm?

The Metropolitan areas with the highest rates of violence against girls under the age of 12 in all of Canada are (1) Moncton, and (2) Saint John.

Source: Statistics Canada. Maire Sinha, "Measuring Violence against women: Statistical Trends," Juristat Article, Canadian Centre for Justice Statistics, February 25, 2013.

These are only some of the questions we should be looking into collectively over the next year in order to come up with a Provincial Harm Prevention Strategy for Children. In Appendix I to this report we frame a series of questions to begin the dialogue in our province about how we can reduce and prevent harm to children. We must begin, however, with a better and

deeper understanding of harm to children and our duties toward them as rights-holders.

Approaching the task of keeping our promises to children to keep them safe from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation within the meaning of Article 19 of the *Convention* requires some preparation. To understand the meaning and scope of this universal standard of protection for children several sources of interpretation and guidance are available to us. The first and best reference of course is to read Article 19 in the context of the whole *Convention*, having regard in particular the Guiding Principles and clustering of rights set out in Part II of this report. It is also essential to have regard to the *Convention's* Preamble and of course to the Protocols which have come subsequently to the *Convention*, the first two of which are directly applicable to the situation of protecting children from harm.

In April 2011, the UN Committee on the Rights of the Child published a new General Comment, (GC13) on the *Right of the Child to Freedom from All Forms of Violence*. This is the Committee's best and most recent advice on the implementation of Article 19. Other General Comments like GC 8 on the right of the child to protection from corporal punishment and other cruel or degrading forms of punishment, or GC 16 on the impact of the business sector on children's rights, need to be understood and considered as well. GC 13 was preceded by Days of General Discussion where experts from all over the world gathered to

summarize their advice in relation to the problem of violence against children. The recommendations from the first Day of General Discussion on “State violence against Children” from September 2000¹³ are also helpful references in interpreting Article 19 and in developing a Provincial Harm Prevention Strategy for Children.

Reference should also be made of course to the Committee on the Rights of the Child’s Concluding Observations to Canada regarding our application of the *Convention* and to the work of UN experts such as: Sergio Pinheiro, the UN’s independent expert on violence against children; Najat M’jid, UN Special Rapporteur on the Optional Protocol on the Sale of Children, Child Prostitution and Child Pornography; and Marta Santos Pais, the UN Secretary-General’s Special Representative on Violence Against Children.

There is always a risk that we can lose our focus, lose sight of our obligations to children and of how they are faring, merely letting the chips fall where they may. However, if we are diligent and responsible in keeping our promises and upholding a child’s right to be free from harm, we find that on this topic in particular there are many guidelines and plenty of reliable expert advice near at hand to ease our task. We also need to engage in a thorough assessment of the existing legal and regulatory framework in New Brunswick that governs our attempts to protect children from all forms of harm. The interdepartmental working group of experts has already initiated this task.

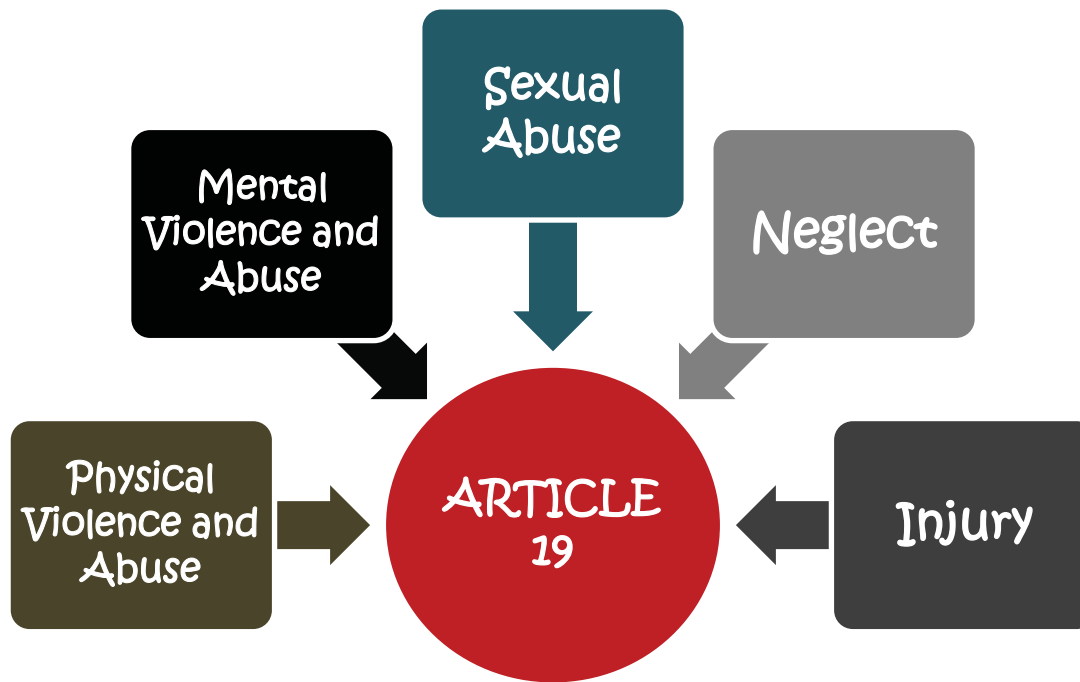
Looking then at the situation in New Brunswick, and keeping in mind the UN guidelines in relation to the implementation of Article 19, we can define the scope of Article 19 both in terms of the types of harm that it addresses and in terms of the settings in which harm may arise. We can then canvass what the province’s obligations are in order to address this harm, both in terms of prevention and redress.

WHAT WE MEAN BY ‘HARM’

Article 19 of the *Convention on the Rights of the Child* includes many different aspects in order to provide a comprehensive rights structure to protect children from all forms of harm. The United Nations Committee on the Rights of the Child refers to ‘violence’ rather than ‘harm’, but defines the scope of Article 19 as follows in its General Comment 13:

The term violence has been chosen here to represent all forms of harm to children as listed in article 19, paragraph 1, in conformity with the terminology used in the 2006 United Nations study on violence against children, although the other terms used to describe types of harm (injury, abuse, neglect or negligent treatment, maltreatment and exploitation) carry equal weight.

While the UN Committee on the Rights of the Child refers to violence to children we have used the term “harm” to children as the umbrella term to capture the full scope of Article 19. We should therefore distinguish and seek to prevent, within the meaning of Article 19, the following separate forms of harm to children.



Physical violence and abuse

Physical violence involves any type of bodily assault or use of unreasonable force. It can result from physical abuse in the family or other care or supervision settings, and can include hitting, kicking, burning, or shaking, as well as corporal punishment and physically violent 'behavioural interventions'. It can result from peer violence such as physical bullying, fighting and hazing. And it can result from self-harm (which is itself a potential sign that a child has suffered physical or sexual abuse¹⁴), a common example of which is 'cutting'.

Mental violence and abuse

Psychological abuse, verbal abuse and emotional abuse are all forms of mental violence. There are countless examples, including humiliating, insulting, disparaging, threatening, rejecting, repeatedly criticizing, frightening and isolating children. Forcing children to live in degrading conditions and ignoring their mental health needs are other forms. A child witnessing domestic violence is subjected to mental violence. Bullying is a pervasive form of mental violence. And cyberbullying is a particularly concerning form of mental violence, due to its increasing prevalence and severe effects.

Sexual abuse

Sexual abuse includes coercion, inducement, exploitation or force used against someone under the age of 18 for the purposes of psychologically harmful sexual activity, including child prostitution and child trafficking, sexual assault and production or dissemination of pornographic pictures involving minors. The perpetrator of sexual abuse of children may be an adult or an older child. Child pornography and internet exploitation are also included and prohibited within the scope of Article 19.



Neglect

Neglect means the deliberate or inadvertent failure to meet children’s psychological and physical needs. It includes failure to provide the basic necessities of life and development, both physical (such as food, shelter, clothing and medical care) and mental (such as love, attention, emotional support and education). It also includes lack of supervision and failure to protect a child from harm, including self-harm. And it includes failure to provide safe working conditions and other safe environments for children, such as play spaces. It includes lack of adequate supervision leading to exposure to violent and otherwise inappropriate images and messages. And it includes failure to report suspected harm.

Injury

Injury includes bodily or mental harm or ‘damage’ (resulting from adult violence to children, child violence to children, intentional self-harm, inadvertent self-injury, or other means), especially such harm that is not transient.

New Brunswick has the second highest prevalence rate of injuries for 12-19 year-olds in the country.

WHERE DOES HARM OCCUR?

A proper understanding of the terms of Article 19 and their definitions helps explain the magnitude of the task of harm prevention. It is made easier by considering, within the scope of Article 19, the settings where harm may occur and where we need to be vigilant. When children and youth suffer harm, it is most often at the hands of people who are close parts of their lives, such as parents, step-parents, foster parents, carers, siblings, boyfriends and girlfriends, teachers, classmates, family members, community mentors and employers.

At home

Because of the State's traditional reluctance to interfere in the family sphere, addressing harm to children in the home is often more difficult than in other settings. And yet most harm to children occurs within the home.

The Committee on the Rights of the Child recognizes the need to balance the family's protective and preventive role with a readiness to intervene as one of the guiding assumptions in implementing Article 19:

The Committee recognizes the primary position of families, including extended families, in child caregiving and protection and in the prevention of violence. Nevertheless, the Committee also recognizes that the majority of violence takes place in the context of families and that intervention and support are therefore required when children become the victims of hardship and distress imposed on, or generated in, families.¹⁵

Threats, insults, neglect and other forms of psychological harm are especially damaging when they come from the people who are supposed to care most for you. We have seen brutal examples of harm to children within families. There is, though, a spectrum of harm, and it is important to address even those generally considered to be less severe. Harsh discipline, including corporal punishment, is one of the most common forms of harm to children in homes.¹⁶ Government has a role to play in promoting non-violent, positive discipline techniques.

Harm to children may also be connected to harm to other family members. Children witnessing domestic violence suffer immediate harmful effects to their emotional wellbeing, and these often translate into problems socially, educationally, psychologically and behaviourally that last throughout a lifetime.¹⁷

When violence, neglect, and abuse, including sexual abuse, occur within the family, it is all the more difficult to self-report harm. There is always a power imbalance between the victim and the perpetrator. And there is a fear of not being believed, a fear of being rejected by loved-ones, a fear of harming them or the family's reputation and honour, a fear of humiliation or being socially ostracized.

In the Expert Consultation on Prevention of and Response to Violence against Young Children held in Lima, Peru, in August 2012, the UN Special Representative of the Secretary General on Violence Against Children reported on the staggering incidence of violence against young children as follows:

Eighty percent of children who die from violence are under six years old. Research on this topic has continued to provide evidence on this dramatic phenomenon. A recent article in the *Lancet* suggests that 300 million children under five years old are exposed to societal or community violence.¹⁸

The 2006 United Nations Study on Violence against Children also concluded that:

Between 133 and 275 million children worldwide are estimated to witness domestic violence annually. The exposure of children to violence in their homes on a frequent basis, usually through fights between parents or between a mother and her partner, can severely affect a child's well-being, personal development and social interaction in childhood and adulthood.¹⁹

Another form of harm that is beginning to gain attention is the neglect, often unintentional, suffered by children and youth who must provide care for other family members. A recent publication by an Action Canada task force, "Who Cares about Young Carers"²⁰ raises this important issue in our province about children who are at risk of harm because of the care-giving responsibilities for loved ones that they are forced to shoulder at home.

In school

As school is where most children and youth spend a great number of their waking hours, it is an essential place for building protective factors in our children. And yet we know from complaints to the Child and Youth Advocate's Office and from school reports and media reports that school-based bullying is a matter of increasing concern for New Brunswickers. Also, we know that, while corporal punishment has no place in New Brunswick schools,²¹ even teachers are fallible and may get cross and verbally harangue their students to maintain discipline, or

worse, an exceptional few may abuse the trust of their pupils and harm them in other ways.



In relation to child-on-child bullying the 2013 Children's Rights and Well-being Framework underscores the need for concern. According to new survey data from last year's grade 6 to 12 students, only 42% of New Brunswick school children report that they have never been bullied (meaning that 58% of these students report that they have been bullied). On a more positive note, the percentage of these students who have not been bullied is in fact significantly higher than the last survey results where only 35% had not been bullied. Also among grade 4 and 5 students 87% report that they feel safe at school and 83% say they would feel comfortable talking to an adult at school about bullying. The question here is what are the other 13% or 17% thinking?

In her recent report on Tackling Violence in Schools,²² the UN Special Representative on Violence against Children, Marta Santos Pais, found that the urgency for ending violence against children in schools should be advanced for at least three compelling reasons:

i) reducing bullying and violence in schools is critical in allowing children to enjoy and exercise all their rights, because when they do not feel safe all their other rights, to health, to play, to learn, etc. are compromised – this can be true not only for victims of bullying, but also for those who witness it;

ii) the Special Representative argues that we must end violence in schools to “nip violence in the bud” as it were, because if we fail to confront it and address it at this level it will perpetuate itself and permeate society more broadly; and finally

iii) the third reason for tackling violence in schools is strictly economic – several national and global studies have demonstrated the crippling and catastrophic costs of not addressing school violence.

The Special Representative’s report on this third point quotes some of these studies as follows:

In the United Kingdom, 16-year-olds bullied at school were twice as likely to be without education, employment or training, and to have lower wage levels at age 23 and 33, than those who were not bullied. In turn, young men who are not in education, employment or training, are three times more likely to suffer from depression and five times more likely to have a criminal record. Statistics such as these have a significant impact on national economies. For example, youth violence in Brazil alone is estimated to cost nearly US \$19 billion every year, of which US \$943 million can be linked to violence in schools. The cost to the US economy for violence associated with schools is still higher, at an estimated US \$7.9 billion per year.

58% of New Brunswick youths in grades 6 to 12 report having been bullied.

We are pleased to note the recent reforms and efforts by the New Brunswick Government to end bullying in schools. The *Education Act* has been amended to address bullying and cyberbullying through positive learning and working environments, ²³ provincial Learning Specialists for Bullying Awareness and Prevention have been hired, and with the release of this report we are celebrating in the same week Provincial Bullying Prevention and Awareness Week and National Child Rights Education Week. The work plan and the strategic interventions of the Provincial Positive Learning and Working Environment Committees are still in development. Our goal is that by November 2014, as we celebrate the 25th anniversary of the *UN Convention on the Rights of the Child*, we will have a forward looking Provincial Harm Prevention Strategy for Children that will have at its core winning solutions to reduce school-based harm to children.

In government care, justice systems and health care settings

The UN Study on Violence against Children described the situation of violence to children in government care as follows:

55. As many as 8 million of the world’s children are in residential care. Relatively few are in such care because they have no parents, but most are in care because of disability, family disintegration, violence in the home, and social and economic conditions, including poverty.

...

58. Neglect is also a feature of many residential institutions where conditions are so poor that they put the health and lives of children at risk. In many facilities for children with disabilities, there is no access to education, recreation, rehabilitation or other programmes. Children with disabilities are often left in their beds or cribs for long periods without human contact or stimulation. This can lead to severe physical, mental and psychological damage.

...

61. Despite the obligation to ensure that the detention of children shall be used only as a measure of last resort and for the shortest appropriate period of time contained in article 37 of the Convention on the Rights of the Child, it was estimated in 1999 that 1 million children are deprived of their liberty. Most of these are charged with minor or petty crimes, and are first-time offenders.²⁴

At first glance we may read this analysis, and sigh with relief that the condition of children in care in other parts of the world may be dire but is not comparable to the situation of children here in New Brunswick. But then if we read the UN Study on Violence against Children and compare it to our office's 2007 *Connecting the Dots* report, the *Ashley Smith Report*, or *Hand in Hand*, we are reminded of the adage about people who live in glass houses. The magnitude of some of the situations may differ but the issues still resonate in the lives of children here in New Brunswick.



As one example, New Brunswick takes more youth out of their homes and sends them to the youth jail while awaiting trial (i.e. pre-trial detention, or 'remand') than most provinces. They are put into a jail situation with some youth who are extremely negative peer influences; intimidation, threats, insults, and even physical violence occurs. New Brunswick's Harm Prevention Strategy for Children will have to take a serious look at how we can best curb harm to children in institutional settings. A very obvious connection exists with the extremely encouraging work being done by New Brunswick's Roundtable on Crime and Public Safety.²⁵ The three priority areas of that Roundtable, youth at risk, chronic repeat offenders and domestic and intimate partner violence, all speak directly to issues of harm to children. The provincial Harm Prevention Strategy can benefit greatly from collaboration with the Roundtable.

Health care settings also require attention. Earlier in 2013, the Canadian Patient Safety Institute released Canada's first ever Paediatric Adverse Event Study.²⁶ Adverse events are described as "an unintended injury or complication" resulting in:

- i) disability at the time of discharge,
- ii) death,
- iii) prolonged hospital stay or
- iv) subsequent hospitalization caused by health care management.

The study revealed that children in Canada are at a slightly higher risk of adverse events than the population in general, a 9.2% risk rather than a 7% risk. Among paediatric patients, neonates in intensive care were 10 times more likely to suffer an adverse event – children in hospital settings are not immune from harm.

In the community

When children are homeless and have dropped out or been forced out of school, they may be at increased risk of harm. This may be as a result of fights or altercations arising with negative peer influences, or as a result of abuse by trusted members of the community around them. Sexual violence in particular may arise in a community setting perpetrated by adults in positions of trust (coaches, clergy, police, teachers or employers). Youth homelessness is therefore a serious risk factor for harm. In developing a Harm Prevention Strategy for Children, special consideration should be given to the situation of homeless youth in our province, to programs proven to work,²⁷ and also to a Resolution of the UN Human Rights Council of April 2011, entitled the *Rights of the child: a holistic approach to the protection and promotion of the rights of children working and/or living on the street.*²⁸ Furthermore our Strategy must also consider that harm may occur through injury in communities when there are unsafe physical environments.

How many youth in NB are under the care of no one?



At work

In work situations children are at increased risk of harm. Rates of workplace injury are routinely much higher among young workers than among their adult peers.²⁹ We would like to know whether youth are most vulnerable to injury in particular industries. Youth are also at risk of emotional or psychological abuse or sexual abuse from co-workers or employers. In particular, children working as caregivers, baby-sitters or

domestic workers may be at risk of sexual abuse or exploitation. The International Labor Organization has just adopted new guidelines to protect children in domestic work.³⁰ While this report may address a situation far more prevalent in other parts of the world than here in New Brunswick, there are issues that must be addressed to provide greater protection for youth in work settings here.

334 teenagers aged 15 to 19 in New Brunswick suffered a workplace accident last year

Article 32
Government recognizes the right of the child to be protected from economic exploitation and from performing any work that is likely to be hazardous or to interfere with the child's education, or to be harmful to the child's health or physical, mental, spiritual, moral or social development.

United Nations *Convention on the Rights of the Child*

In the virtual world

In 2009, the Office of the Child and Youth Advocate published *There Ought to be a Law*,³¹ a discussion paper developed with other Canadian Child and Youth Advocates and Privacy Commissioners on avenues for legislative reform to better protect children in Canada from the risks of harm in a wired world. As we stated in that report:

Along with its incredible potential, the Internet and its increasingly portable devices can present many risks to children and young people if they are misused, for instance as a result of cyberbullying, grooming, privacy violations or exposure to harmful content (pornography, racism, etc). The Internet has also facilitated an explosion of online child sexual exploitation, which raises a number of additional privacy concerns for the child subjects of sexual abuse footage that has been posted online.

Article 19 rights intersect with Articles 16 (concerning a child’s right to privacy and the safeguard of his or her honour and reputation) and 17 (their right to access information) of the *Convention on the Rights of the Child*, and are other important considerations in reducing harm to children. While some legislative developments have occurred provincially and federally since that 2009 report, it will be helpful, in devising a Provincial Harm Prevention Strategy for Children, to return to some of the recommendations in the report and explore them further. It was very heartening to hear in the November 2013 New Brunswick Speech from the Throne that government emphasized a commitment to “ensuring public awareness and education efforts to protect children from Internet child exploitation.”³²

“Investing in collaborative efforts to protect children and youth from all forms of harm remains a priority for your government.”

Legislative Assembly of New Brunswick,
“2013 Speech from the Throne.” Delivered
by Lieutenant-Governor Graydon Nicholas,
November 5, 2013.

**77% of New Brunswick teens
spend more than 2 hours per day
staring at screens**

PREVENTING HARM TO CHILDREN: GOVERNMENT’S OBLIGATIONS

Preventing harm is not primarily about legal penalties. Nor is it primarily about victim recovery. Victims must be given help, of course, and perpetrators must be held responsible. And it is imperative to be able to identify *signs* of harm. But the primary focus must be on prevention and not on dealing with the after-effects of harm. The UN Committee on the Rights of the Child in its General Comment on Article 19 summarizes the obligations of governments and family members as follows:

These special obligations are due diligence and the obligation to prevent violence or violations of human rights, the obligation to protect child victims and witnesses from human rights violations, the obligation to investigate and to punish those responsible, and the obligation to provide access to redress human rights violations.³³

Due Diligence

Due diligence may include the need for governments to set the appropriate legislative framework, to ensure that the *Convention* is incorporated into domestic law, that its Protocols are ratified and that effective procedures are followed to give the *Convention* effect. Means of achieving this include, for instance, ensuring that:

- i) there is a central coordinating authority responsible for services to children and the implementation of their rights;
- ii) data on child abuse and child welfare is collected and reported on regularly;
- iii) a research agenda in reducing harm to children is developed and supported;
- iv) policy is evidence-based and implemented in relation to measurable objectives and indicators.

Obligation to Prevent Harm

The emphasis that the UN Committee on the Rights of the Child places on prevention-based approaches is unequivocal:

The Committee emphasizes in the strongest terms that child protection must begin with proactive prevention of all forms of violence as well as explicitly prohibit all forms of violence. States have the obligation to ensure that adults responsible for the care, guidance and upbringing of children will respect and protect children's

rights. Prevention includes public health and other measures to positively promote respectful child rearing, free from violence, for all children, and to target the root causes of violence at the levels of the child, family, perpetrator, community, institution and society.³⁴

Preventive approaches require us to keep a diligent eye on the look-out for risk factors of harm, including lack of parent-child attachment, chronic health problems and developmental disabilities, family breakdown, alcohol and drug abuse by a child or youth, parental drug and alcohol abuse, parental or child mental health problems, poverty, and contact with the criminal justice system. What we are speaking of with regard to risk factors is a heightened chance that a child will suffer harm, and therefore there may be cause for increased awareness.

Another indicator that a child may be suffering from harm is when a child perpetrates harm. Children and youth who perpetrate violence are often victims themselves of violence, and they are deserving of treatment, not punishment. Sometimes children who exhibit aggressive behaviour have themselves suffered from a lack of family and community supports.

“The Committee emphasizes in the strongest terms that child protection must begin with proactive prevention of all forms of violence as well as explicitly prohibit all forms of violence.”

UN Committee on the Rights of the Child

Superficial attention to risk factors will not be enough – attention must be paid to the deep roots of the problems. For example, when a child or youth inflicts harm upon himself or herself, there are of course issues of psychological distress involved, but we must look at the factors contributing to that distress. This requires a holistic approach wherein different parts of government need to work together.

The UN Committee’s General Comment lists many examples of prevention activities, for children, for families, for community associations, and for government departments, all of which are worthy of consideration in developing a strategy in New Brunswick. Prevention is largely about building protective factors in children, and we trust that the Harm Prevention Strategy for Children will have a strong focus on boosting their resiliency, independence and rights.

Obligation to Investigate and Punish

This obligation to work effectively presupposes that government also has in place effective mechanisms to:

- i) identify harm to children where it exists;
- ii) ensure that violence to children is reported in accordance with appropriate protocols and guidelines;
- iii) ensure that referrals are made to appropriate services and agencies for interventions required;
- iv) ensure that investigations are conducted in a fair and impartial manner giving children an opportunity to be heard in appropriate settings in accordance with their best interests;

- v) ensure that treatment is identified and put in place for victims of harm;
- vi) ensure that follow-up is carried out and that the intervention plans developed are adhered to in the child’s best interests and modified as required; and
- vii) ensure that punishment, through prosecution or other administrative or disciplinary processes, is meted out fairly and promptly.

Providing other forms of redress

Finally, governments also have to make sure that children have other means of redress, through civil actions, through human rights recourses, or through complaints to external bodies such as the Child and Youth Advocate’s Office to obtain reparation and make the child whole as much as possible, despite his or her human rights violation, and that the harm is repaired.

* * *

New Brunswick’s legal and moral obligations under the *Convention on the Rights of the Child* necessitate that all of government’s actions relating to children should have a rights-based approach, emphasizing the well-being, development, dignity, participation and equality of all children. Attention to Article 19 of the *Convention* in isolation would be ineffective – all of the rights in the *Convention* are interdependent. We cannot protect children from harm without also fulfilling their other rights.

There are 42 substantive rights in the *Convention*, and they are all essential to protect children from harm, including: the right to not be discriminated against; the right to maximum development; the right for children and youth to have a say in matters that affect them; the right to protection of privacy and personal reputation; the right to the highest standard of health care attainable; the right to an adequate standard of living; the right to an education aimed at developing mental and physical abilities to the fullest extent possible in an environment of respect; the right to sufficient time for free play, a healthy amount of sleep, recreational opportunities, and arts and culture; and the right to protection from work that harms health, education or development.

If we ensure that the rights of children are protected and promoted, then we will help to ensure that we have resilient, empowered children who will be better able to avoid being harmed in the unnecessary, damaging and sometimes horrific ways we continue to see. A child-rights approach founded in the *Convention on the Rights of the Child* provides a comprehensive means of ensuring child protection from harm.

"No violence against children is justifiable; all violence against children is preventable."

Report of the Independent Expert for the United Nations Study on Violence against Children, August, 2006.

Recognizing that, in all countries in the world, there are children living in exceptionally difficult conditions, and that such children need special consideration...

Preamble to the *Convention on the Rights of the Child*



PART II – The New Brunswick State of the Child in 2013

Table 1 – Guiding Principles and the Child’s Right to an Identity

The first set of indicators in Table 1 of the Children’s Rights and Well-being Framework relate to the definition of the child, the child’s rights to an identity and culture, and their right to equality without discrimination. Essentially, these data sets give an overall picture of New Brunswick children in relation to the total population. The data seeks to answer such questions as: What percentage of the population do children make up? Is our population aging or our birth rate declining? How does that population reflect Francophone, Anglophone, First Nations and Allophone linguistic and cultural groups in our province? What choices are parents making in relation to language of instruction in school? And how do all these indicators compare when disaggregated as between boys and girls? The interpretation of all this data and its use in implementing children’s rights, for

instance in preparing Child Rights Impact Assessments, has to be approached with a knowledge of the four basic Guiding Principles of children’s rights set out in the *Convention on the Rights of the Child* (‘the *Convention*’).

In addition to Article 2 equality rights, the *Convention on the Rights of the Child* sets out three other rights, in Articles 3, 6 and 12, which are recognized as Guiding Principles. These four Guiding Principles must be used at all times in interpreting and applying every other right under the *Convention*. We will briefly consider each of them in turn and their intersection with Article 19 before taking a closer look at the data in Table 1 of the Children’s Rights and Well-being Framework.

Article 2 – The Right to Equality

The right to equality and non-discrimination is a Guiding Principle of the *Convention* and of the 1945 *Charter of the United Nations* itself. Every international human rights treaty typically

begins with an assertion of equality rights. Article 2 of the *Convention on the Rights of the Child* guarantees to every child in Canada all the rights proclaimed in the *Convention* without discrimination irrespective of national, ethnic or social origin, sex, language, religion, political or other opinion, property, disability, birth or other status. It also prohibits discrimination against a child based on any of these grounds in relation to the child's parents, guardians or family members.

When we consider the demographic data in Table 1 we must remain mindful of the implications for equality rights of children, given New Brunswick's aging population, dwindling school enrollment and low levels of ethnic and cultural diversity, but also its enduring bilingual demographic. The smaller the minority, the more vulnerable its members or children may be to taunts, discrimination or physical or emotional violence, or sheer neglect. The intersection between Article 2 and Article 19 rights of children in New Brunswick therefore becomes all the more important.

Article 2

Government shall respect and ensure the rights set forth in the present Convention to each child within their jurisdiction without discrimination of any kind.

UN *Convention on the Rights of the Child*

Article 3 – The Best Interests of the Child Principle

Article 3 establishes the obligation of all duty bearers to children to act at all times with the best interests of the child as a primary consideration. Most adults have some awareness of their rights and will vocalize or lobby their interests. Children, however, are more vulnerable to having their rights and interests ignored or deemed less of a priority. They are often dependent on adults and may not have a full understanding of what their rights are or the capacity, tools or platform to advocate for their own interests. The rights of children and youth are no less substantial or important than those of any other human being. It is important that additional care be taken and that mechanisms are put in place that safeguard children's rights and interests.

This process of considering the best interests of the child is especially important in relation to the right to protection from violence, abuse and neglect. The intersection between Article 3 and Article 19 is neatly underscored in paragraph 3.3 of Article 19, which places a particular onus on "institutions, services and facilities, responsible for the care and protection of children" to "conform with the standards established by competent authorities, particularly in the areas of safety, health, in the number and suitability of their staff, as well as competent supervision."

Article 3

In all actions concerning children the best interests of the child shall be a primary consideration.

UN Convention on the Rights of the Child

Too often when we make policies and decisions in relation to services to children we have to balance factors of efficiency, costs, political expediency and competing rights claims in conditions of scarcity of resources. With all these variables that feed into the decision-making process, there is a very real risk that some variables, such as financial cost or public perception, will be given more weight and priority than children's interests. Article 3 constitutes an overarching principle that echoes the admonition from the Geneva Declaration of 1924 that "mankind owes to the child the best it has to offer".³⁵

The Children's Rights and Well-being Framework is a basic rights implementation reference tool for policy makers in New Brunswick, to help standardize and professionalize our processes for child-rights based analysis and decision-making. Policy developers and decision-makers can use the Children's Rights and Well-being Framework in conjunction with government's Child Rights Impact Assessment tool, and for all policy and program development related to children. This year's

State of the Child report highlights, in particular, the importance of employing evidence-based decision-making in the creation or modification of policies or programs to reduce harm to children. Determining a child's best interests in this context should involve detailed examination of how all forms of harm effect children and youth, which groups of children and youth are the victims of different kinds of harm, why harm occurs, what effects different programs and policies have on the propagation of harm, and what victims need for healthy recovery and development. The data collection, monitoring and analysis in this report will provide an evidentiary basis for informed and accurate decision making to improve our determination of the best interest of the child in policy-making and on a case-by-case basis.

Article 6 – The Right to Life, Survival and Maximum Development

Article 6 also constitutes a Guiding Principle. This provision is modeled on Article 3 of the Universal Declaration of Human Rights, which is the model also of section 7 of the *Canadian Charter of Rights and Freedoms*, and which guarantees to every person on earth the right to "life, liberty and security of the person". In adapting this provision to the context of children, there seems to be recognition that a child's security and autonomy or liberty interests are tributary of their survival and development. Article 6 constitutes a general principle because it introduces and constitutes the kernel of many of the social, economic and cultural rights set out later on in the *Convention*.

All children have the inherent right to life. Government must ensure to the maximum possible the survival and development of the child. Survival embraces the necessities for life, including food, water and shelter. Development of the child requires fostering a healthy environment that meets the child's physical, mental and emotional needs. Children most often do not have the capacity to provide the necessities of life for themselves. They are dependent on adults and caregivers who have a responsibility to ensure these needs are met. It is the responsibility of the government to support parents and guardians where they are unable to provide these necessities, and to monitor to ensure all children in the province have access to these necessities. The period of life from birth to 18 years of age is the most important in physical, mental and emotional development. In accordance with Article 6 of the *Convention on the Rights of the Child*, government must "create an environment which enables all children . . . to grow up in a healthy and protected manner, free from fear and want, and to develop their personality, talents and mental and physical abilities to their fullest potential consistent with their evolving capacities."

Violence, abuse and neglect drastically interfere with the exercise of this right.

In its most extreme capacity, violence, abuse or neglect can lead to death. Violence, abuse and neglect also impede healthy development. Physical development can be impeded by injury. Neglect to provide the physical necessities of life can cause developmental problems. Poverty is an issue for too many

families, whose children are often at greater risk of neglect or maltreatment.

Article 6

Government recognizes that every child has the inherent right to life and shall ensure to the maximum extent possible the survival and development of the child.

UN Convention on the Rights of the Child

In interpreting the data below in relation to Article 19 and Article 6, one should pay special attention to issues of youth homelessness, nutritional habits of parents and their children, obesity rates, teen pregnancy rates, household income and spending levels, health behaviours including mental health behaviours and indicators to determine how they impact children's experience of harm, both in terms of cause and effect.

Article 12 – The Child's Right to be Heard

All children have the right to express their views and participate in decisions and matters that affect them. The voice of the child must be actively sought and an opportunity given for children to

express their opinions and views. Decision-makers must take these opinions and views into account when making decisions that affect children. The *Convention* recognizes that children are rights-bearers within the process of development into mature autonomous adults. At different ages and maturities, the ability to understand the nuances and context of decisions varies. Therefore, the weight given these opinions and views will depend on the age and maturity of the child. The default starting point is that when a decision is being made that has some effect on the child, the views and opinions of the child must be actively sought and determined in the most comprehensive and complete manner possible. Once this has been established, then the decision-maker(s) may assess the weight to accord to the opinions and views.

Respecting the voice of the child often interacts practically with Article 3, the right to have the child's best interests be a primary consideration in all decisions concerning the child. For all government decisions, a process should be followed which considers potential impacts on children or a particular child, which seeks the views and opinions of those children or that child, which assigns due weight to these based on age and maturity, which considers the best interests of the child and then reaches an evidence-based conclusion.

Article 12

Government shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.

UN *Convention on the Rights of the Child*

This right is integral in utilizing a rights-based as opposed to a needs-based approach. The needs-based approach promotes the importance of protection from harm based on the inherent vulnerability of children. This approach does not satisfy the holistic conception of children the *Convention* provides of developing autonomous human beings. Fundamental needs form the basis for human rights, but a needs-based approach is insufficient to uphold human rights. Rights are not gifts. Rights are not about charitably helping 'the needy,' but rather about ensuring respect for inherent human dignity. Meeting needs is a temporary 'fix' to a problem, and can be satisfied without empowering the 'victim.' Rights require empowerment. Action to fulfill the right to protection from harm is especially susceptible to subscribing to the needs-based rhetoric. Rights give rise to responsibilities and obligations of duty-bearers, and rights necessitate accountability. Most importantly, a rights-based approach for children requires government to address violations not simply on an ad hoc, narrow basis, but to explore root causes and ensure a comprehensive fulfillment of all rights.

The role of child and youth participation in respecting the right to protection against harm is multi-faceted. Children's views and opinions must be sought in designing or modifying policies and programs. This includes education, prevention, rehabilitation and support measures. When instituting new measures, consultation and collaboration with children should occur and empower children to be engaged in addressing the issue. Where children have been the subjects of violence, abuse and neglect, service providers should take a strengths-based approach to recovery. This means that the starting point when considering service-provision should be an assessment of the child's strengths, which then informs the services designated. When decisions are made that affect children or a particular child, that group or individual's opinions and views must be sought.

Not only are child opinion and participation required rights, they are also beneficial for policy-makers, decision-makers and service providers to seek and utilize. In trying to address issues concerning children, children are often the best experts and can provide invaluable insight.³⁶ When children are consulted, new considerations are often raised or identified. For example, the non-governmental organization Right To Play has a global 'Safe Spaces' program that empowers children to identify safe and dangerous spaces within their communities and why they consider them to be so. When these spaces are presented to community leaders and policy-makers, issues and ideas are often broached that were not previously considered. Children have

different perspectives and innovative ideas that can be utilized in the creation and modification of policy or programming. Additionally, engaging children in the issues creates a driver for change. When children are consulted and engaged in collaboration with adults, ownership of the issues takes place and children will continue to be conscientious of the issue into adulthood. This is especially salient for issues of violence, abuse and neglect, which often take a pattern of repetition from one generation to the next.

Data from Table 1

In light of the foregoing overview it is important to note again the demographic information that may impact the development of a New Brunswick Harm Prevention Strategy for Children. Much of the population data in this Table was taken from the 2011 census last year and has not changed for 2013. We still note that New Brunswick's population is the second oldest among Canadian provinces, and statistically we are getting older, not younger. Total school enrollment continues to decline between 1% and 2% per year. The relative share of the Francophone school population remains stable at just under 29%, even though the percentage of New Brunswickers who declared speaking French most often at home had decreased from 29.4% to 27.9% over the same period. This appears to describe a trend where Francophone families continue to enroll their children in Francophone schools even as their families continue to assimilate to the dominant Anglophone culture. The

percentage of the population who are immigrants continues to grow marginally but remains very small at 3.9%, as compared to 20.6% of the Canadian population in general. The proportion of the provincial Aboriginal population has grown year over year from 2.45% to 3.1 %, which is getting closer to the 4.3% national Aboriginal population.

Our 2009 State of the Child report focused on the child’s right to a name and identity, and on the rights of indigenous and minority children in particular. The problem of ensuring that children and youth in Indigenous and minority cultural groups remain safe from harm is a continuing challenge that New Brunswickers need to focus on as we define a Provincial Harm Prevention Strategy for Children. Having determined who the children of New Brunswick are in terms of their maternal tongue, language of school, ethnic and cultural origin, we can turn now to Table 2 which explores how they are expressing themselves.

Table 2 – Civil Rights and Freedoms

The second table in the Child Rights and Well-being Framework groups indicators in relation to children’s autonomy and manner of expressing themselves. These are presented as a way of measuring how well children in New Brunswick are enjoying their civil and political rights. These include the child’s right to a name and identity but also the child’s right to Freedom of Expression (Article 13), to Freedom of Thought, Conscience and

Religion (Article 14), to Freedom of Association and Peaceful Assembly (Article 15), to Privacy and to Protection from Unlawful Attacks upon his or her Honour or Reputation (Article 16) and also to the child’s right to Access to Information and Material “from a diversity of ... sources, especially those aimed at his or her social, spiritual and moral well-being and physical and mental health” (Article 17).

The *Convention on the Rights of the Child* is innovative in human rights treaty law because, even though it was drafted before the World Wide Web was invented; it is the first international human rights instrument that speaks to the fundamental right to information as a foundational human right in the information age. Article 17 also imposes strict obligations on governments to regulate the mass media and develop “guidelines for the protection of the child from information and material injurious to his or her well-being”. It will be interesting as we develop a Harm Prevention Strategy for Children in New Brunswick to explore the obligations of media, Internet service providers and governments in relation to Article 17, but also the obligations of every member of the community, including children themselves, to the child’s Right to Privacy under Article 16 and the emphasis it places on protecting children from “unlawful attacks upon his or her honour and reputation”.

Table 2 contains indicators of children’s expression and autonomy, as measured by their participation rate in sports and activities, in school or in community, in screen time usage as well as through measures of autonomy, competency, respectful pro-

social behaviours, labour participation, volunteering and intention to vote. The Harm Prevention Strategy for Children will focus on identifying what other indicators should be used and added to better measure rights implementation in relation to this cluster of rights under the *Convention*, particularly freedom of information and privacy rights.

In this Table, indicators 1 and 1a are measures of youth who have pro-social behaviours (being helpful, respectful, thoughtful, etc.). The percentage of youth reporting pro-social behaviours remains at 81% - or four out of every five students in grades 6 to 12. Also, very much worth noting is the gap between girls and boys, which remains large: boys lag behind at 75% compared to 87% for girls. The potential inverse relationship between pro-social factors and risk of vulnerability to harm needs to be explored for these youth.

One of the indicators of school connectedness raises concern. The percentage of youth in grade 12 who participate in activities organized by their schools has plummeted, from 53% down to 40%. More disturbing are the percentages of screen-time usage (amount of time spent with TV, videos, Internet, and texting). From 2012 to 2013 the percentage of children who reported spending the recommended maximum two hours *or less* per day³⁷ (i.e. a relatively reasonable amount of time) in screen time usage went from 25 % to 23% of youth in grades six to twelve, and from 20% to 16% among Aboriginal youth. This means that three quarters of youth generally are spending concerning amounts of time interacting with screens; and with the numbers dropping (though perhaps only statistically significantly for Aboriginal youths), presumably less time is being spent interacting with other people other than through a screen. Perhaps related to this screen-time trend, we unfortunately see that the reported rate of volunteering outside of school for New Brunswick students in grades six to twelve has also slightly declined from 76% of youth to 73%. It will be worth considering what this means for family, school and community connectedness in our province.

Nearly one in five children in grades 4 and 5 don't feel comfortable talking to an adult at school about bullying

Finally, while our labour participation rate for youth has declined somewhat from 47% to 45%, we still see many more children at work in New Brunswick than in the rest of Canada (40%). Employment can be highly beneficial for youths in building their autonomy, confidence and connectedness to community, but it can impact adversely on, education, sleep, health and other rights. The story behind this data needs to be explored in order to ensure that New Brunswick's labour laws and regulations are adequately protecting youth.



Table 3 – Family Environment and Alternative Care

The cluster of rights around the family encompasses the child's right to parental guidance and care, to parents who will act as the child's primary care-giver always with his or her best interests foremost in mind. It includes also the right not to be separated from one's family and parents except as lawfully required, for instance in cases where removal is necessary in order to protect the child from abuse or neglect. Included also is the child's right to adoption and to an alternative form of care which provides a family setting whenever possible. Other rights promoting family reunification, prohibiting the illicit transfer of children abroad, and offering special measures of rehabilitation for child victims of harm, as well as the general prohibition on harm to children in Article 19, are also commonly clustered together in this group of rights.

In developing a New Brunswick Harm Prevention Strategy for Children it is very important to keep in mind the cluster of rights in relation to Family Environment and Alternative Forms of Care. Among the principal elements of such a strategy we would need a dedicated focus on vulnerable populations as described above, but this would require specific action items to reduce child poverty, others aimed at meeting the needs of children with special needs and the challenges confronting families with an

experience of adolescent mental illness, and others also aimed at keeping kids safe in terms of their own behaviours and out of conflict with the law. By working on strategies at the level of root causes of harm we can make children safe by equipping them and those near them with the resilience and knowledge needed to avoid harm.

The data in Table 3 focuses principally on the child's family and economic situation, parental health behaviours, the child's connectedness to family and community and the situation of children in non-parental care. In the 2013 data we see a disturbing worsening of the relative situation of New Brunswick Children in relation to their Canadian peers across a number of indicators. The tables identify at a glance, in red, the rankings for New Brunswick in relation to other provinces and territories if we are among the three or four bottom jurisdictions reporting. In 2012, of eleven flagged indicators in Table 3, New Brunswick had only two scores in the red zone. This year out of fifteen indicators flagged we are trailing the country in relation to more than half of them.

Most troubling is the fact that the overall number of children in low-income situations is at 21%, well above the Canadian average of 17%. The rate is now calculated differently and includes 17 year olds, but even with this adjustment the increase of 5% from last year's number is very troubling. The New Brunswick indicator rate is spiking while the national average has seen a slight decline. This underscores the need for a clear

public strategy to address the harm to children than can result from poverty. Still more disturbing are the numbers for children under six years old, an extremely vulnerable cohort: 23% of these children are living in low-income families, five percent more poverty on average than we see in Canadian households in general. We also see that New Brunswick is ranked 10th out of Canadian provinces and territories for children's food insecurity in homes, with a considerably higher percentage (7.3%) than the national percentage (5.1%).

Canada ranks 24th out of 35 of the world's richest countries in terms of our rate of child poverty, placing us almost in the bottom third of advanced economies.³⁸ New Brunswick is one of the many provinces of Canada where children on average experience more poverty than the population in general. We can do better than that. We can act together to raise more children out of poverty if we choose to do so. Evidence-based programs can work to achieve this goal. The province's Poverty Reduction Plan has a difficult objective to attain, but an achievable one. We know also that it makes economic good sense to focus on child poverty. We only have to act. This is why the Office of the Child and Youth Advocate has recommended that the next Poverty Reduction Plan in New Brunswick have a dedicated Child First focus and that we establish ambitious targets to reduce child poverty quickly. This element of harm prevention alone could have important economic and social benefits that will pay dividends for years to come.

Nearly a quarter of children under 6 years old in New Brunswick live in low-income families

The Department of Healthy and Inclusive Communities uses the term 'mental fitness' to reflect our self-perceptions related to psychological needs. Connection and positive interaction with family, friends, and others (relatedness) in our communities helps to boost mental fitness. So too does self-perception of personal strengths that lead to a sense of achievement (competency). And the ability to make choices for oneself (autonomy) does also. The connection being made is that satisfaction of all three needs is associated with emotional well-being and resilience, as well as participation in healthy lifestyle choices.

An important factor in youth resiliency is a strong sense of belonging to community. However, in the past three Child Rights and Well-being Frameworks we have seen youth's sense of belonging to community decrease from 82% to 80% and now down to 77%. We also see that 77% of youths in grades 6 to 12 are satisfied with their mental health needs related to their families (i.e. the degree to which their needs for competence, autonomy and relatedness are met by their family). Youth satisfaction with mental fitness needs related to their friends has not changed significantly, presently being at 82%. What does this data suggest with respect to who NB youth can look to for help in relation to mental fitness matters? What should we be doing differently in our families, in our schools and in our communities to support youth mental fitness needs, which are influenced by our relationships and social environments?

Article 27

Government recognizes the right of every child to a standard of living adequate for the child's physical, mental, spiritual, moral and social development. Government shall take appropriate measures to assist parents and others responsible for the child to implement this right and shall in case of need provide material assistance and support programs.

UN Convention on the Rights of the Child

Table 4 - The Right to Health

Generally, children’s rights theorists cluster the child’s Right to Health under Article 24 with several other rights related to Basic Health and Welfare (in Articles 18, 23, 24, 26 and 27) such as the child’s right to an adequate Standard of Living. As noted above however in our Child Rights and Well-being Framework we also cluster Article 27 Standard of Living matters with Family Environment indicators. From a determinants of health and population health perspective, all the rights and well-being indicators in our Framework impact the child’s health and his or her right to enjoy the maximum attainable standard of health. Our Framework breaks down this cluster of rights into its two main components. We have distinguished between indicators of the right to health, health conditions and disability *per se* found in Table 4 and those related to health behaviours, standard of living and other more direct determinants of health, listed in Table 5.

The relationship between Article 19 and Article 23 (which guarantees the rights of disabled children to a full and decent life in community) is a particularly important one. Disabled children are, along with infants, among the most vulnerable members of our community in terms of exposure to harm. Special measures need to be developed at every level to address risks and ensure maximum enjoyment of both these rights. In relation to the child’s right to health, one has to consider among the first priorities the rate of injury of our children and youth and consider strategies for reducing harm through appropriate

prevention and safety measures. The relationship between mental health and emotional violence to children and youth is another important factor. And yet another important factor is the relationship of poverty, neglect and obesity with children and youth’s own perceptions of health.

Article 24
Government recognizes the right of
the child to the enjoyment of the
highest attainable standard of
health.
UN Convention on the Rights of the
Child

This year the indicators in Table 5 are equally as disturbing if not more so than the data reported above in Table 4. Twelve of the indicators in this table are standardized nationally among several jurisdictions where a national ranking is possible. In 2012 New Brunswick children were trailing their peers in 5 of those 12 indicators. In 2013 we are plunging to the bottom of the pack in 8 of the 12 areas, finishing dead last in 6 areas and second to last in the 2 others. On all of the following indicators our youth score more poorly than all their Canadian peers: the asthma rate; the prevalence of asthma among Aboriginal youth; our rate of injury-causing limitations; youth perception of unhealthy weight; and youth perceptions of health in general. The main culprit in this poor standing would appear to be obesity and unhealthy weight.

New Brunswick has the highest rate of teen asthma in the country

Obesity was already a problem for New Brunswick youth, and it appears to be getting worse. The self-reported overweight and obesity rate for youth in grades 6 to 12 has jumped from 23% to 28%. This statistic comes from the *Student Wellness Survey Grade 6 to 12, 2012-2013*. We see a different set of data coming from the *Canadian Community Health Survey 2012*. In the latter survey, the percentage of youths aged 12 to 19 in New Brunswick who consider themselves overweight has been rising during our past three reporting years, from 12.8% to 14.2% to 18%. According to this statistic, New Brunswick youths feel that they are overweight more than do youths in any other province. A very serious caution around this statistic is that it is a reflection of youth self-perception, and may be influenced by body image issues. What is important is for government and all society to have this on their radar and to look behind the numbers to find the story. Yet another statistic that requires attention comes from the *Student Wellness Survey Kindergarten to Grade 5, 2010-2011* (the most recent survey). According to

that survey, the percentage of children in New Brunswick who are overweight or obese is 36%, more than one third of our children. On the opposite end of the scale the percentage of adolescents who are unhealthily underweight has gone up from 7% to 8%, and it remains at 11% for children in grades K to 5.

The teenage obesity rate has jumped from 23% to 28%

New Brunswick youth aged 12-19 suffer more injuries than the Canadian average: 31% compared to 27%, which places us as the second-to-worst province in this regard. Typically, when we think of the duty to protect children from violence, abuse or neglect, we can completely overlook the problems related to injuries. The problem of childhood injuries is however explicitly within the scope of Article 19 and governments have a clear obligation to take “all appropriate legislative, administrative, social and educational measures to protect the child” from such injuries. The Provincial Harm Prevention Strategy for Children will have to expressly address this pronounced problem among New Brunswick youth.

The Chlamydia rate among 15 to 19 year-olds in New Brunswick has gone up in each of the 3 years that the Child Rights and Wellbeing Framework has been produced. The rate per 10,000 youths infected has increased from 1273 to 1318 to 1664.

The rate of cases admitted to hospital connected to behavioral and learning disorders is *more than three times higher* than the Canadian rate (11.6 compared to 3.6).

The New Brunswick rate of child and youth hospital admission for mental diseases and disorders is not far from twice the national rate

Child and youth hospital admission rates related to behavioural and learning disorders are more than three times the national rate

Across all mental health disorders New Brunswick children and youths continue to see a much higher rate of hospitalization than their Canadian peers. This is true for depressive episodes, stress reaction, schizotypal/delusional disorder, mood disorder, anxiety disorder and eating disorder. The rate of hospitalized cases for all mental diseases and disorders for children is nearly twice as high in fact, at 55.9 cases per 10,000 as compared to a national rate of 31.9 per 10,000. Experts we have consulted mention that this is not necessarily an indication of a higher incidence of disease or mental illness *per se*, but perhaps more so a reflection of the paucity of our interventions. While the wait lists are long for Mental Health (Department of Health) interventions, crises can occur, and we then rush to treat young people in hospital. Hospitalization in response to crisis can be an aggressive and *harmful* response, especially for children with autism spectrum disorders who may be deeply upset by change. The Provincial Harm Prevention Strategy for Children will have to consider this data and bring forward solutions to provide appropriate Mental Health interventions in a timely fashion to

young New Brunswickers and their families. The objective is to decrease our reliance on emergency room care and the risk of further harm that it can entail.

Article 23
a mentally or physically disabled child should enjoy a full and decent life, in conditions which ensure dignity, promote self-reliance and facilitate the child's active participation in the community. Government shall extend assistance to ensure that the disabled child has effective access to and receives education, training, health care services, rehabilitation services, preparation for employment and recreation opportunities in a manner conducive to the child's achieving the fullest possible social integration and individual development

UN Convention on the Rights of the Child

Table 5 – Health Behaviours

Table Five of the Child Rights and Well-being Framework also relates to rights in the Health and Welfare cluster under the *Convention*. But the focus in Table Five is on promoting healthy child and youth development. Indicators are grouped in relation

to pre and post natal care, early learning, physical and mental health behaviours, health behaviours in relation to vision and dental care, and other child and youth specific behaviours, including children's perceptions of healthy living.

A number of the indicators in this Table relate to parental health behaviours. It is important to model good behaviour for our children. Article 18 of the *Convention on the Rights of the Child* places the primary responsibility for the upbringing and development of the child on parents and provides further that the best interests of the child shall be their basic concern.

Article 18
Parents have the primary responsibility for the upbringing and development of the child. The best interests of the child will be their basic concern. Government shall render appropriate assistance to parents and legal guardians in the performance of their child-rearing responsibilities and shall ensure services for the care of children.

UN Convention on the Rights of the Child

Reading Articles 18 and 19 together we can better understand the basic purpose and the interdependence of these provisions. First, the law asserts the role of parents as primary caregivers, but it recognizes, in Article 18(2) that governments also have to

assist parents to support them in their child rearing and by providing day-care facilities and services. Then in Article 19 the *Convention* provides that government may also have to intervene to protect children from any type of harm that may arise while in their parents' care or in the care of other institutions or facilities. When we seek to reduce harm to children we have to look to improve health behaviours not only of children and youth themselves but those of their parents and guardians as well.

In this Table we see some actual improvement overall, since there are fewer red flags and some that were in the red last year are now in the amber zone. Breastfeeding initiation rates have, for instance gone up to 79% from 69%, but still remain considerably below the Canadian average of 90%.

There is improvement also in the percentage of children in Kindergarten who meet immunization requirements. However, 27% of children in Kindergarten are still not current with all their immunizations. Looking at Canada's standing among the world's richest countries, our poor showing in OECD countries is due in part to our very poor standing on health and well-being indicators measured by UNICEF.³⁹ Our immunization rates for instance were second to last in the developed economies compared. This is an area where harm can easily be prevented and where some thought could be given as to how to improve our standing.

Immunization requirements have not been met for 27% of New Brunswick children in Kindergarten

There are more approved child care spaces in the province this year, having increased from 20,319 spaces in 2011 to 22,649 spaces in 2013 – an increase of 11.5% in the last two years. There are, however, considerably fewer early intervention services (1594 compared to 1802 noted in last year's report).

In terms of health behaviours, a higher percentage of New Brunswick youth speak to a professional about mental or emotional health issues than do youths in any other province. Last year we flagged this same ranking in red, showing it as a worst in class result but we decided that overall the high rate of access to professional supports was actually a helpful protective factor rather than an indication of an increased prevalence of illness. The New Brunswick Harm Prevention Strategy should be able to delve into the numbers and determine whether a statistic such as this reflects positively or negatively on the system. We see that youths walking and biking to school has jumped from 28% to 42% (still below the 55% Canadian average, but impressive progress nonetheless).

What we would hope to see, though, is that the percentage of youths who have never tried smoking by grade twelve would be going up. What we actually see is that it has gone down from 60% to 54%. This of course means that 46% of students have tried smoking by grade twelve. Among First Nations youth, 62% have tried smoking by grade twelve. However, indicators such as these in Table 5 should be read with those in Table 7, and it is not all bad news. For example, the percentage of First Nations youth in grades six to twelve who report having smoked within 30 days of being surveyed has declined from 25% to 20%.

Nevertheless, there is abundant cause for concern in several of these indicators in Table Five. When we look at other healthy behaviours we see further bad news. For example, while only 42% of youths in grades 6 to 12 eat breakfast daily, an even lower percentage of First Nations youth do – 32%. Furthermore, a very disturbing slide is evident in the percentage of youths who sleep more than the recommended eight hours per night. It is down from 52% to 38%.

62% of youths in grades 6 to 12 do not sleep the recommended minimum of 8 hours per night

Table 6 - Educational, Cultural and Minority Rights

The next cluster of children’s rights deals with: Articles 28 and 29, the Right to Education and the Aims of Education; along with Article 31 rights to adequate sleep, unprogrammed play, recreational activities, and artistic and cultural opportunities in their communities; and with the Article 30 rights of minority children, including Indigenous children, to speak their language, professes their religion and enjoy their culture. In our last two reports the thematic focus was placed on Article 31 of the *Convention*. In those reports and in our Summer Course on the Rights of the Child (held annually at the Université de Moncton) we have also explored the many linkages between Article 31 and Article 19.

Table 6 from the Child Rights and Well-being Framework presents data from New Brunswick related to the child’s Right to Education. There are in total 26 indicators, addressing the transition to primary school, literacy and numeracy indicators, social and emotional development and school connectedness. Almost all of these indicators are derived from annual provincial assessments undertaken by the Department of Education & Early Childhood Development, and so it will be interesting to note how student performance trends over time.

Somewhere between three and four youths out of every hundred in New Brunswick is not satisfied with life. Of course everyone would agree that we need to identify any youths who are dissatisfied with life, and we need to provide supports to them. Another issue is that the percentage of youths in school who are satisfied with their mental fitness needs in relation to school is at 59%. Mental fitness is very much connected to factors that protect children from vulnerability to harm. We now see that two out of five youths are not satisfied with their mental fitness needs at school – much work remains to be done to improve this troubling statistic.

Article 28

Government recognizes the right of the child to education, and with a view to achieving this right progressively and on the basis of equal opportunity, they shall take measures to encourage regular attendance at schools and the reduction of drop-out rates, and ensure that school discipline is administered in a manner consistent with the child's human dignity and in conformity with the Convention.

UN Convention on the Rights of the Child

Article 29

The education of the child shall be directed to: the development of the child's personality, talents and mental and physical abilities to their fullest potential; the development of respect for human rights and fundamental freedoms; and the preparation of the child for responsible life in a free society, in the spirit of understanding, peace, tolerance, equality of sexes, and friendship among all peoples, ethnic, national and religious groups and persons of indigenous origin.

UN Convention on the Rights of the Child

Walk down an average school hallway full of grade 12 students and two out of every ten students you pass don't feel respected at their school. That alone is an unsatisfactory situation, but when we look at our last three Child Rights and Well-being Frameworks together, we see that the percentage of grade 12 students who feel respected at school has been dropping, from 83% to 80% and now to 78%. Youth in grades 6 to 12 report somewhat lower school connectedness this year, from 91% down to 89%. Perhaps even more unsettling is that the percentage of children in grades 4 and 5 who feel connected to their schools is even lower than that for grades 6 to 12. We must inquire as to how best to provide learning environments where

all pupils feel competent, that they have a voice and choices, and have a sense of belonging, all of which has a direct impact on motivation, engagement, and feeling respected. This will undoubtedly be one of the primary concerns for the provincial Harm Prevention Strategy for Children.

Finally in last year's report we noted that in relation to all the indicators of academic achievement the girls' cohort was equal or ahead of the boys' – and often ahead by very wide margins. It does not appear that the boys have measurably closed the margin in 2013.

Two-fifths of youths in New Brunswick are not satisfied with their mental fitness needs related to school

Tables 7 and 8 – Special Protection Measures

The last cluster of rights in the Child Rights Based Approach refers to the grouping of *Convention* Articles that deal with special measures of protection. The United Nations Committee on the Rights of the Child breaks this group of rights down further into four categories: children in situations of emergency, such as child victims of family violence and refugee children (Articles 22, 38 and 39); children and the juvenile justice system (Articles, 37, 39 and 40); children in situations of exploitation such as child labour, drug abuse, sexual exploitation, trafficking or other forms of exploitation (Articles 32 to 36); and special measures of protection for minority children (Article 30). In our Framework, we have developed indicators for many of these rights, but not all, in two Tables.

Article 19 is in fact the general right to be protected from harm which introduces the several other provisions of the *Convention* that set out more explicit and defined rights to protection, such as the rights of child refugees, the right to be protected from economic exploitation and workplace injury, from illicit drug use, from sexual exploitation or abuse, from abduction or being trafficked, or from all other forms of exploitation.

Table 7

Table 7 in the Child Rights and Well-being Framework addresses factors that can affect children and youth adversely and these indicators are grouped in relation to teen pregnancy, drug use, tobacco use, and other negative behaviours.

The percentage of youth who have used marijuana within the past year has increased to 28%. More troubling yet is that 18% of youth surveyed stated they had been in a car with a driver who was under the influence of alcohol, and 24% with a driver under the influence of cannabis.

The percentage of youth in grades 6 to 12 who have high levels of oppositional behaviours has dropped from 27% to 22%. For First Nations youth it is has dropped astoundingly, from 40% to 28%. This is a very encouraging shift. Of course, these percentages still point to risk factors for harm. The percentage for children in grades four and five with high levels of oppositional behaviours is also at 22%.

Nearly 1/5 of our youths have been in a car with someone under the influence of alcohol...nearly 1/4 have with someone under the influence of cannabis

The rate of violent crime by youth has dropped from 2183 to 1971 per 100,000. The vast majority of youth crime is non-violent, minor offences. The law in Canada under the *Youth Criminal Justice Act* provides that in the vast majority of cases youth should be diverted away from the criminal justice system and toward supports that will keep them out of trouble with the law. This objective is reflected also in our office's advocacy, and in Article 40 of the *Convention on the Rights of the Child*:

A variety of dispositions, such as care, guidance and supervision orders; counseling; probation; foster care; education and vocational training programmes and other alternatives to institutional care shall be available to ensure that children are dealt with in a manner appropriate to their well-being and proportionate both to their circumstances and the offence.

Table 8

Table 8 focuses on safety and security behaviours of children and youth. Here the indicators may deal with: injuries to children; cases of child abuse or neglect; children as victims of violence; child and youth perceptions of safety; children in receipt of social assistance; and criminal justice and correctional services. These indicators serve as measures of children's rights in Articles 19, 22, and 33 to 40. Article 37 codifies for children the protection against cruel or degrading punishment and all their due process rights upon arrest, including their right when deprived of their liberty to be separated from adult offenders and accused. Article 40 sets out the minimum provisions for the treatment of young offenders. Article 39 guarantees the right to recovery and social reintegration for all victims of neglect, exploitation or abuse, or cruel punishment.

Much work lies ahead in assessing the effectiveness and merit of New Brunswick measures taken to implement these many fundamental rights aimed at keeping children safe from neglect, abuse, violence and all forms of maltreatment. This will include a review of the Children's Rights and Well-being Framework itself to ensure that all relevant indicators of rights implementation are included and reported regularly.

There are two ways of analyzing the data in this Table. On the one hand it is encouraging to see that many of the indicators are trending the appropriate way and showing slight or modest year

over year improvements. However, on the whole New Brunswick continues to perform poorly in this Table in relation to other provinces, and the potential for improvement is significant.

For instance children and youth in this province are hospitalized for injuries at a much higher rate than the Canadian rate per 10,000 youths: 41.4 in New Brunswick compared to 25.8 in Canada as a whole.

We do note apparent progress, however, in a declining rate of children and youth seeking refuge in transition housing, at 2.5 per 1,000 compared to 2.8 last year, and down from 3.2 the year before. Of course, this statistic on its own may not tell the story it seems to. It will be important that the Harm Prevention Strategy look behind the numbers to see what is creating them. For example, could this statistic be the result of less transition housing availability or less aid and information being offered to victims of domestic violence or to youth generally?

We can see in our Child Rights and Well-being Framework that New Brunswick has the fourth-highest rate out of the ten provinces for child and youth victims of family violence. We also know that Moncton has the second-highest rate of child and youth victims of family violence among Canadian metropolitan areas (and Saint John the fourth).⁴⁰

However, the rate of children under sixteen years old receiving Child Protection Services in the province has decreased from 12.3/1000 to 9.9/1000.

The rate of children and youth involved in the Child Witnesses of Family Violence Program is down slightly from 3.3 to 3.1 per 1000. The percentage of youth in receipt of social assistance as a percentage of total youth is also down from 0.7% to 0.6%. The difficulty with most of these changes is that they may not be statistically significant and/or they may reflect a reduction in the availability or the access rate to such services rather than any real reduction in the prevalence of harm to children. More detailed analysis is needed before a reliable assessment of the situation can be made. All the same, it is somewhat encouraging that the problems do not appear to be getting worse. More encouraging is that the percentage of youth in grades 6 to 12 who report never having been bullied has gone up from 35% to 42%, which offers more measurably significant progress, although it is nothing to be complacent about. 58% of youths report having been bullied; it remains a distressing statistic.

In relation to correctional services, we see some heartening statistics, as our rate of youth closed-custody incarceration has gone down. Encouragingly, community sentencing is being used more frequently, including with the Aboriginal youth population. More encouraging still is that the use of reintegration leaves and escorted leaves for youth in secure custody have increased significantly. However, the percentage of youth in pre-trial detention has risen. Also, it has to be said that we are still putting more of our youth in closed custody than are many other Canadian jurisdictions, so there is much room for improvement in our youth criminal justice system. However, on the whole we appear to be heading in the right direction.

58% of our youths in grades 6 to 12 have been bullied

Table 9 – System Performance

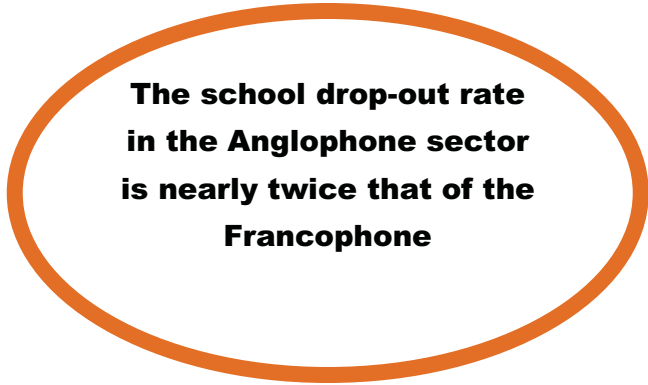
The last table in our Framework includes measures of system performance across government in relation to rights implementation as a whole. Here we seek to measure government's performance, while recognizing that many factors in relation to children's rights and well-being are beyond their control. We seek to evaluate whether we have the programs and policies in place to improve the situation as much as government is able, and assess at a glance the performance of those programs and policies. Year over year our ranking with other provinces where comparison is available has remained the same.

New Brunswick has the lowest infant mortality rate in the country and it also ranks first in the country in terms of youth

who have a regular medical doctor. And yet, much less than half of all children and youth get service for mental illness within 30 days.

Again this year, one in five grade 12 students report that they feel their school has not provided them with any opportunity to participate in physical activity other than physical education class. And again we see that more than 40% of students in grade 12 report that they feel their school has not provided them with any opportunity to participate in cultural activities organized through school.

26% of grade 12 students surveyed stated they had no opportunities at any time in high school to participate in career-related learning experiences (worse than the 23% who stated this last year). The school dropout rate has gone down incrementally. The question is: what is happening to these youths who are dropping out and why are they dropping out? Are there no alternative options for them? School dropout rates in the Francophone sector are nearly half of those in the Anglophone sector. What is keeping youths in the Francophone sector in school?



**The school drop-out rate
in the Anglophone sector
is nearly twice that of the
Francophone**

The employment rate is tied to education. The percentages for those over age 15 with less than grade nine, to those with some high school, to those who complete high school, to those with post-secondary credentials goes from 16.8 to 37.2 to 59.6 to 66.8. It will be important for a provincial strategy to also consider how best to address the impact of school leaving and graduation rates, as a lever to avoid unemployment, poverty and harm to future children.

Conclusion

For six years now the Office of the Child and Youth Advocate has endeavored to produce a reliable, annual report of children’s rights implementation in our province. With this year’s report we are able to see the current year’s data and look back at the trends over this period. We are able to undertake a child’s rights-based analysis of the data and focus in on particular aspects of child rights implementation, as we have done this year in relation to Article 19 of the *Convention on the Rights of the Child*.

Over the course of the next 12 months we will continue working with public sector, non-profit and private sector leaders to develop a Provincial Harm Prevention Strategy for Children. The Strategy will be very much evidence-based and informed by community and youth voice. Part III of this report outlines some questions to begin this process of public engagement. Jointly with the release of this report, we are pleased to announce the formation of Champions for Children, a new provincial network of child and youth service agencies working under one broad banner to advance children’s rights in New Brunswick.

With these initiatives the Province of New Brunswick will continue on its path of leadership in Canada in child rights implementation. In the past two years we felt it was important to introduce the broad theme of children’s rights through the lens of child’s play, because it makes the topic approachable and specific to children’s lives. Having now developed the data monitoring tools with this Child Rights and Well-being Framework, and the policy analysis tools with the Cabinet level Child Rights Impact Assessment toolkit, we are equipped to fulfill our obligations to children and to keep our promises to them under the *Convention on the Rights of the Child*. Keeping children safe from harm is the right place to start in this social transformation from knowledge to responsibility.

Part III – Questions for Consultation

In order to inform the Provincial Harm Prevention Strategy for Children we have included in this year's State of the Child Report a series of questions, based on our obligations to children under the *Convention on the Rights of the Child*. They are shared here to stimulate debate, reflection and action in order to better protect New Brunswick children.

1. How can New Brunswick improve protective factors and positive supports for children and youth?

- How can we better provide for supportive peer relationships and teacher/mentor relationships?
- How can we promote pro-social, non-discriminatory attitudes to provide strong protective factors to guard against harm?
- How can we best build community connections and social relationships to increase confidence and resiliency in children and youth?
- How can we develop robust peer support systems that bolster youth mental fitness?
- In schools, how can we best teach children about their rights to instill in them values of respect, empathy and sympathy?
- Are we doing enough to connect children to supports in the community?
- Are we providing the means for peer and adult individual support?
- Is everyone working in the school system given the resources and supports necessary to promote healthy relationships based on dignity and rights?
- How are we addressing schoolyard fighting and verbal bullying?
- Are we achieving the aim of teaching our children about their right to be free from discrimination, and their responsibilities to treat everyone with equality?
- Do we presently place enough emphasis on supporting and building the particular strengths of each child, and their support structures including family, community, and school?
- How can we build the curriculum in schools to be guided by the rights of children as found in the *Convention on the Rights of the Child*, to ensure that children are aware of their rights and the resulting responsibilities, and better equipped to protect themselves and protect their peers?
- How can we best identify risk factors present in children?

- And when we identify risk factors, are we taking a close look at the conditions of their lives and find ways to improve these conditions? Are we taking into account poverty, health, education, discrimination, unemployment, social supports and other factors?

2. How can we most effectively coordinate government action?

- Does New Brunswick need a leadership focal point for services to children within government empowered to coordinate government's responsibilities to children in our province, to achieve the level of protection from harm that we seek?
- If a central agency responsible for the coordination and integration of services to children and youth is necessary, where should that coordinating body be located within government and how should it function in conjunction with an inter-departmental group?
- Does New Brunswick need a children's budget – an accurate accounting of what is spent on children? If so, should this begin with an accounting of resources allocated to protection of children from harm?
- How can the *Convention on the Rights of the Child* most effectively be made part of the training and education of all those who will work in child-serving areas, including social workers, teachers, health personnel, and probation officers?

3. How can better partnerships between government, families and communities be developed?

- How can partnerships with all sectors of New Brunswick society be improved to lead to improvements in protection for children?
- How can not-for-profit organizations in communities best benefit from increased collaboration with government and vice-versa?
- How can the business community most effectively play a role through increased collaboration?
- How can government find ways to connect with all of civil society and reinforce its various strengths?
- What do we need to do as a province to ensure that everyone who is in contact with children, in government, in families, in communities, are able to recognize the risk factors and the signs of harm and have the understanding to take appropriate action? How can we instill this ability in children themselves?
- What are the barriers that inhibit or prevent professionals or other witnesses of possible harm to children from acting on their concerns? How can we ensure that those concerns are diligently and competently addressed?
- Are there presently sufficient confidential, accessible, well-publicized and effective means of reporting harm to children?
- What kind of minimal standards do we need in New Brunswick for anyone working or volunteering to work in a relationship of trust with children?

- Should there be a legislated requirement for all civil society members who are working with children in either a staff or volunteer capacity?
- When youth stray from school and positive relationship supports, do we have sufficient supports to keep them from further harm?

4. How can government best support families in need?

- How is government living up to its obligation to support the ability of families to provide an environment for children that is free from harm? What is government presently doing and where can it improve?
- Do we need more and better programs to support parents and other caregivers in the home?
- Are we reinforcing positive child-rearing techniques and adequate supports for parental mental health issues and addictions issues that can impede effective child-rearing?
- Is government measuring the effectiveness of its policies and programs?

5. How can we raise awareness and ensure effective mechanisms exist to identify and report all forms of harm?

- How can we ensure that children's rights are understood by children, and also by adults, especially those who work with children?
- How can New Brunswick leverage the resources of New Brunswick's Public Legal Education and Information Service (PLEIS)⁴¹ to help parents and others recognize and prevent abuse, neglect and violence?
- How can New Brunswick most successfully both inform and learn from the public about harm to children, and how can the issues best be discussed?
- How can we best ensure that various mechanisms for reporting suspected child abuse, violence and neglect exist and are well-publicized and accessible for adults and children?

6. How can we best provide special protection and specific supports for particularly vulnerable groups such as homeless children, children with disabilities, and children in minority or marginalized groups?

- How can government best act in proactive ways when protecting different groups from harm in order to achieve substantive equality rights for vulnerable groups of children and youth?
- Given the different risks faced by different distinct groups of children, how can we best ensure that all anti-harm policies and programs have gender and vulnerable sub-group perspectives?
- How can we best protect children with disabilities, considering their particular vulnerability to harm⁴²? Are we capturing useful data on prevalence of harm to these children and analyzing the information?
- How can we best ensure accessibility of supports such as counseling, social work, public health and psychological services to First Nations children?
- How can we best identify the factors that impede access to programs and services by vulnerable groups such as First Nations children?
- How can we make certain that gender issues are at the forefront of government's work in protection from harm?
- What more can be done to protect girls under the age of 12 from sexual crimes, which represent by far the biggest proportion of all violent crimes perpetrated against them?
- What more can be done to protect girls aged 12 to 17 who are roughly twice as likely to be the victims of violence as women aged 18 and over?
- How can government departments best work with the Women's Equality Branch to create a comprehensive gender equality program to reduce violence against girls?
- What more can be done to protect children and youth in government care (in group homes and foster care situations)?
- Where are we falling short in providing special protections and supports for children and youth in government care who get there because they have been abused or neglected in their home environment?
- Children and youth in government care disproportionately come from backgrounds of harm and deserve special attention, but are we offering them less? Are they getting sufficient educational, recreational, employment, or emotional support when in government care?
- What more can be done to protect homeless youth? These youth deserve supports and services, but how can these youths best be reached?
- If we truly want to protect these youths from harm, from predators of all kinds, is it more practical to bring services to them, through youth drop-in centres with social work and counseling services available?
- How do we keep youths from the harms associated with the criminal justice system? Should we have more community and family-based alternatives to remand and incarceration to protect youths in the criminal justice system?
- Do we need greater focus on community resources for rehabilitation for youths in the criminal justice system?

7. What are the mechanisms by which government can solicit children and youth's opinions and take them into account?

- How can government best ensure the right of children and youth to have their opinions heard and taken into account in all matters that affect them, as per Article 12 of the *Convention on the Rights of the Child*?
- In order to most effectively protect children from harm what are the means to hear from the children who experience it?
- How can children and youth be actively involved in the development of plans and programs to protect them from harm?
- How should New Brunswick approach consulting children and youth on reducing the risks of injury in the physical environment, the risks of suffering neglect, the risks of sexual or other assault, the risks of bullying and cyberbullying, the risks of Internet sexual exploitation, and all other forms of harm?
- Is government accessing the excellent resources that exist on how best to ensure children's participation and consultation?
- In a nutshell: are we hearing from our children and youth?

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Children's Rights and Well-Being Framework 2013



New Brunswick Health Council | Conseil de la santé
du Nouveau-Brunswick

Engage. Evaluate. Inform. Recommend.
Engager. Évaluer. Informer. Recommander.

Who should use the framework :

- Community and neighborhood residents
- Young people
- Educators
- Youth workers
- Community leaders
- Employers and business people
- Healthcare providers
- Parents / Grandparents
- Media representatives
- Religious leaders
- After-school caregivers and coaches
- Community agencies
- Youth groups
- Policy and decision-makers
- Local Government representatives
- Provincial and Federal Government representatives
- Local coalitions and networks
- Public Service Employees

Children's Rights and Well-being Framework

1

Diversity

How diverse are children and youth in New Brunswick?



(Demographic Information)

2

Expression

How well are children and youth expressing themselves in New Brunswick?



(Positive sense of expression)

3

Family and Community

What kinds of families and communities do New Brunswick's children and youth live in?



(Family Economic Situation, Parental Health Behaviours, Family and Community Connectedness, Children in Non-Parental Care)

4

Health

How healthy are New Brunswick's children and youth?



(Morbidity, Disability, Child and Youth Health, Mental Health, Unhealthy Weight)

5

Healthy Development

How well are we promoting healthy child and youth development?



(Pre and Post Natal, Early Learning, Physical or Mental Health, Dental Health, Vision Health, Children and Youth Perceptions of Healthy Living, Children and Youth Health Behaviours)

6

Learning

How well are New Brunswick's children and youth learning?



(Transition to Primary School, Literacy and Numeracy, Social and Emotional Development, School Connectedness)

7

Adverse Factors

What factors can affect children and youth adversely?



(Teen pregnancy, Drug Use, Tobacco Use, Alcohol Use, Other Negative Behaviours of Children or Youth, Environment & Climate Change)

8

Safety and Security

How safe and secure are New Brunswick's children and youth?

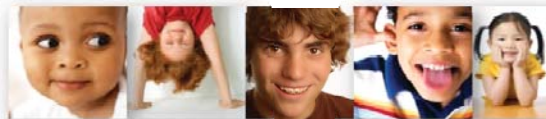


(Injuries, Child Abuse and Neglect, Children as victims of violence, Child and Youth who feel safe, Social Assistance, Youth Admissions to Correctional Services)

9

System Performance

How is New Brunswick performing in regards to the Rights and Well-being of children and youth?



What are the Rights of the Child and Youth? Created by UNICEF Canada

UN Convention on the Rights of the Child In Child Friendly Language^c

"Rights" are things every child should have or be able to do. All children have the same rights. These rights are listed in the UN Convention on the Rights of the Child. Almost every country has agreed to these rights. All the rights are connected to each other, and all are equally important. Sometimes, we have to think about rights in terms of what is the best for children in a situation, and what is critical to life and protection from harm. As you grow, you have more responsibility to make choices and exercise your rights.



Article 1

Everyone under 18 has these rights.

Article 2

All children have these rights, no matter who they are, where they live, what their parents do, what language they speak, what their religion is, whether they are a boy or girl, what their culture is, whether they have a disability, whether they are rich or poor. No child should be treated unfairly on any basis.

Article 3

All adults should do what is best for you. When adults make decisions, they should think about how their decisions will affect children.

Article 4

The government has a responsibility to make sure your rights are protected. They must help your family to protect your rights and create an environment where you can grow and reach your potential.

Article 5

Your family has the responsibility to help you learn to exercise your rights, and to ensure that your rights are protected.

Article 6

You have the right to be alive.

Article 7

You have the right to a name, and this should be officially recognized by the government. You have the right to a nationality (to belong to a country).

Article 8

You have the right to an identity – an official record of who you are. No one should take this away from you.

Article 9

You have the right to live with your parent(s), unless it is bad for you. You have the right to live with a family who cares for you.

Article 10

If you live in a different country than your parents do, you have the right to be together in the same place.

Article 11

You have the right to be protected from kidnapping.

Article 12

You have the right to give your opinion, and for adults to listen and take it seriously.

Article 13

You have the right to find out things and share what you think with others, by talking, drawing, writing or in any other way unless it harms or offends other people.

Article 14

You have the right to choose your own religion and beliefs. Your parents should help you decide what is right and wrong, and what is best for you.

Article 15

You have the right to choose your own friends and join or set up groups, as long as it isn't harmful to others.

Article 16

You have the right to privacy.

Article 17

You have the right to get information that is important to your well-being, from radio, newspaper, books, computers and other sources. Adults should make sure that the information you are getting is not harmful, and help you find and understand the information you need.

Article 18

You have the right to be raised by your parent(s) if possible.

Article 19

You have the right to be protected from being hurt and mistreated, in body or mind.

Article 20

You have the right to special care and help if you cannot live with your parents.

Article 21

You have the right to care and protection if you are adopted or in foster care.

Article 22

You have the right to special protection and help if you are a refugee (if you have been forced to leave your home and live in another country), as well as all the rights in this Convention.

Article 23

You have the right to special education and care if you have a disability, as well as all the rights in this Convention, so that you can live a full life.

Article 24

You have the right to the best health care possible, safe water to drink, nutritious food, a clean and safe environment, and information to help you stay well.

Article 25

If you live in care or in other situations away from home, you have the right to have these living arrangements looked at regularly to see if they are the most appropriate.

Article 26

You have the right to help from the government if you are poor or in need.

Article 27

You have the right to food, clothing, a safe place to live and to have your basic needs met. You should not be disadvantaged so that you can't do many of the things other kids can do.

Article 28

You have the right to a good quality education. You should be encouraged to go to school to the highest level you can.

Article 29

Your education should help you use and develop your talents and abilities. It should also help you learn to live peacefully, protect the environment and respect other people.

Article 30

You have the right to practice your own culture, language and religion - or any you choose. Minority and indigenous groups need special protection of this right.

Article 31

You have the right to play and rest.

Article 32

You have the right to protection from work that harms you, and is bad for your health and education. If you work, you have the right to be safe and paid fairly.

Article 33

You have the right to protection from harmful drugs and from the drug trade.

Article 34

You have the right to be free from sexual abuse.

Article 35

No one is allowed to kidnap or sell you.

Article 36

You have the right to protection from any kind of exploitation (being taken advantage of).

Article 37

No one is allowed to punish you in a cruel or harmful way.

Article 38

You have the right to protection and freedom from war. Children under 15 cannot be forced to go into the army or take part in war.

Article 39

You have the right to help if you've been hurt, neglected or badly treated.

Article 40

You have the right to legal help and fair treatment in the justice system that respects your rights.

Article 41

If the laws of your country provide better protection of your rights than the articles in this Convention, those laws should apply.

Article 42

You have the right to know your rights! Adults should know about these rights and help you learn about them, too.

Articles 43 to 54

These articles explain how governments and international organizations like UNICEF will work to ensure children are protected with their rights.

This is not an official version of the *Convention on the Rights of the Child*. The official *Convention* can be found online at: <http://www.gov.mu/portal/sites/HRC/downloads/rights/convention%20on%20the%20rights%20of%20the%20child.htm>

1 – How diverse are children and youth in New Brunswick?

UN Convention on the Rights of the Child: **Guiding Principles and the Child's Right to an Identity - Article: 1, 2, 3, 6, 7, 8, 12, 30**

	Age or Grade	Previous NB Data	Male	Female	NB	Canada	Rank (NB to Canada)	
Demographic Information	1 - Total population (2011, count)	All population	729,997	366,440	384,730	751,171	33,476,688	8/10
	a) 0 to 4 years old (2011, % of population)	0 to 4 years old	4.7	5.1	4.7	4.9	5.6	8/10
	b) 5 to 9 years old (2011, % of population)	5 to 9 years old	5.3	5.1	4.7	4.9	5.4	8*/10
	c) 10 to 14 years old (2011, % of population)	10 to 14 years old	6.3	5.7	5.1	5.4	5.7	8/10
	d) 15 to 19 years old (2011, % of population)	15 to 19 years old	6.5	6.4	5.8	6.1	6.5	9/10
	e) 0 to 19 years old (2011, % of population)	0 to 19 years old	22.7	22.3	20.3	21.2	23.3	9/10
	f) 20 to 64 years old (2011, % of population)	20 to 64 years old	62.5	62.7	62.0	62.3	62.0	4/10
	g) 65 and up years old (2011, % of population)	65 + years old	14.8	15.1	17.8	16.5	14.8	2/10
	2 - Total number of census families (2011, count)	All population	217,790	-	-	224,590	9,389,695	8/10
	3 - Average number of persons in a census family (2011, count)	All population	2.8	-	-	2.7	2.9	8*/10
	4 - Population with English as language most spoken at home (2011, % of population)	All population	68.7	68.3	68.0	68.2	64.1	9/10
	5 - Population with French as language most spoken at home (2011, % of population)	All population	29.4	27.9	28.0	27.9	20.4	2/10
	6 - Aboriginal identity population who speak an Aboriginal language most often at home (2006, %)	All population	-	8.8	8.5	8.7	11.8	7/10
	7 - Immigrant population (2011, %)	All population	3.67	3.8	3.9	3.9	20.6	9/10
	8 - Aboriginal identity population (2011, %)	All population	2.45	3.1	3.1	3.1	4.3	7/10
	9 - Population 15 years and over reporting hours looking after children without pay (2006, %)	All population	-	32.0	39.2	35.7	37.5	7/10
	10 - Total enrolment in school (2012-13, count)	K to grade 12	102,579	52,016	49,063	101,079	-	-
	a) Kindergarten to grade 5 (2012-13, % of total enrolment in school)	K to grade 5	42.1	42.4	43.1	42.8	-	-
	b) Grade 6 to 8 (2012-13, % of total enrolment in school)	Grade 6 to 8	23.0	22.5	22.8	22.6	-	-
	c) Grade 9 to 12 (2012-13, % of total enrolment in school)	Grade 9 to 12	34.7	34.8	34.0	34.4	-	-
d) Returning graduates (2012-13, % of total enrolment in school)	Returning graduates	0.2	0.2	0.2	0.2	-	-	
11 - Enrolment in school by English language of instruction (2012-13, %)	K to Grade 12	54.1	56.5	49.8	53.3	-	-	
12 - Enrolment in school by French language of instruction (2012-13, %)	K to Grade 12	28.7	28.6	29.0	28.8	-	-	
13 - Enrolment in school by French Immersion language of instruction (2012-13, %)	K to Grade 12	17.2	14.9	21.2	17.9	-	-	



Ranking for Diversity:

1 = most amount
 10 = least amount
 (out of the 10 provinces)
 *=Another province has the same ranking

Bold = Updated indicator

- =Data unavailable
 K = Kindergarten

2 – How well are children and youth expressing themselves in New Brunswick?

UN Convention on the Rights of the Child: **Civil Rights and Freedoms – Article: 12, 13, 14, 15, 16, 17, 19, 28, 31**

	Age or Grade	Previous NB Data	Male	Female	NB	Canada	Rank (NB to Canada)
1 - Youth who have pro-social behaviours [being helpful, respectful, thoughtful, etc] (2012-13, %)	Grade 6 to 12	81**	75	87	81	-	-
a) Aboriginal youth who have pro-social behaviours [being helpful, respectful, thoughtful, etc] (2012-13, %)	Grade 6 to 12	75**	73	80	76	-	-
2 - Child who has pro-social behaviours [being helpful, respectful, thoughtful, etc] (2010-11, %)	Grade 4 to 5	-	62	79	71	-	-
3 - Youth who participate in sports organized by the school (2012-13, %)	Grade 12	42	46	39	42	-	-
4 - Youth who participate in sports not organized by the school (2012-13, %)	Grade 12	43	51	38	45	-	-
5 - Youth who participate in activities organized by the school (2012-13, %)	Grade 12	53	34	46	40	-	-
6 - Youth who participate in activities not organized through the school (2012-13, %)	Grade 12	28	30	29	29	-	-
7 - Child who usually take part in physical activities not organized by school (such as biking, dancing, sports or games) after school (2010-11, %)	Grade 4 to 5	-	69	67	68	-	-
8 - Aboriginal child or youth who plays sports one or more times per week (2006, %)	6 to 14 years old	-	-	-	67	68	4*/7
9 - Youth who have moderate to high level of autonomy [choices] (2012-13, %)	Grade 6 to 12	71	68	72	70	-	-
10 - Child who has moderate to high level of autonomy [choices] (2010-11, %)	Grade 4 to 5	-	81	84	82	-	-
11 - Youth who have moderate to high level of competency (2012-13, %)	Grade 6 to 12	76	75	77	76	-	-
12 - Child who has moderate to high level of competency (2010-11, %)	Grade 4 to 5	-	75	83	79	-	-
13 - Youth who spend 2 hours or less per day in screen time [watching TV/movies, video games, computer time, messaging or talking on the phone] (2012-13, %)	Grade 6 to 12	25**	21	23	23	-	-
a) Aboriginal youth who spend 2 hours or less per day in screen time [watching TV/movies, video games, computer time, messaging or talking on the phone] (2012-13, %)	Grade 6 to 12	20**	15	16	16	-	-
14 - Child who spends 2 hours or less on screen time on most days [watching TV video games, computer time] (2010-11, %)	Grade 4 to 5	-	32	46	38	-	-
15 - Physical activity youth participated in the last 3 months: WALKING (2012, %)	12 to 19 years old	72	69	88	78	67	3/10
16 - Physical activity youth participated in the last 3 months: JOGGING OR RUNNING (2012, %)	12 to 19 years old	70	67	65	66	63	6/10
17 - Physical activity youth participated in the last 3 months: BICYCLING (2012, %)	12 to 19 years old	44	56	32	45	47	6/10
18 - Physical activity youth participated in the last 3 months: HOME EXERCICES (2012, %)	12 to 19 years old	53	47	53	50	44	2/10
19 - Physical activity youth participated in the last 3 months: SWIMMING (2012, %)	12 to 19 years old	53	47	63	54	46	2/10
20 - Physical activity youth participated in the last 3 months: GARDENING / YARD WORK (2012, %)	12 to 19 years old	40	52	38	46	33	1/10
21 - Physical activity youth participated in the last 3 months: SOCCER (2012, %)	12 to 19 years old	27	38	25	32	37	7/10
22 - Physical activity youth participated in the last 3 months: POPULAR / SOCIAL DANCE (2012, %)	12 to 19 years old	40	21	50	35	28	4/10
23 - Physical activity youth participated in the last 3 months: BASKETBALL (2012, %)	12 to 19 years old	36	41	14	28	38	10/10
24 - Physical activity youth participated in the last 3 months: VOLLEYBALL (2012, %)	12 to 19 years old	21	16	26	21	29	9/10
25 - Physical activity youth participated in the last 3 months: BOWLING (2012, %)	12 to 19 years old	15	20	21	20	19	5/10
26 - Physical activity youth participated in the last 3 months: ICE HOCKEY (2012, %)	12 to 19 years old	19	27	5	17	15	4/10
27 - Physical activity youth participated in the last 3 months: BASEBALL / SOFTBALL (2012, %)	12 to 19 years old	23	16	14	15	16	9/10
28 - Youth labor participation rate (2011, %)	15 to 19 years old	47	45	46	45	40	-
29 - Youth who volunteered outside school without being paid, in the last year (2012-13, %)	Grade 6 to 12	76	67	80	73	-	-
30 - Youth who plan to vote, once they are legally entitled to, in municipal, provincial or federal elections (2012-13, %)	Grade 12	69	70	70	70	-	-

Positive sense of expression



Legend:

Doing Well (ranked 1, 2, 3)

Caution

Lagging (last 3 places)

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3 - What kinds of families and communities do New Brunswick's children and youth live in?

UN Convention on the Rights of the Child: **Family Environment and Alternative Care – Articles 4, 5, 6, 9, 10, 11, 12, 18, 19, 21, 25, 26, 27**

	Age or Grade	Previous NB Data	Male	Female	NB	Canada	Rank (NB to Canada)	
Family Economic Situation	1 - Living in low-income family (under 18 years old) (2011, %) [change in methodology since 2006]	Under 18 years old	-	-	-	21	17	8/10
	a) Living in low-income family (under 6 years old) (2011, %) [change in methodology since 2006]	Under 6 years old	-	-	-	23	18	7/10
	2 - Unemployment rate (2012, %)	15 and over	9.5	-	-	10.2	7.3	8/10
	3 - No high school diploma (2011, %)	25 to 64 years old	21	19	15	17	13	8*/10
	4 – a) Has a postsecondary certificate, diploma or degree (2011, %)	25 to 64 years old	53	55	58	57	64	8*/10
	b) Percentage of the Aboriginal identity population 25 years and over with postsecondary certificate, diploma or degree (2006, %)	All population	-	41	39	40	35	3/13
	5 - Living in a single parent family (2011, %)	Under 18 years old	16	-	-	16	16	5/10
	6 - Family receiving Social Assistance or Welfare benefits (2013, % out of all families with children at home)	All families	6.0	-	-	5.8	-	-
	7 - Family support payments received (2011-12, %)	All population	91	-	-	91	85	2/6
	8 - Aboriginal on Social Assistance or Welfare benefits as source of income (2006, %)	15 and over	-	-	-	10	16	-
	9 - Food insecurity in homes with children less than 18 years old, moderate and severe (2007-08, %)	Under 18 years old	-	-	-	7.3	5.1	10/13
	a) Food insecurity in homes with children 0 to 5 present, moderate and severe (2007-08, %)	0 to 5 years old	-	-	-	5.2 ^E	4.9	5/13
	b) Food insecurity in homes with children 6 to 17 present, moderate and severe (2007-08, %)	6 to 17 years old	-	-	-	8.7	5.2	11/13
10 a) Household spending on shelter based on average household spending (2011, %)	All population	17.9	-	-	17.6	20.6	2/10	
	b) Household spending on food based on average household spending (2011, %)	All population	11.9	-	-	11.6	10.6	8/10
Parental Health Behaviours	11 - Parents who eat 5 or more fruits or vegetables a day (2010-11, %)	Parents - K to 5	-	-	-	47	-	-
	12 - Parents who did not consume sweetened non-nutritious beverages day before (2010-11, %)	Parents - K to 5	-	-	-	54	-	-
	13 - Parents being very physically active at least 30 minutes 3 or more times per week (2010-11, %)	Parents - K to 5	-	-	-	58	-	-
	14 - Parents who spend 2 hours or less per day in sedentary activity [in front of a screen] (2010-11, %)	Parents - K to 5	-	-	-	90	-	-
	15 - Parents who participate in leisure activities [crafting, singing, listening to music, playing the piano, etc] (2010-11, %)	Parents - K to 5	-	-	-	86	-	-
	16 - Parents who say they ate breakfast yesterday with children (2010-11, %)	Parents - K to 5	-	-	-	55	-	-
	17 - Parents who did not eat at a fast food restaurant in the last week (2010-11, %)	Parents - K to 5	-	-	-	47	-	-
	18 - Adults who watched TV more than 15 hours in the last week (2011, %)	20 and over	32	-	-	34	31	7/10
Family and Community Connectedness	19 - Youth sense of belonging to their community, somewhat strong or very strong (2012, %)	12 to 19 years old	80	72	84	77	78	8/10
	20 - Satisfaction of youth mental fitness needs related to friends (2012-13, %)	Grade 6 to 12	83**	80	84	82	-	-
	21 - Satisfaction of youth mental fitness needs related to family (2012-13, %)	Grade 6 to 12	76**	77	78	77	-	-
Children in Non-Parental Care	22 - Families receiving subsidies for adopted children with special needs (2013, count)	Under 18 years old	322	-	-	315	-	-
	23 - Infants placed for adoption [public adoption] (2013, count)	Infants	<10	-	-	<10	-	-
	24 - Private adoptions (2013, count)	Under 18 years old	27	-	-	17	-	-
	25 - International adoptions (2013, count)	Under 18 years old	31	-	-	17	-	-



Legend:

Doing Well (ranked 1, 2, 3)

Caution

Lagging (last 3 places)

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4 - How healthy are New Brunswick's children and youth?

UN Convention on the Rights of the Child: **The Right to Health – Article; 2, 6, 18, 19, 23, 24, 39**

		Age or Grade	Previous NB Data	Male	Female	NB	Canada	Rank (NB to Canada)	
Morbidity	1 - Low birth weight (2011, %)	At birth	6.1	5.4	6.4	5.9	6.1	6*/10	
	2 - Congenital malformations, deformations and chromosomal abnormalities (2009, rate per 100,000)	At birth	Under development						
	3 - Prevalence of diabetes among youth (2012, %)	12 to 19 years old	1.7 ^E	1.2 ^E	0	0.7 ^E	0.3 ^E	10/10	
	4 - Prevalence of asthma among youth (2012, %)	12 to 19 years old	13.6 ^E	13.1 ^E	16.1 ^E	14.4 ^E	10.8	10/10	
	5 - Prevalence of asthma in Aboriginal youth (2006, %)	6 to 14 years old	-	x	x	22	14	7/7	
	6 - Youth who have sexually transmitted infections - Chlamydia rate (2011, rate per 100,000)	15 to 19 years old	1,318	1,065	2,308	1,664	-	-	
Disability	7 - Functional health, good to full (2009-10, %)	12 to 19 years old	-	84	81	83	85	6/10	
	8 - Injuries in the past 12 months causing limitation of normal activities (2009-10, %)	12 to 19 years old	-	34	28	31	27	9/10	
	9 - Aboriginal youth with one or more activity limitation often (2006, %)	6 to 14 years old	-	-	-	9	11 ^E	6*/7	
Child and Youth Health	10 - See their health as being very good or excellent (2012, %)	12 to 19 years old	66	57	65	61	70	10/10	
	11 - Aboriginal youth who see their health as being very good or excellent (2006, %)	6 to 14 years old	-	-	-	82	-	2*/7	
	12 - See their mental health as being very good or excellent (2012, %)	12 to 19 years old	78	81	77	79	79	2/10	
Mental Health	13 - Childhood/adolescence behavioural and learning disorders (2012-13, cases admitted to hospital per 10,000)	0 to 18 years old	11.0	8.9	14.3	11.6	3.6	-	
	14 - Depressive episode (2012-13, cases admitted to hospital per 10,000)	0 to 18 years old	11.8	20.1	7.3	13.6	9.6	-	
	15 - Stress reaction / adjustment disorder (2012-13, cases admitted to hospital per 10,000)	0 to 18 years old	9.9	10.7	4.9	7.7	5.9	-	
	16 - Schizotypal/delusional disorder (2012-13, cases admitted to hospital per 10,000)	0 to 18 years old	1.6	2.4	2.4	2.4	1.5	-	
	17 - Mood (affective) disorder (2012-13, cases admitted to hospital per 10,000)	0 to 18 years old	3.4	2.6	1.1	1.8	0.9	-	
	18 - Anxiety disorder (2012-13, cases admitted to hospital per 10,000)	0 to 18 years old	1.8	4.1	2.6	3.4	2.0	-	
	19 - Eating disorder (2012-13, cases admitted to hospital per 10,000)	0 to 18 years old	1.0	4.5	0.2	2.3	1.7	-	
	20 - Rate of hospitalized cases for mental diseases and disorders (2012-13, cases admitted to hospital per 10,000)	0 to 18 years old	54.4	66.7	45.7	55.9	31.9	-	
Unhealthy weight	21 - Youth with unhealthy weight - overweight and obese (2012-13, %)	Grade 6 to 12	23	32	23	28	-	-	
	22 - Youth who consider themselves overweight (2012, %)	12 to 19 years old	14	15	22	18	13	10/10	
	23 - Child with unhealthy weight - overweight and obese (2010-11, %)	Grade K to 5	-	35	38	36	-	-	
	24 - Youth with unhealthy weight - underweight (2012-13, %)	Grade 6 to 12	7	5	10	8	-	-	
	25 - Youth who consider themselves underweight (2012, %)	12 to 19 years old	8	16	0.4	9	8	10/10	
	26 - Child with unhealthy weight - underweight (2010-11, %)	Grade K to 5	-	9	13	11	-	-	



Legend:

Doing Well (ranked 1, 2, 3)

Caution

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E = Use with caution

5 - How well are we promoting healthy child and youth development?

UN Convention on the Rights of the Child: **Health Behaviour**; – **Articles 3, 6, 12, 24, 27, 28, 31, 39**

		Age or Grade	Previous NB Data	Male	Female	NB	Canada	Rank (NB to Canada)
Pre and Post natal	1 - Expectant mother receiving prenatal benefits (2011-12,% of live births)	All expectant mother	20.0	-	19.7	19.7	-	-
	2 - Universal newborn and infant hearing screening (2012-13, %)	Newborn and infant	86	-	-	91	-	-
	3 - Breastfeeding initiation (2012, %)	12 years old and up	69	-	79	79	90	7/10
	4 - Proportion of infants exclusively breastfed at 6 months (2012, %)	12 years old and up	21	-	27	27	24	4/9
	5 - Proportion of Kindergarten children meeting immunization requirements (2011-12, %) (methodology change since 2009)	K	67	-	-	73	-	-
Early Learning	6 - Total approved available child care spaces (2012-13, count)	Child in childcare	21,695	-	-	22,649	-	-
	7 - Early intervention services (2012-13, monthly average)	Early childhood	1,802	-	-	1,594	-	-
Physical or Mental Health	8 - Youth who had a medical doctor visit within the last year (2012, %)	12 to 19 years old	70	56	68	62	65	7/10
	9 - Youth who saw or talked to a health professional about emotional or mental health within the last year (2012, %)	12 to 19 years old	15	13	13	13	11	1/10
	10 - Youth who have moderate to high level of mental fitness [competency, autonomy, relatedness needs met] (2012-13, %)	Grade 6 to 12	77**	76	80	78	-	-
	a) Aboriginal youth who have moderate to high level of mental fitness [competency, autonomy, relatedness needs met] (2012-13, %)	Grade 6 to 12	66**	70	70	70	-	-
11 - Child who has moderate to high level of mental fitness [having a positive sense of how they feel, think and act] 2010-11, %)	Grade 4 to 5	-	77	84	80	-	-	
Dental Health	12 - Youth who visited a dental professional within the last year (2012, %)	12 to 19 years old	84	78	75	77	80	9/10
	13 - Aboriginal youth who visited a dental professional within the last year (2009-10, %)	6 to 14 years old	-	-	-	78	71	5*/7
Vision Health	14 - Youth who visited or talked to an eye professional within the last year (2012, %)	12 to 19 years old	43	27	50	38	46	8/10
Children and Youth Perceptions of Healthy Living	15 - Teachers show a positive attitude towards healthy living (2012-13, %)	Grade 12	75	71	75	73	-	-
	16 - School promoted healthy eating by providing easy access to healthy food and snacks (2012-13, %)	Grade 12	66	63	61	62	-	-
	17 - Healthy food choices noticed by youths in schools[at sporting or other events, for fundraising, in the canteen / cafeteria, lower prices for healthier foods, etc] (2012-13, %)	Grade 6 to 12	61	55	64	59	-	-
	18 - Physical activity of parents, as reported by a youth [at least 3 times in the last week] (2012-13, %)	Grade 6 to 12	42	41	44	43	-	-
	19 - Parent is physically active, as reported by child (2010-11, %)	Parents - K to 5	-	-	-	65	-	-
	20 - Child who ate dinner with a parent day before survey (2010-11, %)	Grade 4 to 5	-	75	79	77	-	-
Children and Youth Health Behaviours	21 - Youth walking and bicycling that is done only as a way of getting to and from work or school (2012, %)	12 to 19 years old	28	39	45	42	55	7/10
	22 - Youth who spend at least 60 minutes a day in a combination of moderate and hard physical activity (2012-13, %)	Grade 6 to 12	57**	68	53	60	-	-
	a) Aboriginal youth who spend at least 60 minutes a day in a combination of moderate and hard physical activity (2012-13, %)	Grade 6 to 12	58**	70	55	63	-	-
	23 - Child who is very physically active for at least 30 minutes 3 or more times per week (2010-11, %)	Grade 4 to 5	-	80	79	80	-	-
	24 - Youth who eat breakfast daily (2012-13, %)	Grade 6 to 12	41	47	37	42	-	-
	a) Aboriginal youth who eat breakfast daily (2012-13, %)	Grade 6 to 12	31	40	24	32	-	-
	25 - Child who eats breakfast daily (2010-11, %)	Grade 4 to 5	-	68	72	70	-	-
	26 - Youth who eat 5 or more fruits or vegetables a day [not including juices] (2012-13, %)	Grade 6 to 12	40**	42	45	43	-	-
	a) Aboriginal youth who eat 5 or more fruits or vegetables a day [not including juices] (2012-13, %)	Grade 6 to 12	36**	40	39	40	-	-
	27 - Child who eats 5 or more fruits or vegetable a day [not including juices] (2010-11, %)	Grade 4 to 5	-	47	55	50	-	-
	28 - Youth who sleep more than 8 hours a night (2012-13, %)	Grade 6 to 12	52	39	37	38	-	-
	29 - Youth who have never tried smoking by grade 12 (2012-13, %)	Grade 6 to 12	60	50	58	54	-	-
	a) Aboriginal youth who have never tried smoking by grade 12 (2012-13, %)	Grade 6 to 12	52	37	38	38	-	-
30 - Youth who use sun screen on their body in summer (2012, % reported using sun screen always and often)	12 to 19 years old	41	39	53	45	-	-	



Legend:

Doing Well (ranked 1, 2, 3)
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6 - How well are New Brunswick's children and youth learning?

UN Convention on the Rights of the Child: **Educational, Cultural and Minority Rights – Articles 12, 19, 23, 28, 29, 31**

		Age or Grade	Previous NB Data	Male	Female	NB	Canada	Rank (NB to Canada)
Transition to primary school	1 - Aboriginal youth who attended an early childhood development or preschool program (2007, %)	6 to 14 years old	-	-	-	68	62	1*/7
Literacy and Numeracy	2 a) Grade 2 - Reading comprehension - assessment by sector (2012-13, % students having achieved an appropriate or strong performance)	Grade 2	A:79 F:77	A:75 F:73	A:84 F:81	A:80 F:77	-	-
	b) Grade 2 - Oral reading - assessment for Francophone sector only (2012-13, % students having achieved an appropriate or strong performance)	Grade 2	F:77	F:73	F:81	F:77	-	-
	c) Grade 2 - Writing - assessment for Anglophone sector only (2012-13, % students having achieved an appropriate or strong performance)	Grade 2	A:78	A:76	A:88	A:82	-	-
	3 - Grade 3 - Math - assessment for Francophone sector only (2012-13, % students having achieved an appropriate or strong performance)	Grade 3	-	F:76	F:76	F:76	-	-
	4 - Grade 4 - Reading comprehension - assessment by sector (2012-13, % students having achieved an appropriate or strong performance)	Grade 4	A:77 F:62	A:60 F:62	A:70 F:73	A:66 F:67	-	-
	5 a) Grade 5 - Sciences and Technologies - assessment for Francophone sector only (2012-13, %)	Grade 5	F:63	F:80	F:86	F:83	-	-
	b) Grade 5 - Math - assessment by sector (2012-13, %)	Grade 5	A:61 F:72	A:62 F:78	A:64 F:82	A:63 F:80	-	-
	6 - Grade 7 - English reading comprehension - assessment for Anglophone sector only (2012-13, %)	Grade 7	A:69	A:71	A:81	A:76	-	-
	7 a) Grade 8 - Sciences and Technologies - assessment for Francophone sector only (2012-13, %)	Grade 8	F:65	F:67	F:70	F:69	-	-
	b) Grade 8 - Math - assessment by sector (2012-13, %)	Grade 8	A:58 F:65	A:58 F:57	A:59 F:60	A:59 F:58	-	-
	c) Grade 8 - French - assessment for Francophone sector only (2012-13, %)	Grade 8	F:64	F:56	F:78	F:67	-	-
	8 a) Grade 9 - English reading comprehension - assessment for Anglophone sector only (2012-13, %)	Grade 9	A:74	A:75	A:81	A:78	-	-
	b) Grade 9 - English writing - assessment for Anglophone sector only (2012-13, %)	Grade 9	A:82	A:76	A:90	A:82	-	-
	9 a) Grade 10 - Oral Proficiency in Second Language – English as a Second Language, assessment by sector (2012-13, % students performing at intermediate level or higher)	Grade 10	F:72	F:71	F:73	F:72	-	-
	b) Grade 10 - Oral Proficiency in Second Language - French as a Second Language, assessment by sector (2011-12, % students performing at intermediate level or higher)	Grade 10	A:33	-	-	A:33	-	-
10 a) Grade 11 - French - assessment by Francophone sector only (2012-13, %)	Grade 11	F:63	F:58	F:64	F:62	-	-	
b) Grade 11 - Math - assessment Francophone sector only (2012-13, %)	Grade 11	F:67	F:64	F:64	F:64	-	-	
Social and Emotional Development	11 - Youth satisfied or very satisfied with life (2012, %)	12 to 19 years old	97.4	96.7	96.4	96.5	97.1	7/10
	12 - Youth satisfied with mental fitness needs related to school (2012-13, %)	Grade 6 to 12	59**	56	61	59	-	-
	13 - Aboriginal satisfied with the availability of extracurricular activities at his/her school (2007, %)	6 to 14 years old	-	-	-	72	74	6/7
	14 - Child receiving special needs services [including Integrated Day Care Services and Enhanced Support Worker] (2012-13, count)	Early childhood	612	-	-	638	-	-
	15 - Youth who feel respected at school (2012-13, %)	Grade 12	80	78	78	78	-	-
School Connectedness	16 - Youth who feel connected to their school (2012-13, %)	Grade 6 to 12	91**	89	90	89	-	-
	a) Aboriginal youth who feel connected their school (2012-13, %)	Grade 6 to 12	83**	88	83	85	-	-
	17 - Child who feels connected to his/her school (2010-2011, %)	Grade 4 to 5	-	80	87	83	-	-



Legend:

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A = Anglophone

F = Francophone

2013 - Adverse Factors

7 - What factors can affect children and youth adversely?

UN Convention on the Rights of the Child: **Special Protection Measures – Articles 6, 19, 24, 29, 33, 36, 37**

		Age or Grade	Previous NB Data	Male	Female	NB	Canada	Rank (NB to Canada)
Teen pregnancy	1 - Teen pregnancy rate (2011, rate per 1,000 females)	15 to 19 years old	25.9	--	25.9	24.9	-	-
	2 - Teens who gave birth (2011, crude birth rate 1,000 females)	15 to 19 years old	20.9	--	21.3	21.3	12.6	8/10
Drug Use	3 - Youth who have used marijuana within the last year (2012, %)	Grade 7, 9, 10, 12	25	28	27	28	-	-
Tobacco use	4 - Youth who have smoked in the last 30 days (2012-13, %)	Grade 6 to 12	12	15	10	12	-	-
	a) Aboriginal youth who have smoked in the last 30 days (2012-13, %)	Grade 6 to 12	25	20	20	20	-	-
	5 - Youth who have a family member [parent, step-parent, guardian, brother or sister] who smokes (2012-13, %)	Grade 6 to 12	44**	44	45	44	-	-
	6 - Youth in contact with second-hand smoke at home (2012-13, %)	Grade 6 to 12	23	20	19	19	-	-
	7 - Child who lives with people who smoke or use tobacco (2010-11, %)	Grade 4 to 5	-	31	30	31	-	-
	8 - People are allowed to smoke inside home as reported by parent (2010-11, %)	Parents K-5	-	-	-	5	-	-
Alcohol use	9 - Youth in contact with second-hand smoke in the past week in a vehicle (2012-13, %)	Grade 6 to 12	32	27	27	27	-	-
	10 - Youth who drank alcohol more than once per month (2012, %)	Grade 7, 9, 10, 12	26	-	-	26	-	-
Other Negative Behaviours of children or youth	11 - Youth who consume 2 or more sweetened non-nutritious beverages per day (2012-13, %)	Grade 6 to 12	36**	42	24	33	-	-
	a) Aboriginal youth who consume 2 or more sweetened non-nutritious beverages per day (2012-13, %)	Grade 6 to 12	49**	50	35	42	-	-
	12 - Child who consumes any sweetened non-nutritious beverages yesterday (2010-11, %)	Grade 4 to 5	-	60	52	57	-	-
	13 - Youth who have high levels of oppositional behaviours [being defiant, disrespectful, rude, etc.] (2012-13, %)	Grade 6 to 12	27**	26	19	22	-	-
	a) Aboriginal youth who have high levels of oppositional behaviours [being defiant, disrespectful, rude, etc.] (2012-13, %)	Grade 6 to 12	40**	30	26	28	-	-
	14 - Child who has high levels of oppositional behaviours [being defiant, disrespectful, rude, etc.] (2010-11, %)	Grade 4 to 5	-	27	16	22	-	-
	15 - Youth who don't always wear a helmet when using a bicycle (2009-10, %)	12 to 19 years old	-	54	53	54	68	4/10
	16 - Youth who don't use protective mouth equipment (for hockey) or protective head gear [for skating, rollerblading, downhill skiing, or snowboarding] (2009-10, %)	12 to 19 years old	-	85	93	89	88	-
	17 a) Youth who rode with a driver under the influence of alcohol (2012, %)	Grade 7, 9, 10, 12	20	-	-	18	-	-
	b) Youth who rode with a driver under the influence of cannabis (2012, %)	Grade 7, 9, 10, 12	22	-	-	24	-	-
18 - Youth unsafe sex - those that engaged in sexual activity and did not use a condom (2012, %)	Grade 7, 9, 10, 12	16	-	-	16	-	-	
19 - Violent crime done by youth (2012, rate of 100,000 youth population)	12 to 17 years old	2,183	-	-	1,971	1,639	6/10	
20 - Property crime done by youth (2012, rate of 100,000 youth population)	12 to 17 years old	3,037	-	-	3,070	2,541	5/10	
Environment & Climate Change	21 - Greenhouse Gas emissions per person (2011, tonnes CO ₂ e)	All population	24.5	-	-	24.6	20.4	8/10



Legend:

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8 - How safe and secure are New Brunswick's children and youth?

UN Convention on the Rights of the Child: **Special Protection Measures – Articles 3, 4, 6, 9, 12, 19, 20, 23, 29, 32, 34, 35, 36, 39, 40, 42**

	Age or Grade	Previous NB Data	Male	Female	NB	Canada	Rank (NB to Canada)	
Injuries	1 - Child and youth rate of hospitalized cases for injuries (2008-09, cases admitted to hospital per 10,000)	0 to 19 years old	-	-	41.4	25.8	-	
	2 - Age-adjusted rate of ATV Injuries (2009-10, rate per 100,000 population)	All population	-	-	17.8	10.5	8/11	
	3 - Age-adjusted rate of cycling Injuries (2009-10, rate per 100,000 population)	All population	-	-	12.6	13.6	8/13	
	4 - Number of New Brunswick teen workers who suffered a workplace accident (2012, count)	15 to 19 years old	357	233	101	334	-	
	5 - Rate of New Brunswick teen workers who suffered a workplace accident (2011, rate per 1,000 youth employed)	15 to 19 years old	2.1	3.0	1.1	2.0	-	
Child abuse & neglect	6 a) Child under 16 receiving Child Protection Services (2013, rate per 1,000)	Under 16 years old	12.3	-	-	9.9	-	
	b) Child under 16 receiving Family Enhancement Services (2013, rate per 1,000)	Under 16 years old	0.7	-	-	0.7	-	
Children as victims of violence	7 - Child seeking refuge in transition housing (2012-13, rate per 1,000)	0 to 19 years old	2.8	-	-	2.5	-	
	8 - Child involved in Child Witnesses of Family Violence Program (2012-13, rate per 1,000)	0 to 19 years old	3.3	-	-	3.1	-	
	9 - Child and youth victims of family violence (violence committed by parents, siblings, extended family and spouses) (2011, rate per 100,000 population)	0 to 17 years old	New in 2013	-	-	365	267	7/10
Children and Youth who feel safe	10 - Youth who have never been bullied (2012-13, %)	Grade 6 to 12	35	50	34	42	-	
	11 - Child who feels safe at school (2010-11, %)	Grade 4 to 5	-	84	90	87	-	
	12 - Child who feels comfortable talking to an adult at school about bullying (2010-11, %)	Grade 4 to 5	-	82	85	83	-	
	13 - Students with special needs who feel safe – Anglophone sector only (2008-09, %)	Grade 6 to 12	-	-	-	72.5	-	
Social Assistance	14 - Youth receiving social assistance money (2013, % of total youth)	16 to 18 years old	0.7	0.31	0.92	0.6	-	
Youth Admissions to Correctional Services	15 - Youth - Total correctional services (2010-11, Count)	12 to 17 years old	1 769	1,116	364	1,480	43,610	-
	a) Youth - pre-trial detention (2010-11, % of youth - total correctional services)	12 to 17 years old	19.1	19.8	23.4	20.7	30.3	-
	b) Youth - provincial director remand (2010-11, % of youth-total correctional services)	12 to 17 years old	6.0	4.1	6.3	4.7	0.6	-
	c) Youth - total secure custody (2010-11, % of youth - total correctional services)	12 to 17 years old	5.5	4.7	5.5	4.9	3.4	6/7
	d) Youth - total open custody (2010-11, % of youth - total correctional services)	12 to 17 years old	4.6	3.6	3.9	3.7	3.1	-
	e) Youth - total community sentences (2010-11, % of youth-total correctional services)	12 to 17 years old	64.7	67.8	61.0	66.2	62.7	4/7
	16 - Aboriginal youth - total correctional services (2010-11, Count)	12 to 17 years old	101	53	33	86	7,525	-
	a) Aboriginal youth - pre-trial detention (2010-11, % of Aboriginal - total correctional services)	12 to 17 years old	16.8	20.8	6.1	15.1	40.9	-
	b) Aboriginal youth - provincial director remand (2010-11, % of Aboriginal - total correctional services)	12 to 17 years old	6.9	0.0	12.1	4.7	2.3	-
	c) Aboriginal youth - total secure custody (2010-11, % of Aboriginal - total correctional services)	12 to 17 years old	7.9	5.7	9.1	7.0	4.2	5/5
	d) Aboriginal youth - total open custody (2010-11, % of Aboriginal - total correctional services)	12 to 17 years old	5.0	0.0	0.0	0.0	3.6	-
	e) Aboriginal youth - total community sentences (2010-11, % of Aboriginal - total correctional services)	12 to 17 years old	63.4	73.6	72.7	73.3	49.0	2/7
	17 - Youth incarceration rate (2012, rate per 10,000 young persons)	12 to 17 years old	8.2	-	-	8.5	7.6	6/9
	18 - Youth probation rate (2012, rate per 10,000 young persons)	12 to 17 years old	97.6	-	-	77.1	61.4	4/8
	19 - Multi-Disciplinary Conferences for youth in correctional services (2012, count)	12 to 17 years old	268	-	-	235	-	-
20 - Reintegration leaves for youth in secure custody (2012-13, Count)	12 to 17 years old	68	-	-	91	-	-	
21 - Escorted leaves for youth in secure custody (2012-13, Count)	12 to 17 years old	374	-	-	691	-	-	



Legend:

Doing Well (ranked 1, 2, 3)

Caution

Lagging (last 3 places)

(Rank includes all provinces when data is available =10 maximum)

Bold = Updated indicator
 - =Data unavailable
 K = Kindergarten

2013 - System Performance

9 - How is New Brunswick performing in regard to the Rights and Well-being of children and youth?

UN Convention on the Rights of the Child: **Articles 2, 3, 4, 6, 12, 19, 23, 24, 27, 28, 29, 30, 31, 32, 37, 39, 40, 42**

	Age or Grade	Previous NB Data	Male	Female	NB	Canada	Rank (NB to Canada)
1 - Life expectancy (2007-09, years)	At birth	80.2	77.5	82.8	80.2	81.1	5*/10
2 - Infant mortality rate (2011, rate per 1,000)	0 to 1 year old	5.8	2.6	4.4	3.5	4.8	1/10
3 - Child and youth premature deaths from cancer (2007-11, years of life lost, rate per 10,000)	0 to 19 years old	18.6	19.3	19.5	19.4	-	-
4 - Child and youth premature deaths from injuries (2007-11, years of life lost, rate per 10,000)	0 to 19 years old	76.9	85.1	56.6	71.3	-	-
5 - Child and youth premature deaths due to suicides / self-inflicted injuries (2007-11, years of life lost, rate per 10,000)	0 to 19 years old	19.8	26.2	13.3	19.9	-	-
6 - Kindergarten school-readiness, by sectors (2011-12, %)	Pre K to K	A: 80 F:82	-	-	A:73 F:84	-	-
7 - Youth who have a regular medical doctor (2012, %)	12 to 19 years old	93	94	95	94	85.9	1/10
8 - Youth psychological well-being score (2009-10, %)	12 to 19 years old	-	77.7	79.4	78.9	-	-
9 - Youth who feel their school has provided them with opportunities to participate in exercise or physical activity other than phys. ed. class (2012-13, %)	Grade 12	78	78	82	80	-	-
10 - Youth who feel they had opportunities in high school to participate in cultural activities organized through school (2012-13, %)	Grade 12	57	55	60	58	-	-
11 - Youth who feel they had opportunities in high school to participate in cultural activities separate from school (2012-13, %)	Grade 12	46	40	47	44	-	-
12 - Youth who feel their school has helped them develop positive attitudes towards physical activity (2012-13, %)	Grade 12	71	69	69	69	-	-
13 - Youth who feel their school has helped them to develop positive attitudes towards healthy living and active living (2012-13, %)	Grade 12	75	70	74	72	-	-
14 - Youth who had the opportunities in high school to participate in elective courses that they were interested in and passionate about (2012-13, %)	Grade 12	77	73	80	77	-	-
15 - Youth who had the opportunities in high school to take courses in the skilled trades (2012-13, %)	Grade 12	59	66	47	56	-	-
16 - Youth who had the opportunities in high school to take courses in the fine arts (2012-13, %)	Grade 12	76	67	80	74	-	-
17 - Youth who had the opportunities in high school to participate in career related learning experiences (2012-13, %)	Grade 12	67	60	69	64	-	-
18 - Youth planning to begin studies at a college or university after high school graduation, (2012-13, %)	Grade 12	78	76	84	80	-	-
19 a) School drop out (2011-12, %)	Grade 7 to 12	2.0	1.8	1.5	1.7	-	-
b) School drop out – by sector (2011-12, %)	Grade 7 to 12	A: 2.1 F: 1.7 A:2.0 F:1.3 A:1.7 F:0.9 A:1.9 F:1.1	-	-	-	-	-
20 - 20 to 24 year-olds without a high school diploma and not in school (2007-10, %)	20 to 24 years old	-	-	-	8.1	8.9	4/10
21 - Youth crime severity index (2012, index)	12 to 17 years old	78.7	-	-	80.0	78.1	6/10
22 - Youth violent crime severity index (2012, index)	12 to 17 years old	58.6	-	-	61.2	83.0	4/10
23 - Youth non-violent crime severity index (2012, index)	12 to 17 years old	93.9	-	-	93.0	74.2	7/10
24 a) Total youth crime rate - Charged (2012, rate of all Criminal Code violations -excluding traffic- per 100,000)	12 to 17 years old	2,825	-	-	2,576	2,292	5/6
b) Total youth crime rate - Not Charged (2012, rate of all Criminal Code violations -excluding traffic- per 100,000)	12 to 17 years old	3,620	-	-	3,517	2,932	4/6
25 - Food insecurity at home, moderate and severe (with or without children present) (2011, %)*	12 and over	8.7	-	-	10.4	8.1	9/10
26 - Employment rate by those 15 and up with less than grade 9 (2012, %)	15 and over	17.0	21.9	10.9	16.8	20.0	10/10
27 - Employment rate by those 15 and up with some high school (2012, %)	15 and over	37.0	43.3	31.2	37.2	39.5	5/10
28 - Employment rate by those 15 and up with high school diploma (2012, %)	15 and over	61.1	64.3	55.0	59.6	61.1	6/10
29 - Employment rate by those 15 and up with either a post-secondary certificate, diploma or degree (2012, %)	15 and over	67.3	68.7	65.1	66.8	70.6	8/10
30 - Percentage of service delivery done within 30 days (from referral to first visit) for child and youth mental illness (2011-12, %)	Under 18 years old	42.0	40.3	43.1	41.7	-	-



Legend:

Doing Well (ranked 1, 2, 3)

Caution

Lagging (last 3 places)

(Rank includes all provinces when data is available =10 maximum)

*=Another province has the same ranking

Bold = Updated indicator

- =Data unavailable

K = Kindergarten

A = Anglophone

F = Francophone

* = Change of Source

Children's Rights and Well-being Framework

Data Sources and Providers

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- B - UNICEF, Convention on the Rights of the Child (2011), [online], from < <http://www.unicef-irc.org/portfolios/crc.html> >.
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1 – How diverse are children and youth in New Brunswick?

2013 - DIVERISTY

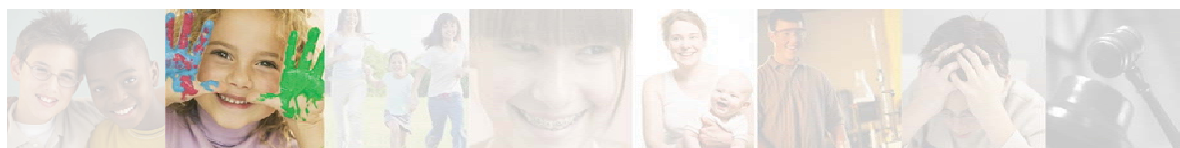
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2 – How well are children and youth expressing themselves in New Brunswick?

2013 - EXPRESSION

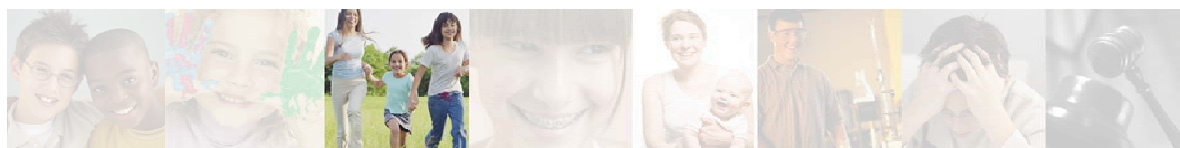
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3 - What kind of families and communities do New Brunswick's children and youth live in?

2013 - FAMILY AND COMMUNITY

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4 – How healthy are New Brunswick’s children and youth?

2013 - HEALTH

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5 – How well are we promoting healthy children and youth development?

2013 - HEALTHY DEVELOPMENT

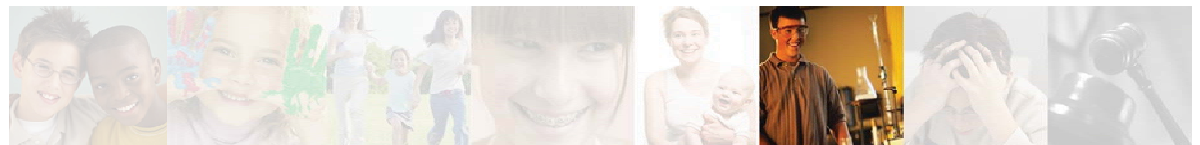
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6 – How well are New Brunswick’s children and youth learning?

2013 - LEARNING

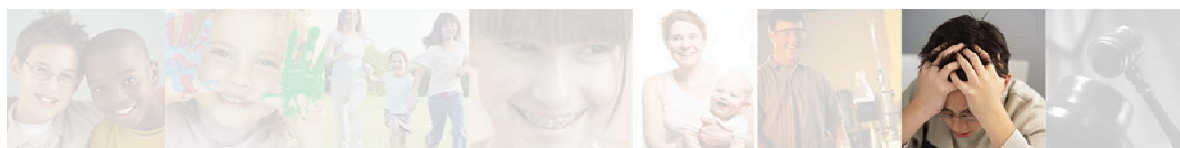
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8 – How safe and secure are New Brunswick’s children and youth?

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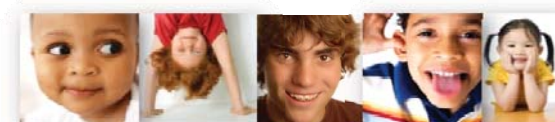
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