Violence Against Children in Canada: It’s Time to Act

Kayla Hamel\textsuperscript{1,2} and Debra Pepler\textsuperscript{1,2}  
Kathy Vandergrift\textsuperscript{3} and Lisa Wolff\textsuperscript{4}  
\textsuperscript{1}York University, \textsuperscript{2}PREVNet, \textsuperscript{3}CCCR & \textsuperscript{4}UNICEF  
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To live free from violence is a human right, yet new estimates tell us that globally at least three of every four children have experienced some form of violence in the last year (Know Violence in Childhood, 2017). Around the world, children from all socio-economic backgrounds, across all ages, religions and cultures, suffer violence, exploitation, and abuse. Violence suffered by children most often occurs at the hands of familiar adults and peers, rather than strangers. Such violence takes place in homes and within families, in schools and educational settings, in institutions, online, and on city streets.

Ending violence against children is a global imperative. In 2015, world leaders acknowledged epidemic levels of violence against children and committed to end all forms of violence against children by 2030 to address the 16th Sustainable Development Goal (SDG). It is crucial for all States to honour their commitments to achieve this goal and take concrete steps at the country level to strengthen social protection systems and to increase child-related budgeting, amongst other measures.

Although many independent and government agencies collect information on violence against children in Canada, it is difficult to find unified statistics, and there is substantial variability in the frequency with which data are collected and the disaggregation of the data to specific groups of children. In this review we have attempted to consolidate available data to depict as accurate and comprehensive a picture as the available data allow of the current risks of violence faced by children and youth in Canada. In Canada’s efforts to achieve children’s human rights and the standards set out by Sustainable Development Goal 16 (SDG 16), it is crucial that we understand: (1) how well we are protecting all children and youth from all forms of violence and (2) where we are falling short. With these data, Canada can mobilize and refine its efforts to promote children’s well-being across the nation.

For this report, we focused on children and youth under age 18, consistent with the UN Convention on the Rights of the Child, using definitions of violence provided by the World Health Organization (WHO; WHO, 2002) and UNICEF (2017) with four separate categories of violence. Physical violence comprises fatal and non-fatal physical violence including corporal punishment, physical bullying, violent crime, and child homicide. Sexual violence comprises children’s experiences of sexual activity that they do not comprehend and cannot consent to, often between a child and an adult or another person in a position of power; this includes coercion to participate in sexual acts, unwanted touching or advances, sexual exploitation, and sexual harassment. Emotional/psychological violence comprises psychological maltreatment and verbal abuse, such as threatening, terrorizing, humiliating, bullying, isolating, and rejecting experiences. Finally, neglect comprises the “deliberate failure to meet children’s physical and psychological needs, protect them from danger, or obtain medical, birth registration, or other services when those responsible for their care have the means, knowledge and access to do so” (UNICEF, 2017). When an act of violence is directed against children because of their biological sex or gender identity, any of these types of violence can also constitute gender-based violence.

Another important definition for the field of child and youth violence prevention is that of family violence: any form of abuse, mistreatment or neglect that a child or adult experiences from a family...
member, or from someone with whom they have an intimate relationship (Department of Justice, Government of Canada, 2017).

Statistics Canada, the Canadian Red Cross, UNICEF, and the World Health Organization Health Behaviours in School-Aged Children Reports were all valuable resources for the current review. Overarching themes emerged through our review of these and other sources, which we have used to organize this report. We conclude by reviewing the Global End Violence Against Children INSPIRE framework and providing some initial recommendations aligned with these for Canada’s efforts.

**Causes of Violence Against Children**

The causes of violence against children are multi-layered and are best understood from an ecological-systems and biopsychosocial developmental perspectives. Bronfenbrenner (1979) introduced the ecological systems theory, which contends that children’s development is embedded in and influenced by the family, school, community, and broader societal systems in which they are growing up. It is children’s experiences within and between these systems and the systems’ capacities to meet children’s needs and scaffold their positive development that shape development. When systems are unable to protect children and ensure they are free from violence, it impacts all aspects of children’s development. Children’s first system of development is the family context. Parents who themselves lacked nurture and protection in their own childhoods often struggle into adulthood with financial concerns, conflicts, mental health problems, and other stresses. Without a strong foundation in their own development, struggling parents often lack the experience and resources to nurture their children. With the weight of their burdens and lack of support, these parents are more likely to maltreat their own children, but are also more likely to fall short in supporting their children in developing social-emotional capacities (Pepler et al., 2014).

At school entry, there is a group of children who are unprepared for the academic, behavioral, and social demands in the school setting. They are, therefore, vulnerable to experiencing problems, being both aggressive and victimized, and not engaging with school. Based on inadequate socialization within the family and/or daycare context, these children enter the school system with an inability to regulate their behaviors and emotions, poorly developed executive functions, a lack of social skills, weak moral understanding and attitudes, and mental health problems (e.g., anxiety, oppositional behavior). For children with these initial vulnerabilities, society depends on schools to be the protective and socializing institution and to pick up where parents left off or were unable to establish a foundation for adaptive regulation and learning. School should be the place where all children are safe, protected from violence in any form, accepted and included by both adults and peers, and supported to develop optimally. As Dodge and colleagues (2009) note, the combination of difficult child factors and adverse social contexts sets up a developmental cascade of failure in family, peer, and school contexts and risk of movement into antisocial and illegal behaviors, where alternate reinforcement processes attract the youth into violence and crime.

Children are sensitive to conditions in the communities in which they live. Children who grow up in up in poor communities with a lack of social cohesion are often exposed to high levels of community violence. These children who witness violence are more likely to increase in their own levels of aggression and depression (Gorman-Smith & Tolan, 1998). Conversely, our analyses of Canadian HBSC data showed that positive neighbourhood relationships were protective against injuries, psychosomatic symptoms, behaviour problems, and drinking and driving (Pepler et al., 201X). At a broader level, societal factors also relate to children’s experiences of violence including racism,
exposure to violence through the media and Internet, as well as harmful social norms and inequalities that marginalize the most vulnerable in society.

In all of these contexts, it is the nurturance and quality of relationships in which children grow up that shape their development (Biglan et al., 2012; Biglan, 2015; Pepler et al., 201X). Although some children are born with biological vulnerabilities, these do not dictate development or the likelihood that they will be exposed to experiences of violence and/or perpetration of violence. Research in neuroscience and epigenetics is revealing the complex, inextricable transactions of nature and nurture – expanding understanding of how children’s experiences become embedded in their brain development and genetic expression, consistent with a biopsychosocial model of development (Meloni, 2013). This model holds that human development is shaped by complex interactions among biological (e.g., genetic, hormonal), psychological (e.g., emotional, cognitive, behavioural), and social (e.g., family, school, community relationships and culture) processes.

How Are We Doing in Canada?

The Convention on the Rights of the Child came into force in 1989, and sets out children’s enduring, universal human rights to protection from all forms of violence. The Government of Canada ratified the Convention in 1991, assuming obligations to respect, protect and fulfil these rights, including rights to information, health care, optimal life and survival, protection from maltreatment, non-discrimination, and other conditions that help protect children from violence and support victims of violence in all forms and settings. Implementation of the Convention in Canada remains uneven as Canada enters its 5th/6th review. Recommendations for improvement in the 3rd/4th review, concluded in 2012, included both general measures to strengthen systems for implementation of all rights and specific policies, including a repeated call for a national strategy to prevent all forms of violence against children. In general, human rights organizations in Canada are advocating for more rigorous monitoring and reporting on domestic implementation on international human rights conventions by both federal and provincial governments. In December 2017, a meeting of federal and provincial ministers publicly announced a commitment to improve the way governments respond to recommendations from previous reviews and the avenues for civil society participation in the implementation of Canada’s obligations. The 5th/6th review of children’s rights, which is currently underway, is an opportunity to review substantive progress for children and strengthen both general measures of implementation and specific policies related to implementation of Article 19.

In 2015, the Government of Canada committed to achieve the SDGs by 2030. Many SDGs have targets that, if achieved, would help prevent violence against children. SDG 16 calls on societies to “Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels”. It includes reducing all forms of violence against people, but specifically ending all forms of violence against children. In Canada, children are disproportionately affected by some forms of violence, including maltreatment, bullying, and homicide. The SDG targets address: physical punishment and psychological aggression by caregivers, child homicide, discrimination and harassment, feeling safe in the community, physical, psychological and sexual violence, human trafficking, and crime reporting.

According to UNICEF’s 2017 country Report Card for Canada, most SDG-related indicators of child well-being in Canada showed no improvement or worsened over the past 10 years (UNICEF Canada, 2017). In this report, each SDG goal was examined individually; eight of these measured indicators declined, including those pertaining to violence experienced by children (SDG 16) and children’s
overall well-being. Rankings for SDG 16 are based on bullying victimization and child homicide rates. On SDG 16, Canada ranked a dismal 27th out of 31 countries, well below the average (see Figure 1 below). Using bullying victimization rates alone, Canada ranked poorly — 37th out of 40th countries, with higher rates than those measured by UNICEF in 2010 (UNICEF, 2017). Canada fares equally poorly on homicide data, ranking 33rd of 37 countries for child homicide. Although child homicide is a relatively rare occurrence, it serves as a "tip-of-the-iceberg" indicator of the prevalence of other forms of violence including child maltreatment, bullying, and fighting.


As depicted in Figure 2 below, the rates of violence perpetrated by a family member against children and youth, as indicated in crime statistics, have been relatively stable since 2009. Three in four (74%) child and youth victims who had police-reported cases of family violence suffered from physical force (Statistics Canada, 2018). The rates of non-family violence decreased substantially between 2009 and 2014 and have remained relatively stable since then (Statistics Canada, 2018). It is important to note that the police-reported rates of violence experienced by children and youth greatly underestimate the exposure to violence for children and youth in Canada. This is especially true for rates of maltreatment of young children, who have limited capacity to reach out for help and rely on others for reporting and support. In 2017, 58% of police-reported family violence offences against children and youth were perpetrated by a parent. This type of violence was most commonly experienced by children under six years of age (73%) and least commonly experienced by 15- to 17-year-old youth (44%). Physical assault was the most common type of police-reported family violence (56%), followed by sexual offences (32%). Boys and girls were victimized at different rates. Male children and youth were much more likely to have experienced physical assault than sexual assault.
For female children and youth, experiences of physical and sexual assault were comparably high. Female genital mutilation (FGM) is also a critical concern in Canada, which was highlighted in a recent article. An informal analysis of the 2011 Canadian Census looking at immigration from countries in which girls are affected by and UNICEF statistics on the prevalence of FGM indicates there may be up to 80,000 survivors of FGM in Canada (Giselle Portenier. The Globe and Mail, February 6, 2019).

Figure 2. Canadian crime statistics on child and youth victims of police-reported family and non-family violence (Statistics Canada).

In Canada, there is a partial ban on corporal punishment: parents are still able to use physical punishment with their children. Section 43 of the Criminal Code allows the use of some physical force if the purpose is for disciplining a child under the age of 18. Only parents or people who are in the place of a parent (e.g., step-parent) can be excused if they use reasonable force on a child for discipline. Efforts to repeal Section 43 have been ongoing, yet it still stands. Corporal punishment is one form of violence against children with a large body of research linking it to adjustment problems in childhood and adulthood (e.g., Gershoff & Grogan-Kaylor, 2016). In a recent paper, Elgar and colleagues (2018) linked higher rates of youth fighting to the absence of legal protection of children from physical punishment. In countries where there is a complete ban on all forms of physical
punishment, the rates of physical fighting are 31% and 42% lower among male and female youth, respectively, compared to countries where physical punishment is permitted both at school and at home. In countries, like Canada, where there is a partial ban on corporal punishment, the rate of physical fighting among male youth was similar to that in countries with no bans; however, the level of fighting among female youth was 56% lower in countries where physical punishment is banned in school, but not in the home.

Of the 235,842 investigations of child maltreatment that were conducted across Canada in 2008, one-third were substantiated. Despite the best efforts of researchers and policy-makers to illuminate the extent of this problem, violence against children remains significantly under-reported; therefore, any conclusions drawn are necessarily incomplete (UNICEF Canada, 2017). In addition, prevalence rates can obscure the fact that children who are exposed to a single violent act are more likely to be re-exposed repeatedly and to experience multiple types of violence (Finkelhor, Ormrod & Turner, 2009).

Beyond the police-reported cases of violence against children, the data available are retrospective and come from national surveys. In the Canadian Community Health Survey, one third of Canadians aged 18 and older (32%) reported having experienced physical abuse, sexual abuse or exposure to intimate partner violence during childhood ((Affifi, MacMillan, Boyle, Taillieu, Cheung & Sareen, 2014d, 2014). Three of every ten children and youth who were victims of violence (30%) were victimized by a family member such as a parent, sibling or other family member (Statistics Canada, 2018). A similar proportion was found in the General Social Survey, with 33% of Canadians aged 15 and older reporting having experienced child abuse (Burczycka, 2015). Of these, 26% reported physical abuse (31% of males, 21% of females). Eight percent of Canadians reported sexual abuse (4% of males, 12% of females); and 10% reported exposure to intimate partner violence. Of concern, 16% of Canadians respondents reported being exposed to both physical and sexual abuse. Of those who witnessed intimate partner violence, 70% also reported being victimized physically and/or sexually in childhood. The 2014 General Social Survey did not include retrospective accounts of experiences of neglect.

Children and youth experience violence from dating partners. At this point, there are no comprehensive national data on the incidence of dating violence. Statistics Canada (2018) tracked police-reported intimate partner violence. In 2017, there were 15,535 reports of young women (aged 15-24) who were victimized by a dating partner: 63% (9,837) of these were by a current partner and 37% (5,698) were by a former dating partner. There were many fewer police reports of young men (aged 15-24) being victimized by a dating partner. In 2017, there were 2,511 such reports: 67% (1,688) were by a current partner and 33% (823) were by a former dating partner. These data do not specify whether the dating relationship comprised heterosexual or homosexual couples. Given that these are only the incidents reported to the police, these numbers greatly underestimate the rates of dating violence among youth.

Between 2009 and 2014, there were 206 police-reported incidents of human trafficking in Canada, 25.1% of these involved children under 18 years of age (from Canada’s Fifth and Sixth Reports on the Convention on the Rights of the Child: Annex 1 – Statistical Information and Data). Although there has been some progress in legislation to address sexual exploitation and abuse of children in Canada, limited police resources and the adversarial nature of the justice system still prove to be barriers to victimized youth coming forward (Annex 2). In addition, there are limited prevention strategies in place to address the problem of sex trafficking.
The ongoing problems of violence experienced by children and youth may contribute, in part, to the declines and lack of improvement in the wellbeing of Canadian children, which have shifted our country down in the worldwide rankings. Although the overall rankings are not directly comparable, they are indicative and alarming: Canada fell from 12th (2007) to 25th (2017) out of 41 high-income countries surveyed. UNICEF (2017) concluded that Canada can do much more to support its children and youth.

Themes: Children’s Experiences of Violence in Canada

1. *Childhood violence is underreported; therefore, we are not aware of the true extent of victimization*

A retrospective household survey conducted with Canadians aged 15 and over, which asked about childhood experiences of maltreatment (of any type), revealed that 93% of victims did not report the violence they had experience before age 15 to police or child protection and 67% told no one (friends, family, etc.) (Statistics Canada, 2015). For the Canadian Incidence Study, Trocmé and colleagues (2010) estimated that the actual incidence of physical and sexual abuse is 2-3x higher than annual incidence rates.

In addition, we know very little about children’s experiences in certain categories of violence because there is no systematic data collection. For instance, Canada does not collect information in household surveys about physical punishment or psychological aggression experienced in the home (UNICEF Canada, 2017). This omission is conspicuous, since existing data reveal a sizable portion of violence against children and youth takes place in the home, and monitoring this violence is an SDG commitment and a focus of the End Violence Against Children campaign. This oversight hinders efforts to protect children from all kinds of violence in the home.

2. *The kind of violence experienced by children and youth varies depending on their developmental stage and environmental context*

The types of violence experienced by children and youth varies depending on their developmental stage and environmental context as illustrated in Figure 3 below from the End Violence INSPIRE document (World Health Organization, 2016). Until age eight children are most commonly victimized by a family member, across every category of violence (Statistics Canada, 2010a). The youngest victims of violence are most likely to be victimized by a parent (infants under 1, and ages 1-3), a relative risk which decreases slightly for children once they enter school at age 4-6. Absolutely speaking, however, rates of family violence increase with age and are highest in young people ages 12-17. Notably, the highest rates of underreporting are likely for younger children (Statistics Canada, 2015); therefore, the true prevalence is unknown.

Figure 3. Developmental timing of the types of violence experienced by children and youth
Children also experience violence at the hands of peers through fighting and bullying. The 2014 Health Behaviours of School-aged Children survey (HBSC) revealed that at least 30% of boys and 16% of girls, in Grades 6 to 10 reported physically fighting at least once in the last 12 months (Craig et al., 2016). Boys were twice as likely to report physical fighting than girls. Bullying is a type of physical and/or psychological violence experienced by children and youth in interpersonal relationships in the context of a power imbalance. Rates of being bullied are highest for boys in grade 9; and for girls in grades 6, 8, and 9 (Public Health Agency of Canada, 2016a). The kinds of bullying experienced change with age: sexual harassment occurs most frequently for boys in grade 6 and 7, and for girls in grades 9 and 10 (Public Health Agency of Canada, 2016a). Overall, rates of physical bullying decline with age, whereas rates of psychological bullying increase from ages 11-15. Cyberbullying also increases with age and has been identified by Canadian teachers as an area of extreme concern (Canadian Red Cross, 2018). Forty-two percent of youth report having experienced cyberbullying at least once in the past four weeks (Li, Craig, & Johnson, 2015). Being victimized by peers has long-term implications. One longitudinal study revealed that being bullied frequently by peers as a child contributed to poor social, health, and economic outcomes evident nearly four decades later (Takizawa, Maughan, & Arseneault, 2014).

There is a developmental progression in the forms of aggression that children perpetrate and experience with peers. Youth who have learned to assert power over peers by bullying are more likely to date earlier and perpetrate both physical and social aggression with their dating partners than non-bullying youth (Connolly, Pepler, Craig, & Taradash, 2000). There are, however, no reliable national prevalence rates for teen dating violence in Canada. Crime statistics indicate that females are most likely to be the victims of police-reported dating violence (Statistics Canada, 2010b). Consistent with research showing the high risk of being victimized for aggressive youth, youth who bullied were also more likely to be victimized within a romantic relationship.

Children’s experiences of violence within the family environment are related to the likelihood of both bullying and being victimized by peers. Children who are maltreated children are more likely than non-maltreated children to both bully other children and be victimized (Shields & Cicchetti, 2001). Bullying was especially prevalent among abused children who experienced maltreating acts of commission (physical or sexual abuse). Children who are exposed to interparental violence are also more likely to
bully others and be victimized (Baldry, 2003).

Violence against children has been noted to be two times higher in rural areas as compared to metropolitan areas (Statistics Canada, 2010a). Although not expanded upon in the current review, the rates of violence against children also differ substantially across the provinces and territories in Canada (Statistics Canada, 2015; Canadian Red Cross, 2018). Income inequality is a broad societal factor that relates positively to levels of conflict between children (i.e., fighting, bullying, finding peers not kind and helpful); there is less conflict in low countries with low income inequalities. A decade ago, Canada was in the middle of both the inequity and conflict ranges (Wilkinson & Pickett, 2010). Given that income inequality has been increasing in Canada (Conference Board of Canada, 2013), there is an urgent need to focus on promoting positive relationships among children and preventing violence experienced by them.

3. **The risks of violence faced by boys and girls are similar, but there are important differences**

Both boys and girls are at risk for experiencing all types of violence; however, a young person’s gender can influence the risk for certain types of violence. Boys tend to be at higher risk than girls for physical abuse and physical bullying. They face overall higher risk than girls of “any child abuse”, with 34% of men retrospectively reporting abusive experiences in childhood (Statistics Canada, 2015). Girls face a higher risk of sexual abuse (Statistics Canada, 2015), any type of family violence (Statistics Canada, 2010a), cyberbullying (Public Health Agency of Canada, 2016a), and dating violence (Public Health Agency of Canada, 2016b). Although girls face higher risk of sexual abuse in the home, boys are at higher risk for experiencing sexual abuse outside the home (Statistics Canada, 2015). Interventions to prevent and address violence need to include both girls and boys.

4. **Certain groups are at especially high risk for experiencing violence**

Children and youth who belong to particular ethnic or cultural groups, or who identify as members of certain marginalized groups, face higher risks of violence than the rest of the population. For example, the child homicide rate of Aboriginal youth is well above the national average (UNICEF Canada, 2017). Aboriginal girls face higher risk of sexual abuse in childhood, with 25-50% reporting abuse, compared with 20-25% of non-Aboriginal girls (Collin-Vézina, Dion, & Trocmé, 2009).

Chief Public Health Officer’s Report on the State of Public Health in Canada (2016) indicated that youth who identify as LGBTQ2 are at higher risk for abuse and neglect in childhood. They also face higher risk of bullying and relational violence (McMaster et al., 2002; Williams et al., 2004). LGBTQ2 youth are more likely to be involved with the Child Welfare system and experience homelessness, both of which are associated with increased risk of violence (Gaetz, O’Grady, Kidd, & Schwan, 2016).

Street-involved youth have been found to experience substantially higher rates of abuse: in Toronto, one third of both male and female street-involved youth have been severely sexually and/or physically abused. In B.C., over one third of street-involved youth report having been sexually exploited, a number which goes up to 60% in the Aboriginal street-involved youth population (Canadian Red Cross, 2018).
These are select examples of the groups of youth who face elevated risks of violence; there are many more for whom the experiences of violence are a constant concern. These examples were included to illustrate the imperative for Canada to collect detailed and segregated statistics on violence against children in all its forms, for all groups of children. Collecting data and reporting only the national averages hides the plights faced by the most vulnerable and precludes attempts to support those who are most in need (UNICEF Canada, 2017).

It’s Time to Act

Preventing violence against children is fundamental to Canada’s commitment to its children’s health and well-being, because the consequences of violence are far-reaching and lifelong (WHO, 2016). Violence exposure is considered one of the most severe and most common sources of stress for humans. Physically, consequences can be immediate and potentially permanent, up to and including death. Emotional and psychological harms are more covert, but no less disabling. Children can experience difficulty adjusting and exhibit behavioural, emotional, and developmental problems as a result of exposure to violence (Saunders, 2003; Wolfe, Crooks, Lee, McIntyre-Smith, & Jaffe, 2003; Royal Canadian Mounted Police, 2012). In addition, they are more likely to become both victims and perpetrators of violence later in life, perpetuating the intergenerational cycle of violence (Widom, Czaja & Dutton, 2008): 30% of children who experience abuse or neglect go on to abuse their own children (US Department of Health and Human Services, 2006).

It is now widely known and accepted that adverse childhood events such as violence and abuse in childhood predict negative health outcomes in adulthood (Felitti et al., 1998). Recent research in the field of stress-biology has demonstrated that this relationship may be explained by the cellular-level changes caused by stressful experiences in childhood. These effects influence the functioning of DNA and the immune system creating lasting physical changes that can have lifelong deleterious health effects (Moffitt, 2012). The childhood stress of experiencing violence has been associated with erosion of telomeres, which are the end sequences of DNA strands that protect DNA molecules against damage (Shalev et al., 2013). Growing evidence supports the predictive relationship of childhood adversity to shorter telomere length when controlling for other factors (Moffitt, 2012). Shorter telomere length has been associated with a range of social and behavioural risk factors that predict morbidity, including obesity, schizophrenia, psychosocial stress, mood disorders, and smoking. Childhood violence exposure has also been linked with abnormally elevated inflammatory responses that influence immune functioning, which is, in turn, associated with myriad physical and psychiatric illnesses (Moffitt, 2012).

Recent research has found structural brain differences in youth who have been chronically victimized by peers. These findings suggest another potential mechanism through which violence exposure can affect young people – by interfering with normal brain development (Quinlan et al., 2018). Structural brain changes caused by victimization have been identified as possible biological mediators in the relationship between peer victimization and internalizing and externalizing symptoms in late adolescence and early adulthood, a hypothesis that demands further examination.

Finally, there is growing research that childhood violence exposure can lead to lifelong physical changes due to its impact through epigenetics. Epigenetic research examines how gene expression is altered as a result of environmental influences. Epigenetic processes are necessary for healthy cellular functioning, but they are also implicated in the development of a range of physiological and
psychiatric disorders (Weinhold, 2006). Importantly, early life stress has been shown to influence epigenetic processes and these changes can have a substantial effect not only in the individual, but in generations to come (Weinhold, 2006; Moffitt, 2012).

The fundamental, lifelong changes resulting from violence exposure during childhood and adolescence underscore the urgency of early intervention and prevention of violence against children. In the recent CRC reports (5-6, Annex 2), civil society organizations raised concerns for violence against children as a key human rights issue. They called for a national strategy on prevention of all forms of violence. In addition, they identified a need for targeted interventions, such as measures to prevent bullying and cyber-bullying, gang violence, as well as those to promote the protection of the bodily integrity and autonomy of intersex children, safe neighbourhood initiatives, and increased support for victims of violence.

Ending violence against children and youth not only leads to improved health and wellbeing, but also to economic gains. As the WHO INSPIRE report notes:

> The immediate and long-term public health consequences and economic costs of violence against children undermine investments in education, health, and child well-being, and erode the productive capacity of future generations. Exposure to violence at an early age can impair brain development and damage other parts of the nervous system, as well as the endocrine, circulatory, musculoskeletal, reproductive, respiratory and immune systems, with lifelong consequences (WHO, 2016, p. 15).

In 2003, the costs of child maltreatment alone in Canada were estimated at almost $16 billion annually (McKenna et al., 2003). Over fifteen years later, these costs will be much higher. Preventing violence against children and youth has a strong return on investment for the both child and society. As part of Canada’s actions to end violence against children and youth, research on the social return on investment will substantiate the economic values.

What will it take? Using the INSPIRE Framework to Guide Canada’s Efforts to End Violence Against Children

Many Canadian children and youth do not have protection from violence as indicated in Article 19 of the UNCRC. The data presented in this brief indicate that Canada has long way to go to meet SDG 16. The WHO has developed the INSPIRE framework to guide countries and organizations in achieving safe and secure lives for children and youth. The vision for the Partnership is to create a world in which every child grows up safe and secure.

The INSPIRE framework calls for national actions to be taken on:

**I**implementation and enforcement of laws

**N**orms and values
Safe environments
Parent and caregiver support
Income and economic strengthening
Response and support services
Education and life skills

INSPIRE for Canada

In 2018, Canada signed up as a “Pathfinding Country” in the Global Partnership to End Violence Against Children, which includes organizations from every sector, and children themselves — uniting their voices, actions and resources in a unique collaboration focused solely on ending violence against all children. As a “Pathfinding Country”, In 2018, Canada has committed to accelerating achievement of the partnership’s goals over a period of three to five years. To achieve this goal in Canada, we will have to work together on a comprehensive national strategy addressing all children and all forms of violence. The INSPIRE Framework provides guidance for the actions that need to be taken for which we offer the following recommendations.

Implementation and enforcement of laws

The objective of this strategy is to ensure the implementation and enforcement of laws to prevent violent behaviours, reduce excessive alcohol use, and limit youth access to firearms and other weapons.

One aspect of this strategy is to ensure that there are laws banning violent punishment of children by parents, teachers, or other caregivers. At this point, Canadian children are not protected from corporal punishment. This protection will only occur when Canada removes Section 43 from the Criminal Code. Canada also needs a national monitoring strategy to evaluate the effectiveness of the Pathfinder commitment to end violence against children.

Given the prevalence and impact of domestic violence for children, Canada should ensure that all provincial legislation on family violence explicitly addresses impacts and protection for children. In 2012, for example, Canada was specifically asked to “Establish mechanisms for ensuring effective follow-up for all child victims of domestic violence upon their family reintegration,” in the 3th/4th review of children’s rights.

The strategy focused on implementation and enforcement of laws is effective in several ways: it demonstrates to the society that violent behaviour is wrong, which in turn can serve to eliminate the existing norms that tolerate violence; it holds perpetrators accountable for their violent actions; and it can serve to reduce key risk factors for violence against children (e.g., limiting youth access to weapons).
At a broader level, Canada may lag behind most rich countries on child and youth wellbeing because our laws and policies are not as child-centred as those countries where children are faring much better. A recent UNICEF global report focused on family-friendly policies in rich countries (UNICEF, 2019). In UNICEF Canada’s Canadian Companion report, a comparison of Canada to other countries reveals that despite recent advances, Canada’s policies need to be more inclusive, and catch up to the daily lives of children and families and to the best standards internationally for parental leave and universal, high-quality early child care and education. The impact of policies and legislation being developed in Canada needs to be assessed for its potential impact on children’s wellbeing.

Norms and values

The objective of this strategy is to strengthen norms and values that support non-violent, respectful, nurturing, positive and gender equitable relationships for all children and adolescents (WHO, 2017).

This strategy is focused on changing adherence to restrictive and harmful gender and social norms. The WHO acknowledges that changing established societal attitudes and norms is difficult because it requires reshaping deeply ingrained social and cultural norms and behaviours. In Canada, an example might be the norm that some forms of violence, such as corporal punishment of children, are normal and often justifiable.

In Canada, this strategy might comprise increasing awareness of violence and its impact on health and wellbeing throughout the lifespan. This strategy to shift norms and increase understanding for behavioural change will take not only strong political commitment and actions, but also personal efforts to foster healthy, rather than unhealthy relationships for all children and youth. It will take all of us to be champions and stand up against violence in our country, institutions, communities, schools, and families to end violence against children. At a time when there is growing income and social inequity, we must ensure that all children, youth, and families have equal opportunities and safety support systems for optimal wellbeing.

Safe environments

The objective for this strategy is to create and sustain safe streets and other environments where children and youth gather and spend time.

Starting with the environments where children and youth are during the day, we need to ensure safety and wellbeing plans for high quality, accessible early child care and schools. At a broader level, community environments and caring relationships within the community are protective for children. In this strategy, the focus is on both the physical and social environments to foster positive experiences and capacities and deter harmful behaviours. An example of a physical environment strategy is to identify and ameliorate “hot spots” where violence is likely to occur in the community. A social environment change might be after-school programs and accessible early childhood drop-in centres for parents and children. There need to be strong partnerships among other community organizations to support vulnerable families in recognizing and dealing with interpersonal violence and other stresses. Since these are community-level interventions, they can be focused on children, youth, and adults, sometimes simultaneously as community change needs to be broad-based. If everyone is safe, there will be fewer harmful behaviours directed at children and youth and increased safety in being out in the community.
**Parent and caregiver support**

The objective for this strategy is to reduce harsh parenting practices and create positive parent-child relationships.

Children’s healthy development depends on the quality of relationships within their families. Parents have the most critical role in promoting their children’s healthy development, yet many are unprepared for the monumental challenges of raising children. Current stresses, such as mental health, relationship, financial, and other problems, impede parents’ capacities and resources to nurture their children and avoid exposing their children to violence. As children, themselves, they may have been unprotected from violence in the home, school, and community. Those struggling with parenting may have lacked models of effective parenting and been primarily exposed to abusive and/or neglectful parenting. If we didn’t protect these parents when they were children, it now rests with society to support them in their critical role of raising the next generation of children. Every community needs programming to support skill development in positive parenting practices for parents and caregivers who do not have the resources, understanding or experiences to provide nurturant, rights-based care for their children.

Communities also have to find creative ways of reaching and welcoming the most isolated and vulnerable parents, who are reticent to attend parenting classes. Statistics reveal that children, youth and their families in marginalized groups need a specialized focus. There need to be parenting programs that recognize and respect cultural strengths and differences in parenting. These programs should be developed in collaboration with communities to be sure that the programs being provided are culturally relevant.

**Income and economic strengthening**

The objective for this strategy is to improve families’ economic security and stability, reduce child maltreatment and intimate partner violence.

Strengthening incomes for vulnerable families serves to stabilize them in terms of housing and food security and other stresses associated with poverty. In addition, children can benefit in less chaotic and stressful homes in which there is a lower probability of child maltreatment and interpersonal violence. Increasing mothers’ access to economic resources is also beneficial for children when mothers have time to invest in their children’s education, with improved attendance and achievement.

Canada has been growing in income inequity over the past decade, a problem that is related to all forms of violence and social problems (Wilkinson & Pickett, 2010). Income and economic strengthening would reduce the inequality and enable parents to support their children by being able to provide many positive basic and relationship needs. Income and social inequality strain social cohesion and generate stress that is linked to higher levels of many forms of violence against children (Wilkinson & Pickett, 2010). Given the growing income and social inequality, we need to implement systems that will support those who are struggling, such as a guaranteed income supplement.

**Response and support services**
The objective for this strategy is to improve access to good-quality health, social welfare and criminal justice support services for all children who need them – including for reporting violence – to reduce the long-term impact of violence.

Although Canada has a universal health care system, there are wide disparities in access to supportive services. Governments and donors need to commit to increased national budgets towards solutions to end violence against children. This includes efforts to collect accurate, comprehensive, and segregated statistics about the violence that children continue to face in Canada, so that we can target our prevention and intervention efforts accordingly. There needs to be equal access to health, social welfare, and justice support systems across all communities in Canada. Often the most vulnerable communities are those most in need readily accessible, responsive and nurturing support systems. Many Indigenous and inner-city communities are in need of wrap-around services to ensure health, healing, and wellbeing. For children and youth, there need to be improvements across systems for referrals and nurturing care for children traumatized by violence and in need of protection. The cross over from the child welfare to the youth criminal justice system needs to be prevented with deep attention to the needs of all children and youth for safety, security, love, and stability in relationships.

Education and life skills

The objective for this strategy is to increase children’s access to more effective, gender-equitable education and social-emotional learning and life-skills training, and ensure that school environments are safe and enabling.

Learning in schools is a social experience, rather than an individual journey. Schools and community organizations need to ensure that every child and youth has a sense of belonging and feels included. It only by feeling safe, accepted, included, and valued that children and youth can sustain motivation to learn and adapt to expectations. Issues of violence arise in terms of students’ capacity to learn and benefit from schools. If they are experiencing violence at home, at school, or in the community, they will not have the social-emotional and cognitive capacity to be available to learn. As society’s institution for socializing children, schools operate in loco parentis, with responsibilities similar to those of parents to keep children safe and nurtured so they can achieve their optimal potential.

Canada ranks among the lowest of western countries in terms of rates of victimization at the hands of peers and not perceiving classmates as kind and helpful. In this respect, Canada has significant work to do to ensure that every child is protected from all forms of victimization at school and is fully supported in developing the social-emotional and relationship capacities that they will need throughout life.

Prevention works and is essential because violence against children has effects from cell to society. Canada has some strong evidence-based programs (see the Violence Prevention Stream of Canada Best Practices Portal: http://cbpp-pcpe.phac-aspc.gc.ca/interventions/). At this point, we need to scale up what works and ensure that progress on ending violence against children is measured, monitored, and shared – with a viable monitoring and accountability mechanism. Ensure that children and young people’s voices are heard, and that they are engaged and consulted in decision-making.

Conclusion
Violence against children is a relationship problem that arises from many root causes. The solution to eliminating violence against children and youth is to ensure that they are growing up in safe, secure, and nurturing relationships in all the places where they live, learn, play, and work. As adults involved in the lives of children and youth, the responsibility falls to all of us to create these caring relationships and contexts.

With the evidence clearly laid out in front of us and a commitment to be a pathfinder country in the Global Partnership to End Violence Against Children, it is time that we come together in embracing the INSPIRE way forward. It will take all of us coming together for a collaborative effort involving parents, caregivers, educators, coaches, recreation leaders, mental health workers, civil society leaders, communities, academics, policy makers and governments. We must work together for a better a future for Canada’s children and youth.
References


