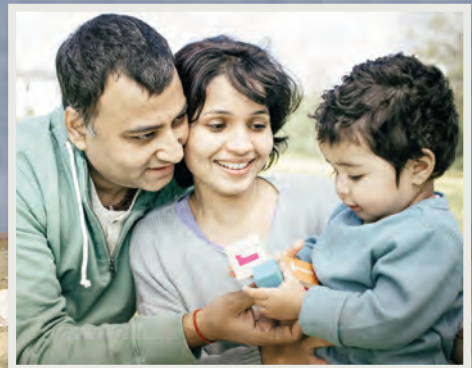# Child and Family Poverty in Ontario

A practical guide for moving from stigma to empowerment

Acknowledgements

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1 Introduction

Working with Families and Young Children Living in Poverty

This manual is a reference for service providers working with families living in poverty who have children under age six. These families face many challenges as a result of living in poverty and often turn to service providers for support in the navigation of these challenges and for needed services.

In order to be effective in their work, it is important that all service providers who work with families living in poverty:

- Have a broad understanding of the issues facing families living in poverty.
- Recognize poverty as a primary social problem and a major determinant of poor health.
- Focus their interventions on decreasing the impacts of poverty.

Working with families living in poverty is not easy. The needs of families are often complex and needed services are not always available or accessible. This can be difficult for service providers who want to make a difference in the lives of families. Service providers can have a profound positive impact on children's health and development, as well as family well-being. To be effective in their roles, it is important that service providers care for themselves, as well as consider creative solutions to address the pressing problems of families living in poverty.

Purpose

The manual offers an opportunity to reflect on:

- How poverty is defined.
- The rates of child poverty.
- The impacts of poverty on families with young children.
- The service provider practices that can help or hinder families living in poverty.
- Broader systemic and policy issues that influence families living in poverty.

Using the Manual

This manual was written with a wide range of service providers in mind, such as community workers, child protection workers, teachers, health care providers, early childhood educators, social workers and others who interact with families, parents or children.

Questions are raised to encourage service providers to reflect on the influence that poverty has on families as well as the ways they serve these families.

In this resource, the voices of parents and service providers are presented as they offer their needs, concerns and experiences. This information helps to create a picture of how services can operate for optimal impact.

The final chapter presents examples of services that use innovative approaches to address the concerns and challenges of families living in poverty. Lists of key resources for service providers and for parents are provided at the end of the manual.
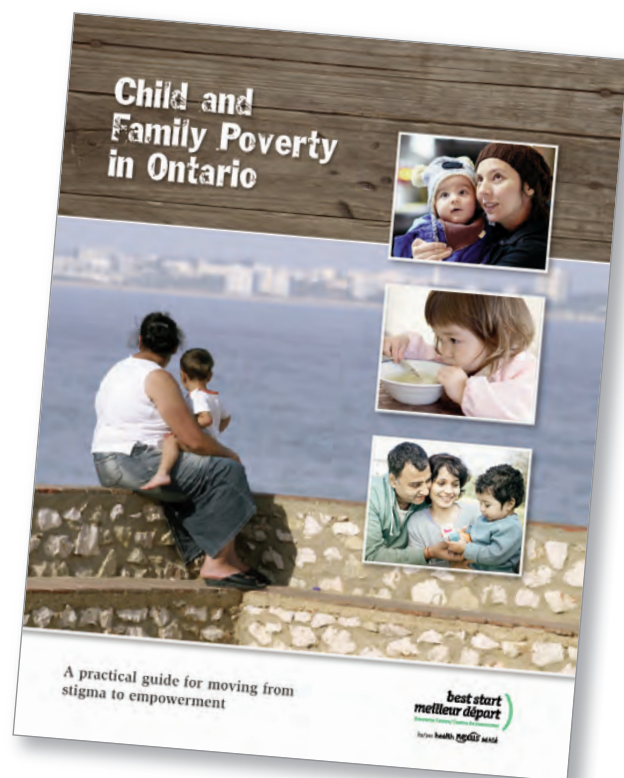
2 Child Poverty is Family Poverty

This chapter includes information about how poverty is defined and measured, poverty rates, pathways to poverty, and barriers to getting out of poverty.

Definitions of Poverty

Poverty is more than having insufficient money. Poverty also includes a lack of access to the necessities of life such as health care, education and basic services. In addition, poverty can make it difficult for families to participate in a meaningful way in society, resulting in social exclusion (Kersetter, 2009).

> "'Poor' means lacking not only material assets and health but also capabilities, such as social belonging, cultural identity, respect and dignity, and information and education."
>
> *(Engle et al., 2008, page 1)*

Children are poor because their parents are poor. Talking about child poverty involves an understanding of family poverty.

> "Every child is born with the same inalienable right to a healthy start in life, an education and a safe, secure childhood – all the basic opportunities that translate into a productive and prosperous adulthood. But around the world, millions of children are denied their rights and deprived of everything they need to grow up healthy and strong – because of their place of birth or their family of origin; because of their race, ethnicity or gender; or because they live in poverty or with a disability."
>
> *(UNICEF, 2016, page 1)*

Opportunity to Reflect and Discuss

- How do you, your organization, and your clients define poverty?
- How do different beliefs about poverty affect what people think about families living in poverty?

Measuring Poverty

It can be difficult to assess and understand the prevalence of poverty because various indices are used to estimate distinct aspects of poverty, such as the lack of material goods and the finances required to live a decent life. Child poverty rates are reported differently depending on the measure of poverty being used. The following are means of measuring poverty:

Low Income Cut-Off (LICO)

LICO is the income level below which a family will likely spend a larger share of their income on food, shelter and clothing compared to the average family. The LICO is adjusted for the population, the community and the number of children in the family. For more information on LICO, refer to www.statcan.gc.ca/pub/75f0002m/2012002/lico-sfr-eng.htm

Market Basket Measure (MBM)

The MBM is a measure of low income based on the cost of a specified basket of goods and services. The MBM is sensitive to geographical variations in the cost of many typical items commonly purchased by families. For more information on MBM, refer to www.statcan.gc.ca/pub/75f0002m/2012002/mbm-mpc-eng.htm

Low Income Measure (LIM)

The LIM is the most commonly used low-income measure and is applied by the Ontario government to track poverty. Based on LIM, a family is considered to live in poverty when their income is below 50% (LIM 50) of median income, adjusted for family size (Maund, 2009). A LIM of 40% (LIM 40) of median income indicates a depth of poverty, where families are among the most vulnerable. The low-income measure after tax (LIM-AT) helps to estimate the minimum level of income needed to have the necessities of life. The LIM-AT is one of the low-income lines used in the National Household Survey. For more information on LIM, refer to www.statcan.gc.ca/pub/75f0002m/2012002/lim-mfr-eng.htm

Long Form Census

Every 5 years, the long-form census collects demographic information in Canada. Randomly, one in four households receives the long-form questionnaire known as the National Household Survey. The long-form census includes extra questions on a number of topics that are relevant to poverty, such as education, housing costs, ethnicity, health conditions, employment, place of birth, etc.

Ontario Deprivation Index (ODI)

The ODI was used to track poverty between 2009 and 2011. There are limitations as it only refers to the working members in the family and does not consider the distribution of resources between household members. For example, when resources such as food are low, parents often prioritize the needs of their children before their own needs. In addition, the index does not consider the poverty indicators specific to children, such as toys, access to play structures and sports, children's books, etc.

The ODI names items or activities considered necessary for an adequate standard of living, but may be out of reach for families living in poverty. The ODI questions are:

- Do you eat fresh fruit and vegetables every day?
- Are you able to get dental care if needed?
- Do you eat meat, fish, or a vegetarian equivalent at least every other day?
- Are you able to replace or repair broken or damaged appliances such as a vacuum or a toaster?
- Do you have appropriate clothes for job interviews?
- Are you able to get around your community, either by having a car, by taking the bus, or using an equivalent mode of transportation?

- Are you able to have friends or family over for a meal at least once a month?
- Is your house or apartment free of pests, such as cockroaches?
- Are you able to buy some small gifts for family or friends at least once a year?
- Do you have a hobby or leisure activity?
  (Daily Bread Foodbank, 2011)

If two or more questions on the list have a negative response, this is considered an indication of poverty.

Opportunity to Reflect and Discuss

- Would you respond no to any ODI questions?
- How many of your clients would say no to one or more questions on the ODI list?
- How would you feel if, as a parent, you answered no to some questions on the ODI list?
- How could you help clients who do not have certain ODI necessities?

Ontario's Poverty Reduction Strategy Indicators

The Ontario government uses 11 indicators of poverty:

1. Child Poverty Target (PRS Fixed Low Income Measure 50 or "LIM-50").
2. Depth of Poverty (PRS Fixed Low Income Measure 40, or "LIM-40").
3. Birth Weight.
4. School Readiness (Early Child Development Instrument).
5. Educational Progress (grades 3 and 6).
6. High School Graduation Rates.
7. Ontario Housing Measure (spending more than 40% of income on housing).
8. Youth Not in Education, Employment or Training.
9. Long-Term Unemployment.
10. Poverty Rates of Vulnerable Populations.
11. Homelessness Indicator (In development).

For more information on each indicator refer to
http://otf.ca/sites/default/files/indicators_chart_en_04.pdf

To lean about poverty reduction in Ontario refer to
www.ontario.ca/page/realizing-our-potential-ontarios-poverty-reduction-strategy-2014-2019

The Early Development Instrument (EDI)

Population data, such as the Early Development Instrument (EDI), can be used to learn more about child poverty and its relation to families, geography and the availability of community resources. The EDI measures children's developmental health at school entry and is most commonly used to understand the vulnerability in a population of children (Offord Centre for Child Studies, 2016).

This 103-item questionnaire, completed by senior kindergarten teachers, measures children's ability to meet age appropriate developmental expectations in five general domains:

- Physical health and well-being.
- Social competence.
- Emotional maturity.
- Language and cognitive development.
- Communication skills and general knowledge.

For more information visit: https://edi.offordcentre.com

The EDI can help to monitor populations of children over time, report on different communities and predict later school achievement. One of the EDI's strengths is the integration of child development outcomes with other sources of data about children, families and communities (Hertzman et al., 2010).

EDI community profiles are available for most regions in Ontario. To find your regional profiles, search for Early Development Instrument and the name of your community.

Rates of Poverty

There are regional, municipal, and demographic differences within the Ontario poverty rates. Detailed local statistics can assist service providers in gaining an accurate picture of the local face of poverty. When comparing rates, it is important to remember that poverty indices measure different aspects of poverty.

Ontario has a child poverty rate similar to the Canadian level. About 1 in 5 young children live in poverty in Ontario.

Canada (using LIM-AT)

- In 1989, about 15.8% of children in Canada were living in poverty.
- In 2014, the percentage of children living in poverty was 18.5%.

(Campaign 2000 Canada, 2016)

Ontario (using LIM-AT)

- In 1989, about 12.4% of children in Ontario were living in poverty (19.3% for children under age 6).
- In 2014, the percentage of children living in poverty was 18.8% (20.4% for children under age 6).

(Campaign 2000 Ontario, 2016)

Poverty Rates are Higher in Certain Populations

The risk of poverty is not equal. Significant disparities exist based on gender, region, disability status, ethno-racial identity, length of time in Canada, etc. Some populations are more vulnerable to poverty, for example Indigenous families, newcomer families, single parent families, and families living in certain areas of Ontario (Government of Ontario, 2014).

"In addition to being more likely to experience low income these groups are also more likely to live in low income for long periods of time. This is troubling because the longer a person is poor, the harder it is to get out of poverty."

(Government of Canada, 2016, page 8)

The City of Toronto has the highest percentage of children living in poverty of all large urban centres in Canada. In Toronto, 26.8% of children live below the LIM-AT (Campaign 2000, 2016).

First Nation, Inuit and Métis children in Canada have very high rates of poverty compared to the general population. In 2010, 38% lived in income poverty, compared to 17% of non-indigenous children (UNICEF, 2017). In addition, they may also contend with discrimination, sub-standard living conditions and limited services and supports. For more information on poverty in Indigenous children, refer to *Why am I Poor – First Nations Child Poverty in Ontario* at www.beststart.org

Lone parent families are more likely to live in poverty. In 2014, 9.2% of couples with children were living in poverty compared to 30.4% of lone parent families. Most one-parent families (84.3%) are women led. The gender wage gap in Ontario may account for part of this difference as the median income for female lone parents is about $18,000 less than for male lone parents.

Newcomers to Canada are also at high risk of living in poverty. Immigrants and refugees living in poverty have to contend with the lack of income in addition to feelings of isolation and discrimination as a result of being new to the country. They often lack familiarity with the services of their new country, including the schools, health, and social services, causing increased stress. These have negative consequences on physical and mental health and the educational success of children (Stewart et al., 2008). For additional information on working with newcomer parents, view the resource *Growing Up in a New Land – Strategies for Working with Newcomer Families* at www.beststart.org

There is evidence of higher levels of poverty among families headed by lesbian and gay parents (Patterson and Goldberg, 2016). When working with a family living in poverty, service providers may not know the parents' gender, family tree or sexual orientation. In addition to poverty, LGBTQ families can face particular challenges related to visibility and recognition as a family unit. Gender discrimination adds to the stress and ongoing difficulties of coping with the realities of being poor.

Opportunity to Reflect and Discuss

- When planning your service delivery and programs, how can you take into account the disparities in the risk of poverty?
- How can your organization listen to the voices of children and parents to learn more about what they see and live, in order to improve their well-being?

Pathways to Poverty

As a service provider, it is important to be informed about and reflect on the reasons why families with young children are living in poverty. Actions taken to address poverty need to address the root causes of poverty.

> "There is no single cause for family poverty. Poverty in families and young children is due to a complex mix of individual and institutional sources."
>
> *(Ontario Association of Food Banks, 2008, page 4)*

Structural discrimination has been imbedded historically in government policies. The UNICEF Canada report *Aboriginal Children's Health: Leaving No Child Behind* reminds us that the rate of Aboriginal poverty is a direct result of decades of government policies. According to Cindy Blackstock (2005), policies of assimilation and colonization have shaped Indigenous children's lives.

Individual challenges that can lead to family poverty include lower skills, education and literacy. Lack of employment opportunities also contributes to child and family poverty. In addition, the cost of meeting basic needs such as food, shelter, utilities, and transportation is increasing.

Challenges to Escaping Poverty

Many factors increase the challenges for families trying to move out of poverty (Dilworth, 2006). Social assistance benefits provide emergency incomes that are below the poverty line (Campaign 2000, 2016). They are not enough to meet basic needs, and make it unrealistic for most families to save for a house or to increase their standard of living. Families living in poverty find it difficult to achieve the higher-level education required for better paying jobs. Barriers such as the social assistance system, the skills and credential recognition policies for new immigrants, as well as cultural barriers, can also be powerful impediments to escaping poverty (Ontario Association of Food Banks, 2008).

> "It is important to really recognize [that living in poverty] is a hard place to get out of. It is a very hard systemic ingrained issue to get out of. I have seen the mentality of blaming the poor."
>
> *Service Provider*

Restrictive rules also prevent people with low-incomes from having an economic cushion (Stapleton, 2009). For example, asset tests limit eligibility to benefits such as Ontario Works, disability supports, housing and legal aids, when people have liquid assets above established thresholds. This pushes people into deep poverty and strips them of the buffer that may have enabled them to get out of poverty and stay out of poverty.

The challenges of poverty are further compounded by the lack of services and supports such as reliable, affordable, high quality childcare, adequate housing, transportation and health care, which create further barriers to escaping poverty.

Statistics do not support the myth that most people who are poor are not working and rely on social assistance. Many families are juggling the challenge of raising children, working in precarious (not guaranteed or stable) employment, working at more than one job and have the additional burden of living in poverty. Working full-time at minimum wage does not provide enough income to raise a family above the poverty line.

> "So many parents work long hours at low-paying jobs just to make ends meet, but no matter how hard they work, or how many hours they put in, there is still not enough money to pay the rent AND feed the family at the end of the month."
>
> *(Provincial Working Group of Nipissing District, 2008, page 2)*

Opportunity to Reflect and Discuss

- Do you feel the primary causes of poverty are related to individual factors, to societal factors, or a combination of both?
- What do you feel are the main reasons that families live in poverty in your community?
- What do families in your community need to get out of poverty and stay out of poverty?

3 Impacts of Poverty on Families and Young Children

Families are the most significant influence on a child's development. Parents strive to meet their children's basic needs and to teach their children the skills, values, self-esteem and attitudes that enable them to participate fully in society (Canadian Council on Social Development, 2006). A family's ability to do this is severely compromised by the reality of living in poverty.

> "Poverty is complex. It affects individuals in different ways and to different degrees. For some, poverty is temporary and associated with a short-term life event such as a job loss. For others, it can last a long time due to the multiple barriers they face. In some cases, it can be so pervasive that it is passed from parents to children."

(Government of Canada, 2016, page 7)

Poverty has an impact on many different aspects of families' lives. In addition, the effects of poverty interact, magnify consequences, and result in additional consequences.

> "A young homeless mother who has no residence loses the baby if she doesn't get housing, but no one wants to rent to her. Everything seems to overlap."
>
> *Service Provider*

Some common results of living in family poverty include (Conference Board of Canada, 2009; Community Social Planning Council of Toronto et al., 2009; Ontario Association of Food Banks, 2008; Singer, 2003; Irwin et al., 2007; Séguin et al., 2007; Canadian Council on Social Development, 2006; Letourneau et al., 2005):

- Inability to meet basic needs such as housing, food and clothing.
- Poor physical and mental health for all family members including the children's future health outcomes as adults.
- Increased stress for the family, affecting family dynamics.
- Negative consequences for early child development.
- Higher risk of behaviour disorders in children.
- Increased risk of learning difficulties for children, underachievement at school, and lower levels of educational attainment.
- Decreased access to services.
- Decreased engagement in community life.
- Reduced future income for children, resulting in adult poverty.

> "You are dealing with survival – how you put food on table, roof over your head, living with basic chronic stress, and trying to meet your kids' needs, both basic and others."
>
> *Service Provider*

While supports have been developed for families struggling to access basic requirements such as food, shelter and clothing, families still lack needed services for the following reasons:

- There are not enough services.
- The services are not available.
- The services do not adequately meet their basic needs.

Food Security

Access to safe and nutritious food is exceptionally important for healthy child development. Poverty can influence the ability to purchase the healthy food needed during pregnancy, for young children and for parents. Food insecurity has negative consequences for children's physical development, and may result in behavioural and developmental problems (Melchior et al., 2009). One in six children in Canada lives in a home that experiences food insecurity (Tarasuk et al., 2014).

"We have to acknowledge that, in parts of this province, there is real hunger where parents will skip meals to be able to feed children and nutrition is often compromised."

Service Provider

"Recent research in Canada has shown that the experience of hunger leaves an indelible mark on children's physical and mental health, manifesting in greater likelihood of certain conditions, such as depression and asthma in adolescence and early adulthood."

(Tarasuk et al., 2014, page 6)

While food banks are established as emergency services, they also struggle to meet the growing demand. Since 2008, there has been a 6.9% increase in food bank use in Ontario. Most Ontario food bank users (61.3%) relied on social assistance (Ontario Works and Ontario Disability Support Program). Almost half of food bank users (45.5%) were families with children under 18, and 18.1% of those families were single parent led (Food Banks Canada, 2016). Approximately 307,000 children (4% of the population) benefit from food bank services in Canada (Campaign 2000, 2016). While food banks meet critical needs of families, it is important to consider food security in a broader sense, including both short-term and longer-term solutions.

> "It is well-documented that people prefer not to access food banks – they exhaust other avenues of support before taking that step."

(Food Banks Canada, 2016, page 6)

An allowance is available to Ontario social assistance recipients who require a special diet because of an approved medical condition. There is also a pregnancy/breastfeeding nutritional allowance for Ontario social assistance recipients. To learn more, go to: www.mcss.gov.on.ca/en/mcss/programs/social/directives/index.aspx

Opportunity to Reflect and Discuss

- What are some of the consequences of food insecurity that you see in your services?
- How does food insecurity affect parenting?
- What nutrition resources and services can you make available to families?

Housing

One third of renting families is in core housing need. Their dwelling may be too expensive, may require major repairs or may be overcrowded. Appropriate housing does not require major repairs, is an adequate size, and costs less than 30% of before-tax household income (Canada Mortgage and Housing Corporation, 2016). Female lone parents, recent refugees and Indigenous households (Campaign 2000 Ontario, 2016) are more vulnerable to inadequate housing. In 2015, there were 171,360 families and individuals on the wait list for rent geared to income housing (Ontario Non-Profit Housing Association (ONPHA), 2016).

The hidden homeless are people who access accommodation but have no immediate prospect of permanent or stable housing. In 2014, 8% of Canadians aged 15 and over reported that they, at some point in their lives, had to live temporarily with family, friends, in their car, etc., because they had nowhere else to live (Statistics Canada, 2016).

> "Many of the families are under-housed or do not have safe housing. So they are exposed to violence. Or because of their housing conditions, they are exposed to mould or second-hand smoke from drugs and cigarettes due to the apartment building. There are long waiting lists for families to secure public housing; many of the families are paying market rent but only receiving wages that accommodate public housing."

Service Provider

Lack of affordable and adequate family housing has consequences for many aspects of their lives. Inadequate housing may be located in high-risk neighbourhoods with less access to needed services (Dilworth, 2006). In addition, low-income families are frequently on the move, disrupting children's education. Most children change schools three times in the year they become homeless (Children's Aid Society of Toronto, 2008). When families are constantly moving, it is challenging for agencies to provide the necessary services and build trust and rapport.

Without safe, secure housing families are put in precarious situations, affecting their physical and mental health. Affordable housing is an effective way to address high rates of poverty and to have a positive impact on families living in poverty. If children have good quality, stable and affordable housing, positive impacts include improved school success, community connections and healthier neighbourhoods. When children do not have access to good quality, stable and affordable housing, the impact is the reverse (Canadian Council on Social Development, 2006).

> "If the province of Ontario develops a portable housing benefit for low-income households that set rental rates geared to income, thousands of Ontarians will be able to cover the cost of both rent and food, reducing the need for emergency hunger-relief agencies like food banks."

(Ontario Association of Food Banks, 2016, page 28)

In 2016, Ontario updated the Long Term Affordable Housing Strategy (see www.mah.gov.on.ca/Page13782.aspx). This framework was designed to transform the supportive housing system, as well as increase the available affordable housing stock. The federal government conducted national consultations and plans to release a national housing strategy in 2017 (see www.placetocallhome.ca).

Parent's Health

Living in poverty has negative impacts on the health of all family members. Poverty frequently equates to poor housing conditions, inadequate nutrition, stress, as well as barriers to health, dental and eye care (Ontario Association of Food Banks, 2008). The harmful impact of stress due to poverty is constant as parents struggle to provide food, clothing, shelter and other basic necessities of life. These all have negative impacts on health leading to differences in health status among populations (Fang et al., 2009).

Parents living in poverty have higher rates of poor health and chronic conditions such as diabetes, heart disease, chronic bronchitis, arthritis and rheumatism, mood and anxiety disorders, and many other conditions (Community Social Planning Council of Toronto et al., 2009; Ontario Association of Food Banks, 2008) as well as a shorter life expectancy (Government of Canada, 2016).

> "Poverty requires intervention like other major health risks: The evidence shows poverty to be a risk to health equivalent to hypertension, high cholesterol, and smoking."
>
> *(Ontario College of Family Physicians, 2016)*

Child's Health

Living in poverty has significant impacts on the health of children (Gupta et al., 2007). They have higher rates of infant mortality, asthma, obesity, accidents and low birthweight. Children in low-income families are more likely to have problems with one or more basic abilities such as vision, hearing, speech or mobility (Dilworth, 2006).

The higher risk of childhood asthma is attributed to unfavourable housing conditions, polluted environments, increased rates of smoking by caregivers, and increased stress, which are all related to living in poverty (Séguin et al., 2007).

The impact of child poverty can continue to have consequences for their health status as adults. Children who were poor during their first year of life are more likely to have chronic health problems, such as cardiovascular disease (Séguin, et al. 2007).

Prenatal Health

There are significant relationships between poverty and poor preconception, pregnancy and neonatal health outcomes (Schrauwers et al., 2009). Pregnant women living in poverty have higher rates of preterm birth, intrauterine growth restriction, and neonatal or infant death (Larson, 2007). Being born too soon or too small can result in lifelong impacts on cognitive function and health. The impacts of poverty, such excessive stress, can also affect brain development prenatally because of factors that produce maternal stress (Talge, 2007).

> "The early child health consequences of poverty and pregnancy are multiple, and often set a newborn child on a life-long course of disparities in health outcomes."
>
> *(Larson, 2007)*

Breastfeeding

While the benefits of breastfeeding are well known, some populations are less likely to breastfeed. In Ontario, women living in neighbourhoods with lower median household incomes, lower levels of educational attainment, and/or higher levels of unemployment, were less likely to breastfeed exclusively at discharge from hospital and have lower rates of breastfeeding initiation and duration (BORN, 2015).

Child Development and Education

" *"Interventions to reduce risks and support early child development will yield lifetime gains that contribute to the achievement and sustainability of improved development in the next generation. By investing in early child development programmes, we have an opportunity to break the cycle of inequities."*

(Walker et al., 2011, page 1335)

Poverty and the challenges associated with living in poverty impact children's ability to succeed at school (Wood, 2003). This may be due to the inability to concentrate because of the lack of food, frequent changing of schools, or because of higher rates of bullying compared to other children (Provincial Working Group of Nipissing District, 2008). Poverty can reduce school readiness, impact on achievements in school and on into adulthood (Poverty and Early Child Development in Canada, 2014). Poverty also diminishes the ability to access early learning and childcare, as the cost can be prohibitive.

" *"Poverty has consistently been found to be a powerful determinant of delayed cognitive development and poor school performance. Behaviour problems among young children and adolescents are strongly associated with maternal poverty."*

(Larson, 2007)

Poverty influences language development and by 18 months there may be significant differences in both vocabulary learning and language processing efficiency (Fernald et al., 2012).

> "Early stress and lack of positive early experiences means poverty gets under the skin, undermining development in key brain regions for school readiness and academic success. By age 2, children in the lowest socio-economic group are behind their peers in measures of cognitive, language and social-emotional development. A six-month gap in language skills undermines other learning."
>
> *(Zero to Three, 2016)*

Parental relationships with schools are also key factors in children's success in education. Parent involvement affects children's attendance, attitudes and school achievement. Parents might be less involved because they do not feel welcome in their children's school or because they have limited time due to work constraints such as holding down several part-time jobs to make ends meet (Canadian Council on Social Development, 2006).

> "Overall, being born into and growing up in a poor household negatively affects children in the short term and across the life-cycle. These effects have major implications for society."
>
> *(de Boer et al., 2013)*

Children's Feelings

The experience of poverty has emotional impacts on children, in addition to the physical and cognitive impacts. As a result of being poor, some children feel deprived, embarrassed, bullied, inadequate and responsible (Robinson et al., 2005). A child's feeling of self is impacted by their experience of poverty. A sense of self is unique to each child and is influenced by the child's resiliency. Resiliency is promoted through experiences such as positive relations and experiences with family, community and school, which may be limited for children living in poverty.

Children's Behaviour

Children living in poverty have higher rates of aggression, such as starting fights with their peers or family members (Dilworth, 2006). This might be due to the stress and insecurity of constantly moving, inadequate nutrition, lack of opportunities to participate in extracurricular and social activities, or frustration over negative situations in which they have no control.

Parenting

Family income alone cannot predict the quality of parenting behaviours (Gutman et al., 2009). The Canadian Council on Social Development (2006) found that positive parenting styles were the same regardless of level of income. The quality of parenting behaviours was mediated by factors such as having good mental health and larger community networks.

Poverty affects the health and wellbeing of the whole family. The constant mental strain of being preoccupied with money affects parents on different levels, leading to family distress and causing difficulties in relationships within the entire family unit. Parents' socio-economic background, including education and income, has a huge impact on children's outcomes (Gutman et al., 2009). Poverty and poor mental health decreased the quality of the parental interactions (Gutman et al., 2009; Letourneau et al., 2005).

"The cognitive deficit of being preoccupied with money problems was equivalent to a loss of 13 IQ points, losing an entire night's sleep or being a chronic alcoholic, according to the study."

(Mani et al., 2013)

Child Protection Services

Children from lower income neighbourhoods are more likely to be removed from their homes (de Boer et al., 2013). If core housing needs are not met, there is a higher risk of admission to child protection services (Children's Aid Society of Toronto, 2008). Lack of adequate housing was a factor in 20% of child protection cases in which children were taken into temporary care in 2000 (Chau et al., 2009).

> "A lot of children come into care because of poverty. Families don't have the resources to provide the basic necessities for their children: food, clothing, and housing. Certainly the love the parents have for their children isn't diminished, but poverty is a key factor."

Service Provider

Social and Community Networks

Families living in poverty tend to have tenuous community and social networks due to:

- Regular address changes.
- The inordinate amount of time and energy that it takes to survive (Stewart et al., 2008).
- High levels of stress (Provincial Working Group of Nipissing District, 2008).

> "Many of the families lack… a supportive network that they can count on… that helps support family and young children and the needs they have."
>
> *Service Provider*

The lack of networks affects the ability of families to get ahead in life and to access needed services (Dilworth, 2006). It increases their sense of isolation. It also affects parenting, as parents with fewer social networks have less positive interactions with their infants (Gutman et al., 2009).

Inclusion

Poverty has a negative impact on the sense of inclusion for families and children. Poverty causes, and is a product of, social exclusion. Many families living in poverty are socially excluded because they are poor. They also face discrimination, stigma and judgemental attitudes. This lack of inclusion can be experienced in many different ways and has a negative impact on health (Stewart et al., 2008).

Children's ability to participate in cultural and recreational activities, such as organized sports, is severely impacted by living in poverty and material deprivation. There is a direct negative impact on children's health as well as their sense of belonging (Stewart et al., 2008).

In Canada, there is a growing gap between the richest and poorest Canadians. This gap matters: the more unevenly wealth is distributed, the more the health of the *entire* population suffers. This gap contributes to social exclusion. For families living in poverty, lack of discretionary income limits active participation in the community. For children this means limited opportunities to play sports or pursue music, drama, or other cultural activities.

> **Opportunity to Reflect and Discuss**
>
> - How can you recognize a family's unique experience and adapt approaches to meet their needs?
> - What are the main impacts of poverty that you see in families in your community?
> - What can you do to reduce the impacts of poverty?
> - What can you do to address social isolation?

4 Voices of Parents of Young Children Living in Poverty

An important step in understanding the realities of child and family poverty is listening to families and young children who live in poverty. To establish programs and policies that effectively address and alleviate issues facing these families, it is important to learn from their experience.

This chapter provides an opportunity to read first-hand what families living in poverty want everyone to know about their situations, including their needs and the solutions they recommend. All quotes in this chapter come from parents who participated in focus groups for the first edition of this document. The quotes include strong comments and stories from parents, reflecting their frustration in trying to care for their families on very low incomes, their relief when they receive much needed services, and their pride in what they accomplished. The information in this chapter will help service providers have a better understanding of the types of services that make a difference for families.

"We are human too and have not chosen this life for ourselves."

"Please – I'm not a bad parent because I'm poor."

Challenges of Living in Poverty

In general, parents are trying to do their best for their families. Parents living with insufficient financial resources are no exception, despite the many interacting challenges to living in poverty.

"I'm trying to give my kids the best, do what's best for them."

Inability to Meet Basic Needs

Day-to-day living becomes a challenge when families are raising children on an income that does not meet basic family needs.

"If it's a choice between food for kids and food for mom, kids come first – mom doesn't. I just don't eat or I don't eat as much as I need and I'm still hungry."

Without enough money, it is hard for families to meet basic needs, even with access to services and resources. Often, the supports for basic needs, such as funds for clothing, transportation, medications, or dietary needs, are limited, reduced, or not available.

Parents also find it difficult to access services that provide low-cost or free food. Securing food is much more than meeting a basic nutritional need. It affects parents' emotional and physical well-being, keys to their ability to parent. They noted it was particularly challenging to provide healthy food, which is generally more expensive than junk food. This is even more difficult if a member of the family has dietary requirements because of a medical condition.

"Meat is more expensive, and so we have filler foods. We have limited fruits, limited vegetables, a lot of bread, carbohydrates."

"Food bank hours of operation have been cut and there is not enough funding to support food banks."

Getting clothes for families with young children is particularly challenging as children are constantly growing.

> "My kids need two pairs of shoes each, and one of them is a size 12. Where can you find a size 12 for under $20?"

Access to transportation is not a luxury. People need to travel to buy groceries and go to school and work. Transportation is also vital to access services that support families with young children living in poverty. Without transportation, a family may not be able to get to discount grocery stores and other low cost outlets. In addition, being able to travel is critical to being actively involved and socially included in the community. Without adequate transportation, families become isolated. Outside the urban areas, transportation options may be limited, they may be expensive, or transportation may be unavailable.

Accessing Extracurricular Activities

The term *extracurricular activities* (for example recreation, arts, leisure, and community activities) implies that these activities are not necessities and they are extras.

Extracurricular activities provide children the opportunity to engage and connect with friends and to build skills. They are often a key ingredient in helping children to increase their physical fitness and explore their talents. If a child does not participate in activities, the opportunities for social interaction and building positive relationships are limited.

Children living in poverty have fewer opportunities to develop and practice social skills, as well as other life skills. In addition, the children may be ridiculed for their lack of participation and isolated from their peers, which then has a negative impact on their self-esteem.

> "I can come up with the money to put my daughter in gymnastics or something for a few weeks, but I can't come up with the gas to get there. Then, paying for the gym outfits is so expensive."

Lack of Resources and Services

Resources and services can be limited for a variety of reasons, including poverty. For example, resources and services in a community may be insufficient for the families living in poverty.

Location has an impact on how a family experiences poverty. For example, families living in rural areas mentioned the challenges related to the lack of anonymity, limited services, and difficulties accessing services because of distance or cost.

"When you live in a small rural area, everybody knows everybody's business. It's a double-edged sword. On the one hand, people do know your business so if something horrible happens, people will rally behind you. But on the other hand, everybody knows if you've gone to the post office or had a cigarette or whatever."

Families also noted that there was a significant decline in supports and services when their children were older than six years old. The lack of childcare was also mentioned as contributing to the difficulties of coping with poverty.

Restrictions to Services and Benefits

Program criteria and rules can prevent families from accessing and continuing to use specific services. To the parents, it may seem that services are not responsive to their needs. In addition, service delivery may not be coordinated with other related services.

Many parents talked about the need to have their income assessed to see if they met the eligibility requirements to access certain services, the delay in qualifying for support, the rules that they needed to follow, and the need for a referral or assessment before they could access the service. These challenges resulted in negative feelings such as shame and frustration.

"It's not helpful when you always have to have a referral for something your child needs."

> *"I finally get up enough nerve to come to talk to somebody and when I get there I have to fill out a form... It's asking a lot!"*

Stigma of Living in Poverty

Participants noted there is a stigma associated with living in poverty and this has an impact on a family's mental health. One participant noted how hard she works to minimize the impact on the family.

> *"I've never let someone make me feel ashamed. They try to make you feel low, but I won't let them. I have more fun with my children than some adults. Grab a shower curtain, grab whatever you can out of the cupboard and make pictures. The other day we made pictures out of chocolate syrup. It washes! Throw them in the bath afterwards. I want my kids to grow up to be creative, and how could they be if I wasn't?"*

Emotional Impact on Families

There is a practical impact of not meeting basic needs such clothing, but there is also an emotional impact on children as well as parents.

Parents feel stress and guilt because of the choices they need to make, how close to the edge they are living, and how this negatively affects their children. Parents feel an array of emotions from stress, to guilt, to anger, to sadness.

> *"My six-year-old started to ask for something and then she stopped and said, 'No, wait, we don't have enough money for that right now, do we?' Yeah, you're right, but she shouldn't know that at six."*

The emotional impact on parents has repercussions for children and vice versa. For example, one parent noted that her child feels punished for being poor and then in return the parent felt frustrated and guilty.

Parents talked a lot about being invisible and not feeling respected or treated as an adult. Being a parent living in poverty has a negative impact on parental self-esteem.

> "Sometimes you know what you need, but then you face roadblocks when you try to get help, so you leave feeling worse."

> "Everybody watches what you buy, what your kids wear, and everything you do but then they look right through you like you're invisible."

Services and Supports that Help

While there are many challenges for families raising children with inadequate income, there are also things that make a positive difference.

Families appreciated the availability of a variety of free and low-cost supports and services. They mentioned the importance of having support from their families and friends and the help they received from organizations and workers. There was a diverse range of organizational supports described as helpful such as Friendship Centres, Community Action Program for Children (CAPC), Canada Prenatal Nutrition Programs (CPNP), pregnancy centres, YMCA, Ontario Early Years Centres, La Leche League, childcare centres, Healthy Babies Healthy Children, free community library programs such as Mother Goose, and community programs that offer crafts and snack time.

Positive Interactions with Service Providers

Parents talked about individual professionals who made a huge difference and others who compounded the challenges of living in poverty. When families talked about service providers who made a difference, they most commonly mentioned workers who established genuine human relationships and were well versed in accessing available services and supports.

> "I'd like to see my service providers be realistic, less clinical. I'm not really interested in professionalism; I want you to be human. At least know my kids' names, know who I am, and what you're coming for."

Interactions with service providers have an impact on parents, either creating barriers or facilitating interactions. Positive interactions with service providers provide help and hope and decrease stigma for families living in poverty. Parents identified the following items that they appreciated when interacting with a service provider:

Respect

While interaction with some service providers strengthened family members' self-worth, some service providers had the opposite effect.

> "They act like they begrudge you for having to use the [service] in the first place."

> "Some service providers use your bad situation against you and try to turn it into a learning opportunity. I don't need to hear that I'm out of money because I didn't budget properly and what can I do better next time."

Parents want service providers to offer a bit of themselves. They want to know that someone believes in them and that there is hope – light at the end of the tunnel.

> "Always listens and is engaged. I think I bawled my eyes out in front of her and she just sat there and listened."

> "There was ultimate respect there, even for your beliefs or anything. If you had a way of doing things, she totally respected that you wanted it that way for your family and, yeah, she just helped make things happen. She was right behind you every step of the way."

Understanding

Parents felt very strongly that service providers were better able to understand their lives if they were drawing on their own experience, such as living in poverty and raising children. Parents did not appreciate it when they felt they were being lectured from a textbook or were just being seen as a classic case, as opposed to a unique individual trying to meet the challenges in their lives.

> "It's so important to have an advocate or service provider who knows what it is like, what experience I'm going through."

> "I don't think that my counsellor there had lived what I had, but she was sympathetic, empathetic, and pointed me in the right direction."

Open and Non-judgemental Attitude

Parents valued workers who connected with them in a non-judgmental manner. Parents appreciated being treated as competent adults facing some challenges due to lack of income.

> "She doesn't say things like, 'Why didn't you ration your milk.' She doesn't ask questions or make me feel bad."

> "She watched me make mistakes and helped me fix them without saying, 'I told you so!'"

Commitment and Advocacy

There are systemic constraints that challenge service providers' ability to find solutions and make long-term differences in families' lives. Some parents perceived that certain service providers did not have the necessary skills or desire to provide support and assistance, to find solutions and to link to needed services. When parents talked about workers who made a difference, they were often people who were perceived to be there for the family and doing everything possible to get resources they required.

Advocacy was particularly important for parents. It was important to feel that someone was standing up for them, looking out for their best interests, and securing the needed resources and services.

> "She has stood up for me and my children many times and gotten us much needed help and housing."

> "Five years ago, I was being abused in my marriage and, when I moved out here, I had nothing... And [professional's name] was right there at my door saying, 'What can I do?' ... And I have no idea where she got it, but she knew a whole team of people and she knew people who had clothes and all kinds of things. We had nothing except what was on our backs... and I just say my hat's off to her. She's awesome."

Ability to Manage the Rules and Expectations

Some families felt that the rules they were trying to abide by were arbitrary or inflexible and that they were expected to meet unreasonable standards. There is also a high degree of fear for children who are involved in the system.

> "You're damned if you do, and you're damned if you don't. They want you to work, to get out and make money for your kids and stuff, but when you do that, then you're penalized. It's a ridiculous system."

> "I know they have to have rules but there's no flexibility."

> "My kids hide in the closet because they are afraid they're going to be taken away by the worker."

Parents appreciated service providers who were up front about rules and consequences and were able to find ways to meet family needs despite service limitations.

Knowledge of Resources and of Services

Parents valued workers who knew where to get needed resources, could provide accurate and timely information, and ensured parents were connected with the right services.

> "My worker knew her stuff. And if she had doubts, we would look it up together right there. It was done. She would call to find out right there from my house."

> "If she didn't have the resources, she knew who did. She hooked me up with everybody that I needed."

Support in Meeting Basic Needs

Parents particularly valued assistance in meeting basic needs.

"I don't get money [my Ontario Work cheque] for a couple of days and I don't know what to do and she says, 'Don't worry about it' and she'll come out with enough stuff for a couple of days."

"They're also able to give us a break with parent relief and the parent support group."

Top Ten Tips for Service Providers

1. Develop a genuine relationship with me – it is key to supporting me.

2. Be empathetic, respectful, and recognize our shared humanity.

3. Push and challenge yourself to gain a deeper and richer understanding of my situation and life.

4. Be open-minded and do not judge me.

5. Recognize and acknowledge how hard it is to live in poverty.

6. Have realistic expectations of me and my family.

7. Remember, just because I am poor, does not mean I am a bad parent.

8. Remember, just because I am poor, does not mean I am incompetent.

9. Be an advocate and demand more accessible resources and supports.

10. Work to reduce the red tape and barriers to services and supports.

5 Voices of Service Providers Working with Families Living in Poverty

This chapter highlights the perspectives of service providers regarding their interactions with families living in poverty, as well as on service delivery. All quotes in this chapter come from service providers working with families who live in poverty.

Effective Service Providers

In order to be effective, service providers need to assess their interactions with their clients. Active reflection improves delivery of services and supports to families living in poverty. Attending training, discussing cases with peers, and self-education are ways to identify personal and organizational areas for improvement and strengths.

The following are characteristics and actions that service providers felt were important in working with families living in poverty.

Attitudes

A non-judgmental relationship is critical in positive interactions with families. In doing so, service providers should treat clients with dignity and respect.

> "We all get shocked at different things – keep it in the inside – make sure your body language does not show it."

Self-Awareness

Working with families to enable decision-making has a huge impact on families' lives. Self-awareness about any beliefs or values that may negatively and positively impact the client is essential.

> "We have to constantly be aware of the power dynamics that are at play. I am the worker, I get paid to do this... I need to recognize that in my interactions and be vigilant about how that can feel for a client or participant."

Caring Connection

Families need and want to connect with workers who care, and are not just doing their job. Making a positive connection facilitates positive outcomes.

> "I think that is the way you should think of assisting other families – as if they were your own. Are you doing all that you possibly can, as if she were your own sister and your own nephew or niece?"

Cultural Awareness

Service providers' efforts need to be focused on understanding the families' practices, beliefs and parenting styles in order to provide an environment that is safe, welcoming and inclusive.

> "I think that as professionals working with young kids, we hold ourselves to certain methods of teaching and working with families. We fall in the trap of thinking that is the only way... other cultures coming into this country have proven methods of rearing children that we need to be open to as well. It is just not one way."

> "The biggest barrier I have seen is the lack of basic understanding of the social history of Aboriginal policies."

Flexibility

Poverty affects all aspects of families' lives. Workers, who are most effective for families, understand the reality of living in poverty and create flexibility in the way that they respond. When possible, service providers should show flexibility in addressing the needs of the family to help them feel that the priority is meeting their needs.

> "Sometimes the hoops the people have to jump through to get something, the bumping around from here to there, the phone calls."

> "Taking the rules too literally rather than understanding that balance of helping people and navigating the system."

Understand that Poverty is a Systemic Issue

It is important that service providers understand and respect that poverty is a systemic issue. Families are not living in poverty by choice. When service providers develop this understanding, it safeguards against blaming the families for their circumstances.

> "Don't look at the family and parents as the problem but look at the structures that are barriers to people participating fully in society."

Understand that Parents have their Own Expertise and Strengths

It is critical that service providers respect, acknowledge and understand parents' expertise, strengths and resilience. Parents are the experts on their own children, and it is important that we respect that relationship. Families are not looking for service providers to dictate their lives for them, but to offer information and support. Service providers can create opportunities that parents can choose to use or not, in the way that works for their family or particular situation.

> "Understand that parents want the best for their families. Just because of the circumstances, or because they can't provide what they need, doesn't mean that they don't know what they need, and what they want to do."

Comfortable Talking about Money

Service providers need to be comfortable talking about budgeting and feelings and consequences of lack of money, when working with families living in poverty. For example, a service provider may need to address the uneasiness of a parent who is not able to pay for his child to attend a school outing, a parent unable to afford the proper diet for her diabetes, or a parent who is not able to afford the bus tickets for appointments.

Actively Listen and Build Trust

Trust is a critical factor in establishing a relationship with a family. This can take time. With trust, people are free to communicate honestly without fear. By identifying the challenges families are facing, service providers can refine service delivery and referrals. Be responsive to parents' needs as defined by the parents. Building trust takes time and is difficult to establish in brief appointments.

> "You have to spend time with that family so they can trust you enough to reveal what their needs are."

Provide Information in a Way that Parents Can Understand

It is important to provide information about resources and issues in a way that is understood by parents.

> "Sometimes we give parents a lot of written forms. I think we need more one-on-one contact to build trust and to help parents understand the messages we are trying to get across."

> "We have our lingo, and that becomes a barrier. We need to learn how to use clear language."

Knowledge of Services and Resources

It is important that service providers are not the only support or connection that a family has in their life. Parents need up to date, accurate and timely information about the resources and services available to them. When service providers have knowledge of services, they are better able to connect families to the community. Be sensitive to circumstances of the families and be ready to respond in practical ways.

> "Finding as many resources as you can. Know your resources, so you can give the family as much information as you possibly can."

> "Be aware of the free and inexpensive programs that help kids out – where can you get free recreation, or apply for a subsidy, where do you get that subsidy."

Build Capacity for Community Development

Service providers can help communities ease the burden of families living in poverty and increase community services.

> "It is not what we are going to do for the community but how we work with the community to come up with ideas and solutions for the community."

> "We should invest in community-based solutions which will remain stable and sustainable regardless of who is offering the service."

Facilitate Advocacy and be an Advocate

Provide opportunities in the organization and in one-on-one interactions with families to help them learn about their rights. Help communities understand the broader context of poverty to reduce the shame and the self-blame experienced by some families. These steps will make it easier for families to advocate for themselves. Reducing poverty and strengthening services will only come about when people advocate for change and indicate the type of services that are needed.

> "Advocating and raising awareness for families living in poverty is necessary."

> "We need to be really outspoken about that and advocate for structural solutions. It sounds so easy but it's the hardest thing to do. Work together, whatever it takes to get public awareness and action – the documentation, writing the letter, doing the public education and media work."

Effective Services

The way a service is provided makes a difference, positive or negative, in the quality of the lives of families. According to service providers, high-quality services should:

- Engage and be responsive to families.
- Provide easy access to information and resources.
- Meet parents' needs as identified by them.
- Give opportunities to develop skills and leadership.
- Connect families with their community.
- Offer a holistic approach where families can get most of their needs met.
- Provide opportunities for formal and informal peer support.
- Offer facilities that are accessible and welcoming.
- Facilitate participation through the provision of food, transportation and childcare.
- Provide strengths-based program-ming that is responsive to the cultural and language needs of families.
- Provide family-centred programming that includes services for children, parents and families.
- Base the program on collaboration including a mix of informal, formal and drop-in services.
- Advocate for families.
- Engage and educate the broader community about poverty.
- Have secure, ongoing funding and high staff retention.

Barriers to Services

There are many barriers to providing high quality services. Some barriers can be changed directly; others require policy solutions.

Limited Funding

Organizations are often faced by the challenge of not having enough funding for staff to meet the needs as well as inadequate space and supplies to run programs, etc.

"One of our big issues is that we are providing services in a number of community locations. We have to constantly set-up and take down. If we had our own space, we could probably do a lot more."

A lack of ongoing core funding limits an organization's ability to provide responsive, stable programming. When funding is geared to short-term projects or the funding does not adequately meet the costs of providing the program, then organizations are unable to meet families' basic needs and are forced to make difficult decisions. The amount of effort and time needed to fundraise takes away from the resources available to provide services for families.

"There have been a lot of cut backs. I can think of a couple of places where we partner to provide services – but the hours that they are open have been reduced due to cut backs, so this limits what we can do. I think of our own staff and how it is eroded over time... and you realize you are doing way less."

"There is a lot of funding that is one year, two years, three years, but by the time you get the program up and running, build the trust, the funding could be done."

Competing Needs

Stakeholders (government, organizations, service providers, funders, and families) often have different needs that can be in direct opposition.

"Trying to balance what funders want with the needs of the clients. Funders are looking for outcome-based programs, but from our point of view you need to look at success from the perspective of the client not from the numbers."

Lack of Service Coordination

Families living in poverty are governed by policies and programs developed through municipal, provincial, and federal governments; yet the delivery of these programs may not be coordinated. Poverty influences all areas of families' lives, such as housing, health, education and employment, yet these all fall under different government ministries.

Funding often comes with guidelines on the services that can be provided. These may not correspond to what the families actually need. This can be a significant barrier to providing comprehensive effective services.

Organizational Policies

Organizations sometimes develop policies that restrict service providers' ability to adequately serve the families with whom they are working.

"Policies make it more difficult for people to work together with families. There are restrictions about what you can do with the family or time constraints. There is lack of continuity and there are arbitrary cut-offs around age or other characteristics."

Community Attitudes, Beliefs and Active Discrimination

An organization's ability to provide adequate services can be impacted by a community's negative attitude.

> "Some landlords can be reluctant to rent to a single."

> "General attitude about people living in poverty makes it hard to fundraise for programs because there is this attitude that people deserve to be poor."

Lack of Services

When organizations are looking for services and resources for the families that they work with, they are often faced with the fact that there are insufficient services and huge waiting lists.

> "It is so difficult to access mental health services for people in this community. They can't afford the medications, they don't have the tools cognitively or the supports to access their appointments. The ripple effect of how it impacts their children and other community members is huge."

Lack of Creativity

Organizations and service providers that have been working with families living in poverty for a long time can sometimes get complacent and fall back on the way it has always been done. There is a need to assess, on a regular basis, whether services are meeting people's needs. There are many ways to learn how to strengthen services, such as regular program evaluations, talking to parents, and learning from other programs and services.

> "We have always done it this way before, so we get stuck and only do it as past experience. We need to be open to new ideas."

Learning from each other is one of the most powerful ways of improving practice and service and, ultimately, moving forward in the reduction of child and family poverty.

6 Moving Forward... Reducing the Rates and Impacts of Child Poverty

"The well-being of children is a shared responsibility in Canadian society. While parents play the primary role in the nurturing and caring of their children, we recognize that families operate within the context of communities, workplaces and public institutions. The role of governments is to ensure that each of these settings functions, individually and together, in ways that support families with children and children within families."

(Government of Canada, 2004, page 20)

There are many recommendations and much research on addressing poverty for families and young children. The challenge is to move the research to action, to advocate for change on a policy level and to improve services, with a focus both on reducing the impact of poverty, and as feasible, reducing the incidence of poverty.

Policy, labour market and service delivery solutions all need to acknowledge, account for, and respond to the disproportionate representation of marginalized communities, such as Indigenous families, immigrant and refugees families and parents with disabilities. Effective programs and services are developed in collaborative manner, including funders, front-line staff, agencies, academics and families who have first-hand experience living in poverty.

This chapter offers a look at some of the policies and practices that can influence child and family poverty. It builds on information provided in the previous two chapters, where service providers and families provide advice on practices and programs that make a difference.

Government Promises to Children

Child and family poverty does not occur in a policy or political vacuum. It is important to have an understanding of the government actions on child and family poverty and of how individual programs and services fit into the larger picture. Through public resolutions and the signing of international conventions, the federal government acknowledges that child poverty is a critical issue.

Federal Initiatives

- **1989**, the Canadian House of Commons unanimously resolved to eliminate child poverty by the year 2000 (Conference Board of Canada, 2009; Campaign 2000 Canada, 2009). http://campaign2000.ca/about-us/our-story/

- **1990**, the Canadian government signed the *Convention on the Rights of the Child*. https://treaties.un.org/pages/ViewDetails.aspx?src = IND&mtdsg_no = IV-11&chapter = 4&lang = en

- **2002**, at a UN General Assembly Special Session on Children, Canada, along with other nations, adopted a declaration and plan of action called *A World Fit for Children*. www.unicef.org/specialsession/docs_new/documents/wffc-en.pdf

- **2004**, the Canadian government created *A Canada Fit for Children* plan of action (Government of Canada, 2004). http://canadiancrc.com/Canadian_governments_plan_2004_en.aspx

- **2009**, the government acknowledged its failure to eliminate child poverty, reaffirmed its commitment to address child poverty, and resolved to develop an immediate plan to eliminate poverty in Canada for all (Campaign 2000 Canada, 2009).

- **2016**, the Universal Child Benefit was introduced to enhance and simplify Canada's child benefit system and provide additional support to those who need it more. This is expected to result in a reduction of about 40% of child poverty (Government of Canada, 2016). www.canada.ca/en/revenue-agency/news/newsroom/tax-tips/tax-tips-2016/you-have-children-new-canada-child-benefit-may-affect-your-family.html

- **2016 and 2017**, the government proposed to invest $7.5 billion over 11 years, starting in 2017-2018, to support and create more high-quality, affordable childcare across the country, particularly for families in need. The federal government plans to work with each province and territory to enter into three-year bilateral agreements to address early learning and childcare needs. www.canada.ca/en/employment-social-development/news/2017/06/this_is_the_placeholderfortheelccnrfridaymorning.html

Ontario Initiatives

- **2008**, the Ontario government released *Breaking the Cycle: Poverty Reduction Strategy for Ontario*. This long-term strategy set outs goals, timelines and indicators for tracking progress on poverty reduction. www.children.gov.on.ca/htdocs/English/documents/breakingthecycle/Poverty_Report_EN.pdf

- **2008**, the Ontario Child Benefit was introduced to direct financial support to low and moderate income families – whether they are working or not. It is a tax-free amount to help parents with the cost of raising their children. www.children.gov.on.ca/htdocs/English/financialhelp/ocb/index.aspx

- **2009**, the legislature approved the *Poverty Reduction Act* which requires the province to review and set new targets every five years. www.ontla.on.ca/web/bills/bills_detail.do?locale=en&BillID=2147

- **2014**, the next cycle of the government poverty reduction strategy was released. www.ontario.ca/page/realizing-our-potential-ontarios-poverty-reduction-strategy-2014-2019

- **2016**, the Ontario Child Benefit supported about one million children in over 500,000 families. It provided a maximum payment of $1,356 per child per year in 2016/17. www.children.gov.on.ca/htdocs/English/financialhelp/ocb/howmuch.aspx

- **2016**, the Ontario government increased social assistance rates by 1.5% for families receiving Ontario Works and 1.5% for individuals receiving Ontario Disability Support Program (ODSP). news.ontario.ca/mcss/en/2016/09/ontario-increasing-social-assistance-rates.html?utm_source=ondemand&utm_medium=email&utm_campaign=p

- **2016**, the Ontario Government promised to ensure families kept all of their Canada Child Benefits and promised to eliminate cuts to child support payments as of 2017. news.ontario.ca/mcss/en/2016/06/ontario-ensuring-vulnerable-families-keep-full-canada-child-benefit.html

- **2016**, the Ontario government promised to create 100,000 new licensed childcare spaces within five years, starting in 2017. news.ontario.ca/opo/en/2016/09/speech-from-the-throne.html

- **2016-2017**, the *Canada-Ontario Early Learning and Child Care Agreement* was the first bilateral agreement to be signed with the Government of Canada. Ontario planned to help 100,000 more children aged 0-4 access affordable, quality and responsive licensed childcare in schools, homes and communities over the next five years. www.canada.ca/en/employment-social-development/news/2017/06 /this_is_the_place-holderfortheelccnrfridaymorning.html

- **2017**, the province of Ontario released its *Renewed Early Years and Child Care Policy Framework and Expansion Plan*, outlining a vision for a high-quality, inclusive and affordable early years and childcare system. www.edu.gov.on.ca/childcare/renewed_early_years_child_care_policy_framework_en.pdf

- **2017**, the Ontario government is removing barriers to building housing to increase access to rental and affordable housing. https://news.ontario.ca/mho/en

- **2017**, the Ontario government is making enhancements to the province's social assistance by increasing rates, providing extra support for people in remote and northern communities. https://news.ontario.ca/mcss/en/2017/09/ontario-boosting-social-assistance-to-help-people-get-ahead.html?utm_source=ondemand&utm_medium=email&utm_campaign=p

- **2017**, the Ontario government announced plans to offer free prescription medications for children and youth, starting in 2018. https://news.ontario.ca/opo/en/2017/04/free-prescription-medications-for-children-and-youth-through-ohip.html.

- **2017-18**, the province of Ontario planned to provide 24,000 more children with access to care to help Ontario families' access affordable childcare. https://news.ontario.ca/mof/en/2017/04/helping-ontario-families-access-affordable-child-care.html

As Canada, Ontario and communities adopt more active roles in poverty reduction, important progress will be made.

Policy Recommendations

A solid foundation to address child poverty is implementing in its entirety the United Nations Convention on the Rights of the Child that Canada has signed (see http://canadiancrc.com/PDFs/UN_Convention_on_the_Rights_of_the_Child_en.pdf). The rights in this document would improve the lives of many children and families, and would assist in eradicating child poverty in this country.

Poverty is rooted in systemic issues that need to be addressed at a policy level. The Ontario government has recognized this and is addressing policy and service issues through the Ontario Poverty Reduction Strategy available at www.ontario.ca/page/realizing-our-potential-ontarios-poverty-reduction-strategy-2014-2019-all

In addition, many organizations have developed policies that have the potential to reduce the impact of poverty or the rate of poverty.

> "We have always found that local policies work better if we are part of the process at the beginning instead of an add-on."
>
> *Service Provider*

In general, the recommendations are to take action in following various ways:

Inclusion

- Recognize the full face of poverty – child poverty should be addressed with a simultaneous focus on family poverty.
- Promote gender and racial equity.
- Make inclusive decisions.
- Ensure the decisions are in the best interest of children and families.

Housing

- Increase access to safe, adequate and affordable housing.
- Offer geared to income rental rates.

Health

- Maintain universal health care.
- Remove the three-month wait period for the Ontario Health Insurance Plan (OHIP) for new immigrants.
- Increase access to programs such as mental health, addiction counselling and dental services.
- Offer health benefits for the working poor.

Income

- Guarantee adequate income for families with children.
- Provide supports for families moving from Ontario Works to the labour market.
- Recognize qualifications and credentials of new immigrants.
- Provide access to quality education and training.

Services and Supports

- Provide affordable, accessible, high quality early childhood education and care services.
- Mandate education requirements for service providers, such as understanding of the determinants of health, community resources and the impacts of poverty.
- Build and sustain services and supports for children and families.

Promising Practices

The following are examples of promising approaches to address various aspects of child and family poverty.

Engage in Community Collaboration

In order to make a difference, organizations need to make poverty a priority and need to commit to working collaboratively (Sutcliffe et al., 2009). Many of the solutions to social inequities are beyond the capacity of any one organization. Strong and durable relationships between sectors (e.g. health, education, transportation, environment, finance, etc.) are needed for effective action (Sutcliffe et al., 2009).

Community engagement is a key cross-cutting strategy in reducing social inequities in health. Communities, including parents living in poverty, should be involved in the development of policies, programs and services (Sutcliffe et al., 2009; Stewart et al., 2008). This ensures that all aspects of the issue are at the table and provides opportunities for those living in poverty to be empowered, increasing their skills and social networks.

Working collaboratively requires levels of shared power and control that are not necessarily comfortable for service providers (Sutcliffe et al., 2009). It is important to develop the skills needed to facilitate this collaboration.

> "Collaborative, equitable and inclusive leadership is about recognizing the different levels of power (and resources) that different people and organizations hold within our partnerships. It's about developing strategies and changing practices to address imbalances. It is a commitment to ongoing dialogue, reflection and action to make sure that equity-seeking (marginalized) individuals and groups are at the centre of our collaborative leadership and decision-making."

(Collaborative Leadership in Practice, 2016)

Positive community action can involve any number of activities. Organizations and service providers can advocate at the policy level and enlist others concerned with the issues to do the same. Projects that entail community economic development can be supported through lobbying or engagement. In addition, diverse participants can come together to talk about how to strengthen and coordinate services for the benefit of families. These and other activities can be centred on the proverb, "It takes a village to raise a child."

Address Judgemental Attitudes

Difficulties around values can be challenging. Families living in poverty may feel judged and stigmatized by some service providers and services. Service providers can identify social injustices and the weaknesses in service delivery and work to counteract them.

Address Inequities

Poverty does not affect everyone equally and a range of approaches is needed. For example, there is a high poverty rate among Indigenous families (UNICEF, 2009). To work towards equitable status for Indigenous peoples requires a greater understanding of contexts and issues by health and social service providers. Indigenous Leaders and Campaign 2000 note that Indigenous poverty must be addressed through a separate and distinct poverty reduction strategy in coordination and partnership with Indigenous communities. In addition, efforts should be made to provide training programs designed to increase empathy and understanding among health and social service providers.

Different solutions are required to support other marginalized groups who have high rates of poverty such as immigrants and refugees, parents and/or children with disabilities, single parent families, etc.

> "Continuously see communities changing… their needs change, so we need up to date information on who is living in our neighbourhoods that might need service, and what kind of services they need. "

Service Provider

Program Examples

The following program examples provide insights into the creative and wide-ranging responses to child poverty that are offered in Ontario and across Canada. This list is only a small sample to demonstrate the variety of possible approaches – from policy change to providing winter clothing.

Canadian Child Tax Benefit

The Child Tax Benefit has the potential to lift many families out of poverty, and improve the health and wellbeing of children living in those families. Service providers can help to ensure families understand that they need to complete their income tax form to receive this benefit. For more information visit: www.cra-arc.gc.ca/benefits

Vancouver Living Wage

In September of 2016, the Mayor and Council of the City of Vancouver implemented a living wage for all contracts and direct staff at the City of Vancouver, the Vancouver Public Library and the Vancouver Police Department.

The Living Wage for Families Campaign defines a living wage as the amount of income needed to cover basic living expenses, including food, clothing, rental housing, childcare, transportation and small savings to cover illness or emergencies. The calculation is based on a two-parent family with two children – and each parent working full-time.

> *"Implementing a living wage is a small cost for a big impact in the lives of low-wage workers and contractors who will breathe a little easier at the end of the month."*
>
> *Living Wage for Families*

The Hamilton Roundtable for Poverty Reduction

The Hamilton Roundtable for Poverty Reduction was formed in 2005. Its membership comes from across Hamilton and includes leaders from business, non-profit, government, education and faith communities as well as individuals with lived experience of poverty. Their goal is to reduce and eliminate poverty while "Making Hamilton the Best Place to Raise a Child."

The Hamilton Roundtable works for change on three different levels: reducing poverty for individuals and families; working differently – and together – as a community; and stimulating policy changes to promote prosperity and reduce poverty. Their role is:

- Promote a strategic poverty focus.
- Foster broad community engagement.
- Leverage change and action.
- Ensure learning, communication and accountability.

For more information visit: hamiltonpoverty.ca

Poverty: A Clinical Tool for Primary Care Providers

The Centre for Effective Practice and the College of Family Physicians of Canada developed a tool that can be used by physicians to identify patients living in poverty. The tool can be used to screen all patients, consider higher risk groups (including women, immigrants, Indigenous people and LGBTQ), support patients to access government benefits, and connect them with resources and services.

All service providers can use this tool to guide their interactions with their clients. Adapt it to your service/program and include it in your orientation manual for all staff. Ask the simple question, "Do you ever have difficulty making ends meet at the end of the month?" The response has a sensitivity of 98% and specifity of 64% in identifying individuals living below the poverty line. It can be incorporated into the assessment of a client. For more information visit: ocfp.on.ca/cpd/povertytool

Kingston Community Health Centres – Breastfeeding Families

In 2015, Kingston Community Health Centres received a small grant to develop a breastfeeding peer support program for mothers with limited incomes. The program was established through Better Beginnings for Kingston Children. Breastfeeding peer support volunteers were recruited from North Kinston and, once trained, the volunteers reached out to women through prenatal classes, one-on-one matches, groups and events.

With a group of trained and dedicated volunteers and the support from the organization, the program was sustained well beyond the funding period. Breastfeeding Families meets the needs of areas in Kingston known to have lower rates of breastfeeding. For more information visit: www.kchc.ca/whats-new/breastfeeding-peer-support-program

To learn more about strategies like peer and professional support that are promising with women from lower socioeconomic backgrounds, please view Fact Sheet 2: Breastfeeding and Socioeconomic Status and other breastfeeding resources available at www.beststart.org

Service providers working directly with vulnerable families have an important role to play in promoting breastfeeding. In fact, a number of professional associations such as the Canadian Nurses Association, the Canadian Association of Midwives, the Canadian Paediatric Society, the Canadian Pharmacists Association and the College of Family Physicians of Canada have voiced their support for breastfeeding and recognize the role that health care and other allied health professionals play in supporting breastfeeding.

For information about the allowance for Ontario social assistance recipients to help cover the costs of additional food and nutritional supplements associated with breastfeeding, go to: www.mcss.gov.on.ca/en/mcss/programs/social/directives/index.aspx

Putting an End to Child & Family Homelessness in Canada (2016) – Raising the Roof

Community agencies deal with complex issues, and often lack sufficient funding and supports to deal with the demands and needs of their clients. Many agencies would like to work together and yet struggle with the competition for funding or donations.

Local systems of care can help to focus on providing coordinated supports for clients, for example:

- Develop a common intake form with a shared database. Clients do not need to repeat their stories, and agencies can work together to holistically meet the clients' needs.
- Support the development of a coordinated access centre/access point. This offers centralized intake of clients and referrals to the most relevant agencies. Intake teams could be staffed by workers from various services.
- Provide cross-sectoral training to other agencies. Every organization has its strengths. Share the promising practices and skills from one organization with others.
- Plan joint fundraising activities to support specific projects that cross agencies and client groups.

For more information visit: www.raisingtheroof.org/wp-content/uploads/2016/02/CF-Report-Recommendations.pdf

Aisling Discoveries Family Play Mobile

Aisling Discoveries Child and Family Services Centre provides a wide array of programs and services for individuals, families and groups in the former Scarborough and East York areas of Toronto. Through fundraising, Aisling has been able to purchase a van, named The *Family Play Mobile,* retrofitted with shelving and stocked with books, craft materials and toys that promote healthy development of children.

The van is staffed by trained professionals, who visit various shelters where families experiencing homelessness are living. They provide parenting education and support to promote family interactions through joint play. Since children living in the shelters often arrive with few belongings, the mobile library offers an opportunity for the parents to access toys, craft materials, etc. The items from the van are lent or donated to the families, so there is always a need for donations of toys, games, books, electronics and crafts as well as monetary donations. For more information visit: aislingdiscoveries.ca/section/family-play-mobile

Operation Snowsuit – Renfrew County Child Poverty Action Network

Operation Snowsuit is one of the many programs offered by Renfrew County Child Poverty Action Network. The goal of *Operation Snowsuit* is to provide good and decent winter clothing that will enable all children to participate in outdoor activities, regardless of their family's financial status.

Through the community's combined efforts, *Operation Snowsuit* collects gently used and new snowsuits, boots, hats and gloves from schools, churches, businesses, etc. Bell Canada employees pick up at locations across Renfrew County. Giant Tiger (Pembroke) donates warehouse space where volunteers sort, hang and repack items to fill requests. All items are checked thoroughly so that only good quality items are received by families. Volunteers transport the orders to the nearest partner agency for distribution to the families.

This program gets a steady stream of donations and funds from the general public and businesses, as well as media coverage. This is truly a program in the community, by the community, for the community. It ensures that all children have appropriate winter clothing that will keep them warm and dry. It also helps to ensure that all children will be socially included regardless of their family income. For additional information about Renfrew County Child Poverty Action Network please visit: www.renfrewcountycpan.ca

Wraparound for Homeless Young Families

The Wraparound process is an innovative approach that mobilizes the community to find solutions that will improve the quality of life for children, youth and families with complex problems.

Oolagen Youth Services is home to the Wraparound for Homeless Young Families project funded by the City of Toronto. This project helps high-risk young parents (25 years and under) and their children transition from shelters or inappropriate accommodation to stable housing. Using the Wraparound model, housing needs are addressed as well as other areas that can negatively impact securing stable housing (such as addictions, violence in the family or medical concerns). For more information visit: www.skylarkyouth.org/about-us/who-we-are/.

Eye See... Eye Learn®

Eye See…Eye Learn is an initiative of the Ontario Association of Optometrists, with some funding from the Government of Ontario, to raise awareness that every student starting junior kindergarten should have a comprehensive eye exam. If needed, the child will be provided a complimentary pair of glasses. This initiative provides a good foundation for children starting school. For more information visit: www.optom.on.ca/OAO/ESEL/AboutESEL.aspx

Model Schools for Paediatric Health Initiative

The Model Schools for Paediatric Health Initiative is a three-way partnership between the Toronto District School Board Model Schools for Inner Cities program, local health agencies, and the Toronto Foundation for Student Success that provides health care to students in priority neighbourhoods. Under this partnership, comprehensive medical services including assessment, diagnosis, management and follow-up care are provided. The intent is to eliminate health gaps and accessibility barriers to health care in low-income communities so that the health needs of inner-city students can be met and their educational paths can be improved.

Despite the existence of a universal health system in Ontario, there are multiple barriers to health care services. This initiative has been able to offer more accessible, timely, thorough and holistic health care for students from underserved communities, who might have otherwise have been unable to access needed services. For more information visit: www.tdsb.on.ca/Portals/research/docs/reports/MSPHI%20Phase%20IV%20Research%20Today %20June%202015%202016.pdf

Low Income Transit Pass

Ottawa residents with low incomes have access to an affordable monthly transit pass, which came into effect April 2017. The pass costs about half of a regular adult monthly pass and expires in one or two years depending on their eligibility. For more information visit: www.octranspo.com/tickets-and-passes/coming_this_spring_equipass

Schools

Schools are addressing the inequities often associated with poverty by providing professional development on issues related to poverty such as understanding the context in which students and families live, ways to avoid stereotyping, how to engage families and ideas to forge community partnerships. For more information visit: www.edu.gov.on.ca/eng/literacynumeracy/inspire/research/WW_MindsetPractice.pdf

Supportive Housing

Young Parents No Fixed Address is a network of agencies and organizations dedicated to building strong community partnerships to address the challenges for homeless/street involved, pregnant, and parenting youth and their children. The network began in 1997 and has responded to many barriers faced by young families, for example:

- *1900 Sheppard – a community for young mothers* addresses the complex needs of young parents. Managed by Humewood House in cooperation with Toronto Community Housing Corporation, this program offers one or two bedroom apartments for young mothers and their children with on-site programming and supports, including a young parent resource centre. This project grew out of the network's recognition that there is a need for a range of housing options for young parents that include parenting, education and other supports. Regular programs are offered for the tenants and young families in the community.

- *Respite Care Program*, run by the June Callwood Centre for Women and Families, offers overnight respite care. Generally, placements are from three to five days, but in emergency situations, longer placements can be arranged. This allows young parents to have a weekend off, search for housing, obtain medical care or move. For more information visit: www.ypnfa.com

Better Beginnings, Better Futures - Early Childhood Development

Better Beginnings, Better Futures is designed to prevent young children in low income, high-risk neighbourhoods from experiencing poor developmental outcomes. They offer toolkits, videos and resources of interest for service providers, parents and children on topics such as finance, child development and engaging communities. To learn more about their programs for families in the 8 communities in Ontario visit: http://bbbf.ca

Kid Sport Ontario

KidSport™ is a grass roots Canadian non-profit organization that provides support to under-resourced children and youth. The provincial office provides resources and support to ensure that every family in the province can apply for assistance so that no child is left watching from the sidelines simply because their family could not afford the cost to play. To find out if there are services in your community visit: www.kidsportcanada.ca/ontario/about-kidsport-ontario

Ending Poverty Starts Locally – Municipal Recommendations for Poverty Reduction

In 2017, the Federation of Canadian Municipalities (FCM) submitted broad recommendations regarding a national strategy to reduce poverty. One recommendation was to ensure a dialogue among municipal, provincial and federal governments to improve how housing, food bank and childcare services are funded and delivered. For more information visit: https://fcm.ca/Documents/issues/Poverty_Reduction_EN.pdf

Ontario College of Family Physicians Poverty and Health Committee

They created tools to help primary care providers identify and support patients experiencing poverty. *The Child Poverty, A practical tool for primary care* provides questions to ask families and a list of resources to address child poverty:

- ❏ Do you have trouble making ends meet?
- ❏ Do you have trouble feeding your family?
- ❏ Do you have trouble paying for medications?
- ❏ Do you receive the child tax benefit?
- ❏ Do you have legal or immigration challenges?
- ❏ Do you have a safe and clean place to live?

To learn more, visit: http://ocfp.on.ca/docs/default-source/cme/child-poverty---a-practical-tool-for-primary-care-2013.pdf?sfvrsn=998e489_4

Visit also the Ontario College of Family Physicians Poverty website http://ocfp.on.ca/cpd/povertytool for information on handouts for families such as *Patients Income Brochure* and *Patient Brochure on Income Supports*, a video describing the poverty tool, a 211 video to learn about community resources, a resource addressing the underlying social conditions that lead to poor health and more.

7 Caring for Staff

Working with families living in poverty can be both highly rewarding and extremely stressful. Staff can feel overwhelmed, fatigued and helpless. The stress of dealing with the immediate and ongoing complex needs of families, combined with job demands, lack of time and budget, and limits of mandates, leads to increased risks for service providers.

Service providers generally choose this type of work because they care deeply about children and families. In their ongoing inter-actions with clients, close connections can be formed between service providers and their clients. This relationship can expose workers to long hours and the distress and pain experienced by parents and children, yet is strengthened through empathy and a desire to alleviate pain and suffering. Service providers feel the burden of being unable to provide the services that their clients need. Furthermore, service providers may not be able to leave their concerns about children and families at work.

Secondary trauma is the term used to describe what happens when we hear about or see a traumatic event. Even if a person is not directly involved in the traumatic event, there are consequences to hearing about or viewing a traumatic event. Service providers who work with children and families living in poverty hear difficult life stories and situations on a regular basis. Nurses and physicians, emergency personnel, child protection staff and front line workers who service vulnerable families can all be deeply affected by what they see and hear. Signs of secondary trauma can include anger, anxiety, depression, sadness, low self-esteem, emotional exhaustion, trouble making decisions, difficulty concentrating, difficulty remembering things, fatigue, headaches or body aches, changes in sleep habits, changes in eating habits, increase in addictive behaviours and/or withdrawing from others.

Some people view secondary trauma as a sign of weakness. Instead, it is a sign that staff are very concerned about the families they work with, but feel unable to meet their critical needs. It is normal to be affected by the trauma of others. Service providers will be affected by difficult situations of individual families, as well as by trying to meet complex needs on an ongoing basis. As a result, the question is not whether stress will appear because of this exposure, but *to what extent* (Wicks, 2006).

There are a number of options to help organizations manage the stress that goes along with this work:

- Regular training events on working with families who live in poverty.
- Professional development on vicarious trauma for managers and front-line staff.
- Positive guidance and support for staff.
- Awareness of referral services and supports for families.
- Policies that recognise the stressful nature of the work.
- Clear boundaries and limit setting with staff.
- Strategies to help staff cope with stressful events.
- Opportunities for staff to debrief or discuss cases.
- Use of reflective supervision.
- Diverse and balanced caseloads.
- Demonstration of appreciation for staff.
- Building in humor and fun.

Besides having protective factors at the organization level, service providers can reflect on how they can build individual protective factors. There are a number of individual options to consider when managing the stress that goes along with working with families living poverty:

- Build self-awareness.
- Know your strengths and limits.
- Ask for help and support.
- Establish work-life balance.
- Set limits at work and at home.
- Connect with others and build healthy relationships.
- Learn and grow.
- Practice self-care such as exercising and eating well.
- Ensure you take time for family, friends, hobbies and fun activities.
- Be optimistic.

Best Start Resource Centre offers a manual to assist service providers working with families with young children: *When Compassion Hurts – Burnout, Vicarious Trauma and Secondary Trauma in Prenatal and Early Childhood Service Providers* available at: www.beststart.org/resources/howto/pdf/Compassion_14MY01_Final.pdf.

Resources for Service Providers

The section provides information for service providers working with families living in poverty. The resources cover policy, health, education, food security, poverty reduction and more. There is also a section for resources for families.

Education

Early Development Instrument (EDI)

From Results to Action Survey Report that presents information obtained from the EDI influenced changes in communities geared towards helping young children.
edi.offordcentre.com/wp/wp-content/uploads/2015/06/EDI_to_Action_Survey_Report.pdf

Early Years Study 2: Putting Science into Action

Published by the Council for Early Child Development
earlylearning.ubc.ca/media/publications/early_years_study_2.pdf

Elementary Teachers' Federation of Ontario

Poverty and Education Symposium: *What Teachers Can Do to Help All Students Succeed—and Why They Must.*
http://etfovoice.ca/node/259/page/0/2; http://etfovoice.ca/node/236

Poverty and Inequality: A Report from People for Education

An excerpt from the 2012 Annual Report on Ontario's Publicly Funded Schools.
www.edu.gov.on.ca/eng/literacynumeracy/inspire/research/ww_mindsetpractice.pdf

Poverty and Schooling: Where Mindset Meets Practice

A series of articles produced by the Literacy and Numeracy Secretariat and the Ontario Association of Deans of Education.
www.edu.gov.on.ca/eng/literacynumeracy/inspire/research/ww_mindsetpractice.pdf

Supporting Education, Building Canada, Background Material for Parliament and Staff, 2009

Find recommendations by the Canadian Teachers' Federation on the prevalence of child poverty in Canada, its effects inevitably get played out in schools and classrooms.
www.ctf-fce.ca/Research-Library/FINAL_Hilldayleavebehind_eng.pdf

Health and Well-being

Canadian Index of Wellbeing (CIW)

Identifies key leverage points that have a positive impact on wellbeing across several domains.
uwaterloo.ca/canadian-index-wellbeing

Encyclopedia on Early Childhood Development

This resource includes a section titled: *Low income and pregnancy – How can we help children in low income families?*
www.child-encyclopedia.com/low-income-and-pregnancy

Health Nexus

Find information on health equity, health equity impact assessment (HEIA), inclusion, poverty and social determinants of health.
http://en.healthnexus.ca/topics-tools/health-equity-topics

Ontario Drug Benefit: Trillium Drug Program

Program intended for people who have a valid Ontario health card and who have high prescription drug costs in relation to their net household income.
www.ontario.ca/page/get-help-high-prescription-drug-costs

Ontario Health Profiles

Information for planning to reduce health inequalities.
www.ontariohealthprofiles.ca

Inequality

Health Equity

Offers information on health equity and groups at risk.
http://en.healthnexus.ca/topics-tools/health-equity-topics/health-equity

Income Inequality - The Gap between Rich and Poor

Explores some key terms of inequality, recent trends, growing gaps, consequences and policies for addressing inequality.
www.oecd-ilibrary.org/docserver/download/0115391e.pdf?expires = 1496079149&id = id&acc-name = guest&checksum = 2B4B54D8FB5CB31B4B50CFD494022626

Nutrition

FoodNet

Information about food security programs, policy and research initiatives, community action and advocacy efforts. foodnetontario.ca

Heart and Stroke Foundation

Information about access to affordable, healthy and nutritious food. www.heartandstroke.ca/-/media/pdf-files/canada/2017-position-statements/accessto-affordable-healthy-nutritiousfoods-ps-eng.ashx?la = en

Ontario Food and Nutrition Strategy

Discusses how to strengthen Ontario's food systems and improve the health and well-being of Ontarians. https://sustainontario.com/custom/uploads/2017/01/PCC_1939_OFNS_Draft_WEB_AODA.pdf

PROOF

Identifies effective policy approaches to reduce household food insecurity. http://proof.utoronto.ca

Toronto Food Policy Council

Success stories and research in the areas of food and hunger action, health, economic development, community gardens, and other areas. tfpc.to

Poverty Reduction

Campaign 2000

Increases public awareness of the levels and consequences of child and family poverty by publishing report cards on child poverty, researching the indicators of child poverty, discussion papers, and through developing public education resources. campaign2000.ca

Canadian Poverty Hub

Online resource for accessible research, policies, and best practices related to the causes and impacts of poverty. www.povertyinstitute.ca

Canada Social Report: Poverty reduction strategy summary, Ontario

Summarizes the 2016 poverty reduction strategies. www.canadasocialreport.ca/PovertyReductionStrategies/ON.pdf

Canada Without Poverty

Addresses the structural causes of poverty, such as public policies that advance or constrain the social and economic development of individuals, families and communities. www.cwp-csp.ca

Colour of Poverty

Works to build community based capacity to address the growing racialization of poverty and the resulting increased levels of social exclusion and marginalization of racialized communities in Ontario.
colourofpoverty.wordpress.com/about-the-colour-of-poverty

Counting Rural Women In – A Tool Kit for Rural Action on Poverty

Provides strategies and tools to build a deeper understanding of rural poverty and to engage women, service providers, municipalities, and rural communities in action to reduce and end rural poverty.
www.ccednet-rcdec.ca/en/toolbox

Dignity for All

A campaign for action by the federal government to combat the structural causes of poverty in Canada. www.dignityforall.ca

Hamilton Roundtable for Poverty Reduction

Aims to reduce and eliminate poverty through the aspiration of making Hamilton the best place to raise a child. The web site provides information about tackling poverty in Hamilton.
hamiltonpoverty.ca

Health Providers Against Poverty

Offers resources, facts, clinical tools, etc. healthprovidersagainstpoverty.ca

Ontario College of Family Physicians

Facilitates the exchange of poverty and health resources and best practices. Online tools such as:
- Poverty – A Clinical Tool for Primary Care Providers
- The Best Advice Guide: Social Determinants of Health
- Child Poverty – A Practical Tool for Primary Care
- Ontario Tax Credits and Benefits for Patients with Low Income
- Poverty Intervention Resources

ocfp.on.ca/cpd/povertytool

Ontario's Poverty Reduction Strategy

Aims to create a province where every person has the opportunity to achieve his or her full potential and contribute in a prosperous and healthy Ontario. www.ontario.ca/page/realizing-our-potential-ontarios-poverty-reduction-strategy-2014-2019

Ontario's Social Assistance Poverty Gap, 2016

Policies to reduce poverty and to improve income security for both children and adults.
www.policyalternatives.ca/publications/reports/ontarios-social-assistance-poverty-gap

Poverty Free Ontario

Strives to eliminate divided communities in which large numbers of adults and children live in chronic states of material hardship, poor health and social exclusion. www.povertyfreeontario.ca

Poverty Reduction of Muskoka Planning Team (PROMPT)

A network of local individuals, agencies, and groups that have mobilized around poverty reduction in the District of Muskoka.
www.muskoka.on.ca/en/community-and-social-services/Poverty-Reduction-of-Muskoka-Planning-Team.aspx

Raising the Roof, Long-term Solutions for Canada's Homeless

Child and family homelessness recommendations.
www.raisingtheroof.org/wp-content/uploads/2016/02/CF-Report-Recommendations.pdf

The Canadian Coalition for the Rights of Children (CCRC)

Specific focus on children and recommendations for Canada's Poverty Reduction Strategy such as community programs and youth participation. rightsofchildren.ca

The Poverty Lens

An online tool to help your organization reflect on how current programs and services, policies and procedures and organizational culture and awareness support clients.
www.cyhneo.ca/poverty-lens

Renfrew County Child Poverty Action Network (CPAN)

A grassroots network that works together to improve the lives of children and families that live in poverty. www.renfrewcountycpan.ca

UNICEF, Innocenti Report Card 14, Children in the Developed World

An assessment of child well-being across 41 countries of the European Union and the Organisation for Economic Co-operation and Development.
www.unicef.ca/sites/default/files/2017-06/UNICEF%20Innocenti%20Report%20Card%2014%20EN.pdf

Wellesley Institute

Research and policies to improve health and health equity in the greater Toronto area through action on the social determinants of health. www.wellesleyinstitute.com

Why am I Poor – First Nations Child Poverty in Ontario

Best Start Resource Centre manual providing a hard look at the lived experiences and outcomes of First Nations children in Ontario who are poor, the factors that drive First Nations child poverty and the ways that service providers can make a difference. www.beststart.org/cgi-bin/commerce.cgi?search=action&category=G00E&advanced=yes&sortkey=sku&sortorder=descending

Policy and Advocacy

Canadian Council on Social Development

Focuses on issues such as poverty, social inclusion, disability, cultural diversity, child well-being, employment and housing. It provides statistics and facts on families and economic security. www.ccsd.ca

Conference Board of Canada

Learn how Canada performs benchmark against 15 counties. www.conferenceboard.ca/hcp/details/society/child-poverty.aspx

Growing Gap

Strives to increase public awareness about the spread of income and wealth inequality in Canada. www.growinggap.ca

Income Security Advocacy Centre

Advocates for and seeks legal remedies to address systemic issues and improve income security for people in Ontario. incomesecurity.org

Vibrant Communities

Links communities across Canada in a collective effort to test the most effective ways to reduce poverty at the grassroots level. vibrantcanada.ca

Vital Signs

Measures the vitality of communities, identifies trends, and shares opportunities for action in at least 10 areas critical to quality of life. www.vitalsignscanada.ca

Social Determinants of Health

Social Determinants of Health

Defines the social determinants of health. http://en.healthnexus.ca/topics-tools/health-equity-topics/social-determinants-health

Social Determinants of Health: The Canadian Facts

The publication outlines the determinants of health and awareness that health is shaped by how income and wealth is distributed. www.thecanadianfacts.org

Resources for Parents

The following resources can be used by service providers to assist parents in accessing services and supports.

Financial

Are you eligible and do you want to apply for benefits?

Includes Canada child benefit, goods and services tax/harmonized sales tax (GST/HST) credit, related provincial and territorial programs, working income tax benefit, other federal programs and a child benefits calculator. www.cra-arc.gc.ca/benefits

Canada Benefits

Customized list of benefits. www.canadabenefits.gc.ca

Canada Child Benefit Explained

A video about the Canada Child Benefit.
www.canada.ca/en/employment-social-development/campaigns/canada-child-benefit.html

Ontario Benefits

Learn tax credits to help people with living costs.
www.ontario.ca/taxes-and-benefits/taxes-and-benefits

Ontario Electricity Support Program

Help for lower-income households to reduce the cost of household electricity by applying a monthly credit directly to their bill. https://ontarioelectricitysupport.ca

Social assistance in Ontario

Links to helpful resources on social assistance.
www.mcss.gov.on.ca/en/mcss/programs/social/links.aspx

Take care of your income! A better income can improve your health.

A brochure on tax credits and other benefits to assist families.
ocfp.on.ca/docs/default-source/poverty-tool/patients-income-brochure-handout9DA437B42E1C.pdf?sfvrsn=2

Community

211 Ontario

A helpline and online database of community and social services in each region of Ontario.
Call 211 or toll free 1-877-330-3213 or visit 211ontario.ca

Canadian Association of Family Resource Programs

Find a directory of family resource programs across Canada.
1-866-637-7226 or visit
www.parentsmatter.ca/index.cfm?fuseaction = Page.viewPage&pageId = 602

Community Action Program for Children (CAPC)

Community-based children's program that promotes the healthy development of young children
(0-6 years). http://capc-pace.phac-aspc.gc.ca

EarlyON Child and Family Centre

Free drop-in programs for caregivers and children from birth to 6 years old.
You can learn and play with your child, meet people or get advice.
www.ontario.ca/page/find-earlyon-child-and-family-centre

Income Security Advocacy Centre

Learn about recent changes in major income supports. www.incomesecurity.org

Public Health Units

Find the nearest health unit and services offered in your community.
1-800-267-8097; www.health.gov.on.ca/en/common/system/services/phu/locations.aspx

Service Canada

A single point of access to a wide range of government services and benefits.
www.servicecanada.gc.ca

Your Legal Rights

Information on social assistance, housing, health, family law, etc., in many languages.
www.yourlegalrights.on.ca

Nutrition

Healthy Grocery Shopping on a Budget

Tips for smart spending at the grocery store. www.foodbankscanada.ca/getmedia/86cb2cb7-a23d-44ae-81c1-4362a1d51b22/fbc_Grocery-shopping-on-a-budget_en---FINAL.pdf.aspx?ext = .pdf

Health benefits: Pregnancy and Breastfeeding Nutritional Allowance Canada

If receiving Ontario Disability Support Program Income Support and you or a family member is either pregnant or breastfeeding, you may be able to get assistance with your nutrition-related costs. www.mcss.gov.on.ca/en/mcss/programs/social/odsp/income_support/odsp_pregnancy.aspx

Prenatal Nutrition Program (CPNP)

Provides support to pregnant women, and new mothers and their infants who are facing challenging life circumstances including poverty. http://cpnp-pcnp.phac-aspc.gc.ca

References

Blackstock, C. (2005). Same Country: Same Lands; 78 Countries Away. *First Peoples Child and Family Review*, 2(1). Retrieved from http://journals.sfu.ca/fpcfr/index.php/FPCFR/article/view/131

BORN Ontario. (2015). *Breastfeeding data for 2013/14* [Data set]. Retrieved from www.bornontario.ca

Campaign 2000. (2016). *A Road Map to Eradicate Child and Family Poverty: 2016 Report Card on Child and Family Poverty in Canada*. Retrieved from http://campaign2000.ca/report-cards/national

Canada Mortgage and Housing Corporation. (2016). *What Is Core Housing Need?* Retrieved from www.cmhc-schl.gc.ca/en/hoficlincl/observer/observ-er_044.cfm

Canada Without Poverty. (2017). *The Cost of Poverty*. Retrieved from www.cwp-csp.ca/poverty/the-cost-of-poverty

Canadian Council on Social Development. (2006). *The Progress of Canada's Children and Youth 2006*. Retrieved from http://www.ccsd.ca/resources/ProgressChildrenYouth/pdf/pccy_2006.pdf

Canadian Council on Social Development. (2008). *Growing Up in North America: The Economic Well-Being of Children in Canada, the United States, and Mexico*. Retrieved from www.ccsd.ca/images/research/Publications/PDF/EconomicWellBeingChildren_2008en.pdf

Canadian Index of Wellbeing. (2016). *How are Canadians Really Doing? The 2016 CIW National Report*. Retrieved from https://uwaterloo.ca/canadian-index-wellbe-ing/sites/ca.canadian-index-wellbeing/files/uploads/files/ciw2016-howare-canadiansreallydoing-1994-2014-22nov2016.pdf

Chau, S., Fitzpatrick, A., Hulchanski, J. D., Leslie, B., & Schatia, D. One in Five… Housing as a Factor in the Admission of Children to Care. In J. D. Hulchanski, P. Campsie, S. Chau, S. W. Hwang & E. Paradis (Eds.) (2009). *Finding Home: Policy Options for Addressing Homelessness in Canada*. Retrieved from www.homelesshub.ca/FindingHome

Children's Aid Society of Toronto. (2008). *Greater Trouble in Greater Toronto: Child Poverty in the GTA*. Retrieved from http://campaign2000.ca/wp-content/uploads/2016/03/GreaterTroubleGreaterTorontoDec2008.pdf

Children's Aid Society of Toronto, Colour of Poverty – Colour of Change, Family Service Toronto/Ontario Campaign 2000, & Social Planning Toronto. (2016). *Divided City: Life in Canada's Child Poverty Capital, 2016 Toronto Child and Family Report Card*. Retrieved from www.citynews.ca/wp-content/blogs.dir/sites/10/2016/11/14/CAST-2016-report-v8-web.pdf

Collaborative Leadership in Practice. (2016). *Collaborative Leadership in Practice*. Retrieved from www.clip-lcp.org

Community Social Planning Council of Toronto, University of Toronto's Social Assistance in the New Economy Project & The Wellesley Institute. (2009). Sick and Tired: *The Compromised Health of Social Assistance Recipients and the Working Poor in Ontario*. Retrieved from www.wellesleyinstitute.com/wp-content/uploads/2011/11/sickandtiredfinal.pdf

Conference Board of Canada. (2009). *Child Poverty*. Retrieved from www.conference-board.ca/HCP/Details/society/child-poverty.aspx

Daily Bread Food Bank. (2011). *Ontario Deprivation Index*. Retrieved from www.dailybread.ca/learning-centre/ontario-deprivation-index/

de Boer, K., Rothwell, D. W. & Lee, C. (2013). *Child and Family Poverty in Canada: Implications for Child Welfare Research.* Retrieved from cwrp.ca/infosheets/child_poverty

Dilworth, C., & Dilworth, T. (2006). *Literature Review: Poverty, Homelessness and Teenage Pregnancy*. Retrieved from www.urbancentre.utoronto.ca/pdfs/elibrary/HLN-Pov-Teen-Pregnancy_Lit_Review_2006.pdf

Engle, P. L., & Black, M. M. (2008). *The Effect of Poverty on Child Development and Educational Outcomes*. Retrieved from http://digitalcommons.calpoly.edu/cgi/viewcontent.cgi?article = 1002&context = psycd_fac

Fernald, A., Marchman, V. A. & Weisleder, A. (2013). SES differences in language processing skill and vocabulary are evident at 18 months. *Developmental Science*, 16(2), 234–248. http://dx.doi.org/10.1111/desc.12019

Food Banks Canada. (2016). *Hunger Count 2016*. Retrieved from www.foodbankscanada.ca/hungercount2016

Government of Canada. (2004). *A Canada Fit for Children: Canada's Plan of Action in Response to the May 2002 United Nations Special Session on Children*. Retrieved from http://canadiancrc.com/Canadian_governments_plan_2004_en.aspx

Government of Canada. (2016). *Towards a Poverty Reduction Strategy – Discussion Paper*. Retrieved from www.canada.ca/en/employment-social-development/programs/poverty-reduction/discussion-paper.html

Government of Ontario. (2008). *Breaking the Cycle: Ontario's Poverty Reduction Strategy*. Retrieved from www.children.gov.on.ca/htdocs/English/documents/breakingthecycle/Poverty_Report_EN.pdf

Government of Ontario. (2014). *Realizing Our Potential: Ontario's Poverty Reduction Strategy (2014-2019)*. Retrieved from www.ontario.ca/page/realizing-our-potential-ontarios-poverty-reduction-strategy-2014-2019-all

Gupta, R. P.-S., de Wit, M. L. & McKeown, D. (2007). The impact of poverty on the current and future health status of children. *Paediatrics & Child Health*, 12(8), 667–672. https://doi.org/10.1093/pch/12.8.667

Gutman, L., Brown, J. & Akerman, R. (2009). *Nurturing Parent Capability: The Early Years.* Retrieved from eprints.ioe.ac.uk/2051/1/Gutman2009Nuturing.pdf

Hertzman, C. & Bertrand, J. (2007). Children in poverty and the use of early development instrument mapping to improve their worlds. *Paediatric Child Health*, 12(8), 687-692. https://doi.org/10.1093/pch/12.8.687

Irwin, L., Siddiqi, A. & Hertzman, C. (2010). The Equalizing Power of Early Child Development: From the Commission on Social Determinants of Health to Action. *Child Health & Education*, 2(1), 3-18. Retrieved from www.who.int/social_determinants/resources/ecd_kn_report_07_2007.pdf

Janus, M. & Duku, E. (2007). The school entry gap: Socioeconomic, family, and health factors associated with children's readiness to learn. *Early Education and Development Journal*, 18(3), 375-403. https://doi.org/10.1080/10409280701610796a

Kersetter, S. (2009). *The Affordability Gap: Spending Differences between Canada's Rich and Poor*. Retrieved from www.policyalternatives.ca/publications/reports/affordability-gap

Larson, C. (2007). Poverty during pregnancy: Its effects on child health outcomes. *Paediatric Child Health*, 12(8), 673–677. https://doi.org/10.1093/pch/12.8.673

Letourneau, N., Hunger, K. & Fisher, K. (2005). Low-income Canadian Aboriginal and Non-Aboriginal Parent Child Interactions. *Child: Care, Health & Development*, 31(5), 545–554. Retrieved from childstudies.ca/sites/default/files/cch_549.pdf

Mani, A., Mullainathan, S., Shafir, E. & Zhao, J. (2013). Poverty Impedes Cognitive Function. *Science, 341*(6149), 976-980. https://doi.org/10.1126/science.1238041

McCain, M., Mustard, J. & Shanker, S. (2007). *Early Years Study 2: Putting Science into Action*. Retrieved from http://earlylearning.ubc.ca/media/publications/early_years_study_2.pdf

Melchior, M., Caspi, A., & Howard, L. (2009). Mental Health Context of Food Insecurity: A Representative Cohort of Families with Young Children. *Pediatrics, 124*(4), e564-e572. Retrieved from http://pediatrics.aappublications.org/content/124/4/e564.short

Millar, C., Lafrenière, A., Lebreton, J. & de Quimper, C. (2016). *Our Kids, Their Story... Snapshot of Developmental Health at School Entry in Ottawa 2005-2015*. Retrieved from www.parentresource.ca/download.php?d = bhHe2l75mhQGzVsohTuUkqimueTpvC5DyiOl3i27g-slash-GK-slash-n2L9GxQy7IsMQCFQ6AJ49-plus-lEwVVlwu3GFSBS5-slash-OTw-equals--equals-&ts = 1478166730&f = 61

National Council of Welfare. (2009). *A Snapshot of Children Living in Poverty*. Retrieved from www.cwp-csp.ca/wp-content/uploads/2011/07/2009-A-Snapshot-of-Children-Living-in-Poverty-NCW1.pdf

Offord Centre for Child Studies. (2016). *Early Development Instrument*. Retrieved from edi.offordcentre.com/about

Ontario Association of Food Banks. (2008). *The Cost of Poverty: An Analysis of the Economic Cost of Poverty in Ontario*. Retrieved from www.oafb.ca/assets/pdfs/CostofPoverty.pdf

Ontario Association of Food Banks. (2016). *Hunger Report 2016*. Retrieved from oafb.ca/hunger-report

Ontario Campaign 2000. (2016). *The Time to Act is Now: Ontario Children Can't Wait: 2016 Report Card on Child and Family Poverty in Ontario*. Retrieved from http://campaign2000.ca/wp-content/uploads/2016/11/ReportCardOntarioNov182016.pdf

Ontario College of Family Physicians. (2016). *Poverty: A Clinical Tool for Primary Care Providers*. Retrieved from ocfp.on.ca/cpd/povertytool

Ontario Non-Profit Housing Association (ONPHA). (2016). *Waiting Lists Survey Report: ONPHA's Final Report on Waiting List Statistics for Ontario*. Retrieved from http://qc.onpha.on.ca/flipbooks/WaitingListReport/files/assets/basic-html/page-1.html#

Ontario Prevention Clearinghouse. (2006). *Inclusion: Societies that Foster Belonging Improve Health*. Retrieved from www.ohpe.ca/volume/2006

Ontario Public Health Association. (2007). *Breastfeeding Position Paper*. Retrieved from www.opha.on.ca/Resource-Documents/Breastfeeding-Position-Paper.aspx

Organisation for Economic Co-operation and Development. (2008). *Growing Unequal? Income Distribution and Poverty in OECD Countries*. Retrieved from www.oecd.org/document/53/0,3343,en_2649_33933_41460917_1_1_1_1,00.html

Ottawa Parent Resource Centre. (2017). *Research on Local Child Outcomes*. Retrieved from www.parentresource.ca/en/ottawaprc/Early_Development_Instrument_p562.html

Patterson, C. & Goldberg, A. (2016). *Lesbian and Gay Parents and Their Children*. National Council on Family Relations. Retrieved from www.ncfr.org/sites/default/files/2017-01/ncfr_policy_brief_november_final.pdf

Provincial Working Group of Nipissing District. (2008). *Poverty Reduction in Nipissing District: Perspectives and Priorities*. Retrieved from www.povertywatchontario.ca/downloads/PCWG_POVERTY_REPORT_2008.pdf

Ryan, B. (2003). *A New Look at Homophobia and Heterosexism in Canada*. Canadian Aids Society. Retrieved from www.rainbowhealthontario.ca/resources/a-new-look-at-homophobia-and-heterosexism-in-canada

Schrauwers, C., & Dekker, G. (2009). Maternal and perinatal outcome in obese pregnant patients. *Journal of Maternal-Fetal & Neonatal Medicine, 22*, 218-226. https://doi.org/10.1080/14767050902801652

Séguin, L., Ninkiéma, B., Gauvin, L., Zunzunegui, M.-V., & Xu, Q. (2007). Duration of Poverty and Child Health in the Quebec Longitudinal Study of Child Development: Longitudinal Analysis of a Birth Cohort. *Pediatrics*, 119(5), e1063-e1070. Retrieved from www.pediatrics.org/cgi/content/full/119/5/e1063

Singer, R. (2003). *The Impact of Poverty on the Health of Children and Youth*. Campaign 2000. Retrieved from www.childcarecanada.org/resources/issue-files/child-poverty-and-early-learning-and-child-care/campaign-2000-reports

Stapleton, J. (2009). *Why Don't We Want the Poor to Own Anything? Our Relentless Social Policy Journey toward Destitution for the 900,000 Poorest People in Ontario*. Retrieved from metcalffoundation.com/stories/publications/why-dont-we-want-the-poor-to-own-anything-our-relentless-social-policy-journey-toward-destitution-for-the-900000-poorest-people-in-ontario/

Statistics Canada. (2015a). *A Comparison of LICO, LIMs and MBM*. Retrieved from www.statcan.gc.ca/pub/75f0002m/2010003/section/s2-eng.htm

Statistics Canada. (2015b). *Low Income Measures*. Retrieved from www.statcan.gc.ca/pub/75f0002m/2012002/lim-mfr-eng.htm

Statistics Canada. (2016). *Insights on Canadian Society, Hidden Homelessness in Canada*. Retrieved from www.statcan.gc.ca/pub/75-006-x/2016001/article/14678-eng.htm

Statistics Canada and Human Resources and Social Development Canada. (2008). *National Longitudinal Study of Children and Youth*. Retrieved from www23.statcan.gc.ca/imdb/p2SV.pl?Function=getSurvey&SDDS=4450

Talge, N. M., Neal, C., & Glover, V. (2007). Antenatal maternal stress and long-term effects on Child neurodevelopment: how and why? *Journal of Child Psychology and Psychiatry*, 48, 245–61. https://doi.org/10.1111/j.1469-7610.2006.01714.x

Tarasuk, V., Mitchell, A., & Dachner, N. (2016). *Household Food Insecurity in Canada: 2014*. Retrieved from http://proof.utoronto.ca

UNICEF. (2016). *The State of the World's Children 2016: A Fair Chance for Every Child*. Retrieved from www.unicef.org/publications/index_91711.html

UNICEF. (2017). *Innocenti Report Card 14. Children in the Developed World*. Retrieved from www.unicef.ca/sites/default/files/2017-06/UNICEF%20Innocenti%20Report%20Card%2014%20EN.pdf

UNICEF Canada. (2009). Aboriginal Children's Health: Leaving No Child Behind. Retrieved from www.unicef.ca/portal/Smart Default.aspx?at=2063

Walker, S., Wachs, T. D., Grantham-McGregor, S., Black, M. M., Nelson, C. A., Huffman, S. L., Richter, L. (2001). Inequality in early childhood: risk and protective factors for early child development. *Lancet, 378*, 1325–38. https://doi.org/10.1016/S0140-6736(11)60555-2

Wicks, R. (2006). *Overcoming Secondary Stress in Medical and Nursing Practice*. Oxford: Oxford University Press.

Wood, D. (2003). Effect of Child and Family Poverty on Child Health in the United States. *Pediatrics*, 112(3), 707-711.

Zero to Three: National Center for Infants, Toddlers and Families. (2016). *Poverty's Effect on Infants and Toddlers Infographic*. Retrieved from www.zerotothree.org/resources/516-poverty-s-effect-on-infants-and-toddlers-infographic

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