

Submission to the Ministry of Treasury Board and Finance on the Alberta Budget 2023

Submitted by a group of researchers at the University of Calgary School of Public Policy and Cumming School of Medicine

Key requests for the Alberta Budget 2023

1. Children should be prioritized in Alberta's policies and budget allocations

- We request increased investment in **child and family related policies** and specific budget allocations towards **the implementation of the Alberta Child and Youth Wellbeing Action Plan**.
- We request financial investment in the setting up of **structures to provide consistent cross-ministry alignment and governance**.
- We recommend increased and improved **data collection, management and sharing** to effectively monitor child health and well-being outcomes and evaluate respective policies.
- We recommend increased investments in **early childhood education and care, housing, basic income**.
- We recommend increased investments in **culturally appropriate mental health resources**.

2. People with disabilities should be considered in all policies, particularly in COVID-19 recovery efforts. We request financial investments in the following areas:

- Access to services
- Education
- Employment
- Mental and physical health
- Precautionary health measures

Context

A recent UNICEF report showed that Canada ranks among the countries with the best economic, environmental and social conditions for growing up, but is **among the countries with the lower than average health and wellbeing outcomes for children** compared to other high-income countries (30th out of 38 countries).¹ CIHI reports nationally on the Children Vulnerable in Areas of Early Development Indicator as an important determinant of health and well-being in later life.² The most current data for Alberta (2015-2016) indicates performance below the national average, with higher levels of vulnerability in the northern half of the province.

¹ <https://www.unicef-irc.org/child-well-being-report-card-16>

² <https://www.cihi.ca/en/health-indicators-e-publication>

Children with neurodevelopmental disabilities (NDD) and their families face barriers and challenges in everyday activities such as eating, communicating, sleeping, playing and learning. Parents and families often experience financial hardship, and live with the stress and isolation of finding, navigating, and accessing services and supports for themselves and their children. **Children with NDD and their families faced a higher risk of adverse mental health problems and poor health and socio-economic outcomes.** UNICEF, WHO and Royal Society of Canada reports have all discussed mounting mental health concerns for this population. The COVID-19 pandemic exposed deep cracks in access to services and supports for the more than 400,000 children under 14 years old across Canada living with NDDs and their families. Parents already faced challenges navigating systems to access timely testing, treatments, interventions and ongoing support for their children living with autism, cerebral palsy, fetal alcohol spectrum disorder and other brain disorders. The pandemic catapulted families into crisis, resulting in a significant number of family breakdowns.

OECD data suggests that countries who had higher financial investments in child and family policies, showed better child wellbeing outcomes according to UNICEF.³ Nobel Prize winning Professor James Heckman's work shows that the highest rate of economic returns comes from the earliest investments in children, which leads to greater success to more children, greater productivity and reduces social spending for society.⁴

We recognize and commend the steps taken by the Federal and Provincial Government in Alberta to improve outcomes for children and reduce barriers to full participation in society of children and youth with disabilities.

We commend that Alberta has endeavoured to advance child health and well-being, publishing one of the first child health assessment reports of its kind in 2005 and advancing research and practice since.⁵ Within the past ten years, Alberta established a Children's First Act, made significant and ongoing efforts toward Reconciliation through child intervention and welfare reform and recently undertook a review of child and youth health and well-being in light of the COVID-19 pandemic.⁶ As such, we recognize that Alberta has undertaken notable efforts to focus on and improve the well-being of children and youth.

We equally commend the policy efforts and financial investments made towards improving the health care system and improving the lives of persons with disabilities. In the 2022 Budget, the Government of Alberta committed to providing \$1.4 billion in total funding for the Assured Income for Severely Handicapped (AISH), \$45 million more for Persons with Developmental Disabilities (PDD, \$15 million more for Family Support for Children with Disabilities (FSCD). We welcome other initiatives throughout the year such as investing \$26 million into support the social sector to address workforce challenges and increasing operational costs, indexing programs with inflation to ensure low-income Albertans have the resources to afford their basic needs and allocating \$12 million to connect more individuals with disabilities to meaningful employment.

³ <https://www.unicef-irc.org/child-well-being-report-card-16>

⁴ <https://heckmanequation.org/the-heckman-equation/>

⁵ <https://open.alberta.ca/publications/alberta-child-health-surveillance-report>

⁶ <https://open.alberta.ca/publications/child-and-youth-well-being-review-final-report>.

Our Observations and Requests for the Alberta Budget 2023

1. Child and Youth Health and Well-being Assessment and Indicators

We observed:

A comprehensive environmental scan of provincial policies and initiatives related to child and youth health and well-being over the past decade revealed gaps in consistency, continuity and accountability. A more robust coordinated, multi-sectoral structure is needed to guide and align child and youth health and well-being efforts, including a comprehensive population-level assessment plan. Alberta has produced advanced research, knowledge and policies within this important domain over the past decade, however, a much more focused and integrated effort is required. While there are sector-specific and cross-sectoral initiatives underway, some of these appear fragmented or siloed, and some appear to have started, stopped, and changed course with changes in government political leadership.

The Child and Youth Well-being Review & Action Plan along with an expansive list of initiatives, both historical and currently underway, provide a promising foundation, specifically in relation to mental health initiatives in the context of the pandemic. There is need to expand these plans and look at child health and well-being in a holistic way by including all relevant Ministries, such as Children's Services, Alberta Health Services, Education, Justice, Seniors, Community and Social Services, Indigenous Relations, Service Alberta and others. Cross-sectoral alignment toward a shared outcome and assessment framework would provide a solid backbone for more effective collaboration and action over time.

We recommend:

- We request for a **specific budget allocation to the implementation of the Child and Youth Well-being Action Plan.**
- We request **financial investment in the setting up of structures to provide consistent cross-ministry alignment and governance** that includes population-level data enhancement, assessment and monitoring. This will be a meaningful and needed first step to enable more effective government and community collaboration and action to improve the health, well-being and outlook of young people in Alberta.
- We recommend **increased and improved data collection, management and sharing** to effectively monitor child health and well-being outcomes and evaluate respective policies.
- We recommend **increased investments in early childhood education and care, housing, basic income** in line with Canadian Public Health Association proposals.⁷
- We recommend **increased investments in culturally appropriate mental health resources** as proposed by the Public Health Approach to Population Mental Wellness.⁸

⁷ <https://www.cpha.ca/poverty-reduction-strategy-consultation-response>

⁸ <https://www.cpha.ca/public-health-approach-population-mental-wellness>

2. Disability inclusive policy

We found:

Children, adolescents, and young adults with disabilities and their families have experienced significant mental health challenges during the COVID-19 pandemic. Increased symptoms in the form of anxiety, stress, depression, self-harm and poor functioning, particularly among those with pre-existing mental health issues, have been consistently reported during the COVID-19 pandemic (Lancet 2020). We found that the needs of youth with NDD and their caregivers were not sufficiently taken into consideration in COVID-19 emergency responses. Children and Youth with NDD and their caregivers experienced various denials, delays and disruptions in relation to service delivery, supports and activities of daily living. This resulted in serious implications to mental and physical health, impacts on developmental progress, academic success, education and employment, the deconstruction of social networks and support systems, impacts on caregiving capacity and financial strains on families.

“Things shut down overnight and supports literally evaporated. For families like ours you saw the difference immediately. We went from being reasonably okay, to crisis. While we’re in a much better place right now it took a very, very long time to rebuild that.” – Tracy, mother of multiple children with neurodevelopmental disabilities

We recommend financial investments in the following areas:

Access to Services

- Ensure the design of disability programs and healthcare services responds to the unique needs of youth with disabilities and their families at all times, for instance through ongoing virtual care options when in-person is not an option. This involves shifting from a one-size fits all approach by ensuring access to patient-centric accommodations.
- Allocate sufficient funding to co-design emergency preparedness planning with interested parties, including individuals with disabilities and their formal and informal caregivers, disability service providers, and representative community organizations, to facilitate continuous access to services during future emergencies.
- Reduce excessive reliance on the education system to provide/manage/dispatch all types of services, including education, respite, child care, youth protection, health and rehabilitation – which creates an immediate gap on most essential services when schools are disrupted (e.g, during the COVID-19 school closures, and also during extreme weather or other emergencies)

Education

- Allocate sufficient funding to promote school environments that address inclusion of children and youth with diverse needs by adopting individualized educational plans with remedial approaches in place when students cannot follow the majority of other students due to illness or disability characteristics.

- Provide a budget to evaluate the impact of educational disruption on the academic outcomes of youth with NDD both in the short-term and long-term (e.g. delays in learning and social anxiety, depression) and use this information to design and implement appropriate supports. These supports can include specialized educators working with health and rehabilitation teams, and local resources in school that can be mobilized to community or home environment as needed.
- Ensure future emergency planning includes rapid adaptations in access to in-school services, and support for both online and in-person schooling to ensure that youth with NDD have access to quality and inclusive learning during future emergencies.

Employment

- Recognize the unique situation of parents and caregivers caring for youth with NDD – including additional time off work to accommodate for distance learning and rehabilitation of children with complex health care needs- and design fair and sustainable economic supports during post-pandemic recovery.
- Increase budget allocations to adopt widespread specialized childcare, workplace accommodation, and job protection policies for working parents to mitigate the impacts of childcare during future emergencies.
- Ensure sufficient funding for employment options for youth with disabilities in the community as part of a key aspect of community inclusion and mental health promotion.

Mental and Physical Health

- Increase funding to ensure access to affordable and inclusive mental health supports for youth with NDD and their families, particularly those in rural and remote areas of Canada, including options for virtual – distance services for mental health promotion of informal caregivers/parents and youth.
- Understand the physical health and rehabilitation services as “essential services” at all times, maintain flexible access to these services according to individuals’ and families’ needs.
- Promote accessibility in the community and develop inclusive mental and physical health promotion strategies (e.g. sports and recreation) in public spaces and through cross-sectoral action (community-health-education).

Precautionary Measures

- Provide funding to ensure that precautionary health measures are inclusive: for instance messages to the public are provided in easy read language, sign languages, and systematically and equitably distributed across different groups including those living in rural or remote areas, language minorities, and newcomers to Canada.
- Consider the needs of youth with NDD and their families in the development of public health and precautionary measures by considering the objective barriers to compliance (e.g. inability to put on a mask independently when entering a public space) and subjective barriers, such as stigma and discrimination that exemptions to rules can cause if not appropriately disseminated.

- Close collaboration with individuals with lived experience to ensure that safety measures do not infringe on the rights of persons with NDD and that exemptions are implemented and well communicated not only to the disability group but to the public at large whenever appropriate/possible.

Who we are

The School of Public Policy (SPP) at the **University of Calgary** has the mission to advance practical and focused policy research, shape public policy by driving meaningful debates, and develop Canada's future policy leaders. Recognized as a top policy school internationally by Ideas/Repec, the Social Policy and Health Program aims to improve the lives of Canadians by employing an objective, evidence-based approach to assessing public policies and identifying practical solutions.

The Disability Policy Research Program (DiPo) at the School of Public Policy, University of Calgary focusses on research related to policies for children and youth with neurodevelopmental disabilities (NDDs). DiPo aims to understand experiences of children and youth with disabilities and their families in accessing services and recommending improved policies for care coordination and service provision with the overall objective of ensuring participation in society for persons with disabilities. DiPo's research utilizes qualitative methods, economic evaluation and policy analysis to capture experiences and measure access to disability programs and services for children and youth with NDDs and their families. The group fosters strong collaborations with community partners, people with lived experience and interdisciplinary researchers, which are all critical in the translation of peer reviewed publications to policy papers, op-eds and briefing notes, utilized by both federal and provincial government. More information on the group's work can be found at www.dipo.ca. DiPo is led by Dr. Jennifer Zwicker, Director of Health Policy at the School of Public Policy, Associate Professor at the Faculty of Kinesiology at the University of Calgary and Deputy Scientific Director at Kids Brain Health Network.

The Cumming School of Medicine (CSM) strives to create the future of health. This future is precision medicine and precision public health (PM/PPH) — an individualized approach to patient diagnosis, treatment and disease prevention, and the use of emerging technologies to better enhance precision in health care. The CSM strategic plan focusses on three key areas — people, platforms and partnerships. By continuing to strategically focus on and invest resources in these three priority areas, the School is creating the ability to perform PM/PPH, which translates to improved health for the diverse populations in which we serve. Dr. Brent Hagel is an epidemiologist and associate professor with the Departments of Paediatrics and Community Health Sciences at the University of Calgary. He holds the Alberta Children's Hospital Foundation Professorship in Child Health and Wellness funded by an anonymous donor and the Canadian National Railway Company, the Alberta Heritage Foundation for Medical Research Population Health Investigator and Canadian Institutes of Health Research New Investigator awards.

The Project *Measure What Matters – Identifying Key Indicators to Align Policy and Service Delivery with Child Health and Well-being* is a cooperation between the Cumming School of Medicine and School of Public Policy, involving a consortium of researchers from different faculties at the University of Calgary. The Project is a BMO Endowed Research Award in Healthy Living in the Branch category of the Child Health and Wellness Grand Challenge Catalyst competition, funded by the Alberta Children's



Hospital Research Institute (ACHRI). The project plans to identify key child health and well-being indicators as a measurement framework to map policy and service delivery with child well-being. Indicators will thereby be used to simplify the complex information concerning child well-being, environmental factors, and policy nexus by identifying modifiable factors and making recommendations to improve outcomes for identified vulnerable population groups. To achieve its objectives, the project team is carrying out an environmental scan and scoping review to identify measures, data sources, stakeholders and policies on child health and well-being, as well as a stakeholder consensus process.