CHIDRENCOUNT

ASSESSING CHILD AND YOUTH SURVEILLANCE GAPS FOR ONTARIO PUBLIC HEALTH UNITS

Supporting good health and positive well-being is essential to ensuring children and youth are able to reach their full potential. The need for quality information on health and well-being is a priority for many sectors and is needed to direct the planning, delivery and assessment of public services for children and youth.

WHAT WAS THE GOAL OF THE PROJECT?

In Ontario, it is challenging to monitor child and youth health, largely because we lack a sustainable and coordinated monitoring system. To help inform a more efficient and responsive system, our project examined gaps and explored approaches to measuring the health of children and youth in Ontario.

WHAT DID WE DO?

This Locally Driven Collaborative Project (LDCP) was a one-year study led by a team of public health professionals from across Ontario. The first phase of the project was a survey of **Public Health Units (PHUs)**, which asked about needs and challenges related to data collection for children and youth. We heard from 377 public health professionals at 34 of Ontario's 36 PHUs. To compare the PHU experience with others involved in measuring the well-being of children and youth, we interviewed 11 key informants from government, education, and academia.

KEY FINDINGS...

SAID THAT CURRENTLY AVAILABLE DATA DOES NOT MEET THEIR NEEDS FOR ASSESSMENT, PLANNING, AND EVALUATION OF HEALTH PROGRAMS FOR CHILDREN AND YOUTH AT THE LOCAL LEVEL.

OF PHUS

PHUs FELT THAT EXISTING DATA SOURCES NEED TO BE IMPROVED BY:

- Having larger local sample sizes
- Addressing data gaps
- Coordinating of data collection
- Enhancing accessibility of data
- Linking health data to socio-economic data
- Removing financial barriers to data

The lack of data is compelling organizations to actively collect their own data. This has resulted in:

- Inefficiency: Organizations working independently are duplicating efforts to collect data.
- **Resource drain**: Efforts to fill in data gaps are draining scarce financial and human resources from public services.
- Burden on schools: Competing organizations are flooding schools with surveys, which are overburdening both teachers and students.

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KEY INFORMANTS SAID...

- There is a need for quality data that can be used for multiple purposes including assessment, program planning, evaluation, and decision-making.
- Prioritize child and youth data collection and increase awareness about Ontario's lack of a monitoring system.
- Sectors need to work together to coordinate monitoring efforts.
- Enhancing and coordinating existing monitoring systems is the best opportunity for improvement.





SAID THERE IS A HIGH NEED FOR A COORDINATED SYSTEM FOR MONITORING CHILD AND YOUTH HEALTH IN ONTARIO

Overall, stakeholders from local public health, academia, education, and other government agencies described many challenges and gaps related to Ontario's ability to monitor child and youth health.

RECOMMENDATIONS

Based on the findings from this project, the following recommendations are essential to improving Ontario's ability to measure child and youth health and well-being at the local, regional and provincial level.

RECOMMENDATION 1:

Establish a Provincial Task Force

Establish a provincial task force, with membership representing key stakeholders, which will aim to identify next steps for improving assessment and surveillance of child and youth health and well-being in Ontario.

 a) Recruit leadership representatives from government, public health, education, and academia to form a provincial task force. This includes, but is not limited to, representatives from public health units, Public Health Ontario, school boards, university and research institutions, the Ontario Ministry of Education, the Ontario Ministry of Health and Long-Term Care, and relevant resource centres. These representatives will meet regularly.

- b) The task force should produce a briefing with recommended next steps for improving the assessment and surveillance of the health and well-being of Ontario children and youth.
- c) Experts and stakeholders should be consulted when necessary, and the task force should build on the work of this report and previous work, as well as coordinate with other current initiatives related to assessment and surveillance of children and youth.
- d) The task force should provide guidance and oversight for the implementation of its recommendations and the recommendations of the *Children Count* report.

RECOMMENDATION 2: Advocate for Children and Youth

Raise awareness among decision makers about the importance of quality data on children and youth, and the opportunities for improving assessment and surveillance of this population.

- a) The Population Health Assessment LDCP team should actively and regularly engage in knowledge exchange activities with relevant decision-makers, including the dissemination of project deliverables and updates on next steps.
- b) The Province of Ontario, which includes the Ministry of Education and Ministry of Health and Long-Term Care, should develop a shared mandate that will drive changes in the assessment and surveillance of child and youth health.
- c) Ontario public health units and school boards should collaboratively advocate the needs of their child and youth populations to their respective decision-makers.
- d) The Ontario government and relevant ministries should support assessment and surveillance province-wide so that all child and youth populations are included irrespective of locality.

RECOMMENDATION 3:

Support Multi-sectoral Collaborations

Promote meaningful, multi-sectoral partnerships and collaborations that foster effective and efficient assessment and surveillance of children and youth.

- a) The Ontario education system should move towards a more consistent and simplified research process that allows for better collaboration with government and academic researchers and lessons the burden on local boards of education.
- b) Explore implementing a student health and well-being surveillance system within the Ontario education system that is standardized and universal for all Ontario schools in collaboration with public health and academia. School boards should also be allowed to complement such a universal system with individualized assessment efforts.
- c) Improve communication and feedback mechanisms between academic institutions, school boards, and public health units, such that there is open sharing of data and results across sectors.



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Child and youth mental health, physical activity, and healthy eating were common areas of interest among all sectors.

RECOMMENDATION 4:

Strengthen and Coordinate Existing Surveillance Systems

Invest in enhancing and expanding existing approaches to meet the needs of identified stakeholders in Ontario. Those involved in current surveillance efforts should:

- a) Increase the awareness of existing child and youth data sources in Ontario, including the strengths and limitations of these sources, among different sectors and stakeholders.
- b) Prioritize the collection of data for mental health, healthy eating, and physical activity among children and youth in Ontario.
- c) Increase the number of children and youth surveyed to allow for useful and reliable estimates at the local level.
- d) Create mechanisms to foster better response rates, including the use of passive consent.
- e) Ensure that health and well-being data is linked to other variables including age, sex and gender, household income, postal code, and parental education.
- f) Standardize metrics across surveillance systems so that data can be compared across regions and within regions.
- g) Support systems that incorporate direct measures where appropriate and possible.

NEXT STEPS

Unlike other Canadian provinces and countries, Ontario lacks an integrated, sustainable, and coordinated system to monitor child and youth health. Investing in such a system would be an invaluable asset to the health and well-being of children and youth.

The next step towards achieving this goal is to establish a provincial task force. This step will be initiated by the LDCP project team in 2017 with funding provided by Public Health Ontario (PHO).

The task force will work towards discussing the recommendations set out in the report Children Count and provide guidance to further the development of a system that will enable child- and youth-centred planning at the local, regional, and provincial levels.

WHY DOES ONTARIO NEED A BETTER SYSTEM FOR MONITORING AND MEASURING CHILD AND YOUTH HEALTH?

ONTARIO'S PUBLIC SERVICES – INCLUDING HEALTHCARE, PUBLIC HEALTH, AND EDUCATION – WOULD BENEFIT FROM:

- GREATER IMPACT OF FUNDING AND COST-EFFECTIVENESS OF PROGRAMS.
- EVIDENCE TO DIRECT DECISION-MAKERS IN POLICY-MAKING AND IN PLANNING AND DELIVERY OF PROGRAMS AND SERVICES
- BETTER EFFICIENCY, ACCOUNTABILITY, AND COLLABORATION BETWEEN SECTORS
- IMPROVED HEALTH AND WELL-BEING OF CHILDREN AND YOUTH





For a full copy of the report please visit www.wechu.org/childrencount or www.publichealthontario.ca/LDCP

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