

**EARLY CHILDHOOD DEVELOPMENT
ACTIVITIES AND EXPENDITURES
and
EARLY LEARNING AND CHILD CARE
ACTIVITIES AND EXPENDITURES**

GOVERNMENT OF CANADA REPORTS
2004-2005 AND 2005-2006



Canada 

Publication is also available on the Internet at the following address:

www.socialunion.ca

This report is co-published by Human Resources and Social Development Canada, the Public Health Agency of Canada and Indian and Northern Affairs Canada.

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Paper

Cat. No.: HS1-8/2006

ISBN: 978-0-662-69886-9

PDF

Cat. No.: HS1-8/2006E-PDF

ISBN: 978-0-662-46223-1

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Table 1.1 Cash Transfers in Support of the Multilateral Framework on Early Learning and Child Care (\$ millions)52

In support of two federal/provincial/territorial initiatives focused on young children, the Early Childhood Development Agreement (September 2000) and the Multilateral Framework on Early Learning and Child Care (March 2003), the Government of Canada provides annual cash transfers to the provinces and territories to support their investments in early childhood development and early learning and child care programs and services.¹

The objectives of the Early Childhood Development (ECD) Agreement are to help Canada's children reach their potential and to help families support their young children in strong communities by improving and expanding programs and services. The Multilateral Framework on Early Learning and Child Care builds on that agreement to promote early childhood development and support the participation of parents in employment or training by improving access to affordable, quality early learning and child care programs and services.

All governments participating in these two initiatives have committed to report publicly on their investments for Canada's children under 6 and their families. Regular reporting allows Canadians to monitor progress in improving and expanding programs and services for young children and their families.

The two reports in this publication deliver on the Government of Canada's commitment to report to Canadians on federal activities and expenditures related to early childhood development (Section I) and early learning and child care (Section II) for 2004–2005 and 2005–2006. The activities and expenditures reported are for children living in Canada; they do not include activities and expenditures resulting from transfers to provincial and territorial governments or federal investments in international programs and aid to help young children and their families in other countries.

As part of the ECD Agreement, governments also agreed to report regularly on the well-being of children, using a common set of agreed-upon indicators. As a complement to the information in this publication, the Government of Canada has released *The Well-Being of Canada's Young Children: Government of Canada Report 2006*, which is available online in the Early Childhood Development/Government of Canada section at www.ecd-elcc.ca. That report is the third in a series of federal reports describing the development of Canada's young children and the families and communities in which they are growing up.

In 2006, the federal government introduced Canada's Universal Child Care Plan, which consists of two key elements designed to help families balance work and family life as they see fit, regardless of where they live or their child care preferences. These elements include direct financial support to parents and support for the creation of child care spaces.

Since July 2006, through the Universal Child Care Benefit, families have been receiving \$100 per month – up to \$1,200 a year – for each child under the age of six to help them offset the costs of whatever type of child care they use. In total, the Universal Child Care Benefit provides more than \$2.4 billion each year to 1.5 million families for 2 million young children.

¹ While the Government of Québec supports the general principles of the ECD Agreement and the Multilateral Framework on Early Learning and Child Care, it did not participate in developing these initiatives because it intends to preserve its sole responsibility on social matters. However, Québec receives its share of federal funding and the Government of Québec is making major investments towards programs and services for families and children. All references in this document to viewpoints shared by federal, provincial and territorial governments do not include the views of Québec.

Preface

Recognizing that the availability of child care spaces is a challenge faced by many Canadian parents, Budget 2007 proposed two new measures to support the creation of child care spaces. First, the government has committed to provide an additional \$250 million per year to the provinces and territories to support the creation of child care spaces that are responsive to the needs of parents and administered in an efficient and accountable manner. Second, to support businesses interested in creating child care spaces for their employees, a non-refundable tax credit valued at 25% of eligible expenses to a maximum of \$10,000 per spaces is proposed.

As the Universal Child Care Plan came into effect after April 1, 2006, additional information will be available in the 2006-2007 Government of Canada's activities and expenditures report.

EARLY CHILDHOOD DEVELOPMENT ACTIVITIES AND EXPENDITURES: GOVERNMENT OF CANADA REPORT 2004-2005 and 2005-2006

Chapter 1. Introduction

Federal/Provincial/Territorial Early Childhood Development Agreement

The September 2000 Federal/Provincial/Territorial Early Childhood Development (ECD) Agreement is focused on children under six and their families, and has two clear objectives:

- to promote early childhood development so that, to their full potential, children will be physically and emotionally healthy, safe and secure, ready to learn, and socially engaged and responsible; and
- to help children reach their potential and to help families support their children within strong communities.

To meet these objectives, governments identified four key areas for action, and agreed to invest in any or all of these areas, according to their own priorities:

- promoting healthy pregnancy, birth and infancy;
- improving parenting and family supports;
- strengthening early childhood development, learning and care; and
- strengthening community supports.

Additional details about the ECD Agreement are featured in Annex A of this report, which contains the full text of the First Ministers' Meeting Communiqué, September 11, 2000.

Public Reporting

As part of the ECD Agreement, First Ministers committed to report annually on their investments and progress in enhancing early childhood development programs and services. They also made a commitment that governments would continue to improve the quality of reporting over time and agreed to develop a Shared Framework for Reporting on Progress in Improving and Expanding Early Childhood Development Programs and Services. The full text of this shared framework for reporting is featured in Annex B.

This report on activities and expenditures in 2004-2005 and 2005-2006 fulfills the Government of Canada's commitment to report annually on its investments and progress in enhancing early childhood development programs and services.

Previous reports can be found at www.ecd-elcc.ca.

Federal Transfers in Support of Provincial and Territorial Government Investments in Early Childhood Development

Under the ECD Agreement, the Government of Canada transfers \$500 million per year to provinces and territories to support their investments in early childhood development programs and services. Budget 2007 sets out funding levels for the CST, including ongoing funding for ECD, through 2013-2014 and proposes the introduction of an annual 3% escalator beginning in 2009-2010.

Section I

Table 1.1 provides details on the Government of Canada's cash transfers in support of the ECD Agreement.

	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07	2007-08	Total
Newfoundland and Labrador	5.1	6.6	8.2	8.1	8.0	7.8	7.7	51.5
Prince Edward Island	1.3	1.7	2.2	2.2	2.1	2.1	2.1	13.8
Nova Scotia	9.0	11.9	14.8	14.7	14.5	14.3	14.2	93.5
New Brunswick	7.3	9.6	11.9	11.8	11.6	11.5	11.4	75.0
Quebec	71.6	95.0	118.3	118.0	117.7	117.3	117.0	754.9
Ontario	115.0	154.2	193.5	194.0	194.4	194.4	194.9	1,240.4
Manitoba	11.1	14.7	18.3	18.3	18.2	18.1	18.0	116.8
Saskatchewan	9.7	12.7	15.7	15.6	15.4	15.1	15.0	99.1
Alberta	29.6	39.7	49.9	50.1	50.7	51.6	51.8	323.4
British Columbia	39.4	52.5	65.6	65.7	65.9	66.1	66.2	421.4
Yukon	0.3	0.4	0.5	0.5	0.5	0.5	0.5	3.1
Northwest Territories	0.4	0.5	0.7	0.7	0.7	0.6	0.6	4.2
Nunavut	0.3	0.4	0.5	0.5	0.5	0.5	0.5	3.0
TOTAL	300.0	400.0	500.0	500.0	500.0	500.0	500.0	3,200.0

Note: Payments are notionally provided under the Canada Health and Social Transfer (CHST) up to 2003-04 and under the Canada Social Transfer (CST) for 2004-05 and beyond.

Figures are based on Statistics Canada population estimates up to 2006-07 and projections for 2007-08. Figures beyond 2003-04 are subject to revision upon periodic release of Statistics Canada official population estimates. Totals may not add due to rounding.

Structure of Section I

The Text

As in previous years, the report is organized into four key areas for action:

- promoting healthy pregnancy, birth and infancy (Chapter 2);
- improving parenting and family supports (Chapter 3);
- strengthening early childhood development, learning and care (Chapter 4); and
- strengthening community supports (Chapter 5).

There are also separate chapters on dedicated services and programs for Aboriginal children and families (Chapter 6), and on research and information (Chapter 7). Some activities in the report are relevant to two or more key areas for action; however, these are only reported once.

Each report on a specific activity begins with a short description, which is followed by an activities and expenditures table. Activities are organized alphabetically by the responsible government departments or agencies. Where possible and applicable, descriptive information is based on the program indicators outlined in the shared framework for reporting.

In a change from previous editions of the report, some programs and services formerly presented as Health Canada activities are now listed under the Public Health Agency of Canada (PHAC). The PHAC was created on September 24, 2004, and assumed responsibility for programs, initiatives and services previously administered by the Population and Public Health Branch of Health Canada.

Similarly, on February 6, 2006 the Government of Canada made changes to its structure and departmental organization. The former departments of Human Resources and Skills Development Canada, Social Development Canada, and Service Canada were consolidated into one department named Human Resources and Social Development Canada. The information presented in this report has been organized accordingly, to reflect the creation of the new department.

To assist readers in finding information about specific activities, Annex C includes an index of all programs and services described in the report. A list of inactive programs that were featured in previous reports is included as Annex D.

The Tables

All information on program expenditures and availability are for children under six and their families, unless otherwise indicated.

All activity and expenditure data have been brought forward from previous Government of Canada reports on early childhood development activities and expenditures for ease of tracking. If new information has become available on expenditures in previous years (e.g., an estimate has been changed to an actual amount), those expenditures have been re-reported. As well, some previously reported expenditures have been changed as a result of corrections.

Consistent with a commitment to improve the quality of reporting over time, significant effort has been made to obtain Comptroller or Senior Financial Advisor approval of expenditures in this report. This level of approval was obtained for the majority of program expenditures. In the future we will strive to ensure that all program expenditures receive this level of approval.

Chapter 2. Healthy Pregnancy, Birth and Infancy

The Government of Canada invests in programs, services and information campaigns to promote healthy pregnancy, birth and infancy. Some of the programs described in this chapter are focused on helping pregnant women make healthier choices that will give their children a better start in life. Others provide information and support to help ensure healthy births and infancy.

Certain activities that have an impact on healthy pregnancy, birth and infancy are covered in other chapters. Examples include the Canada Prenatal Nutrition Program: First Nations and Inuit Component (Chapter 6), the Fetal Alcohol Spectrum Disorder Program: First Nations and Inuit Component (Chapter 6), and several of the research and information activities described in Chapter 7, such as the Canadian Perinatal Surveillance System.

Activities and Expenditures

Human Resources and Social Development Canada

Employment Insurance: Maternity and Parental Benefits

Maternity and parental benefits provide temporary income replacement for working parents of newborn or newly adopted children. These benefits are intended to support parents in balancing the demands of work and family by providing the flexibility they need to stay home during their child's first year of life.

Section I

Parents have the option to use these benefits as best suits their needs. Maternity benefits are available to mothers in the 15 weeks surrounding childbirth and parents can access 35 weeks of parental benefits, for a combined total of 50 weeks.

The Employment Insurance program is reviewed every year through a monitoring process to assess the impact on individuals, communities and the economy.

Website: www.hrsdc.gc.ca/en/home.shtml

Employment Insurance: Maternity Benefits			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$752,000,000	Not applicable	176 000 children
2001–2002	\$848,000,000	Not applicable	193 000 children
2002–2003	\$845,000,000	Not applicable	191 000 children
2003–2004	\$909,000,000	Not applicable	202 000 children
2004–2005	\$925,000,000	Not applicable	199 000 children
2005–2006	\$903,000,000	Not applicable	Not available at time of printing
<p>Expenditures: The expenditures reflect the amounts paid to claimants and do not include operations and management costs or salaries.</p> <p>Children under 6 and their families: The estimated number of children is based on the number of new maternity claims filed each fiscal year.</p> <p>2002–2003: These expenditures were revised from estimates to actuals in the 2003–2004 report.</p> <p>2005–2006: EI maternity and parental benefits decreased from the previous year, further to Quebec's introduction of its own parental insurance plan as of January 1, 2006, replacing EI maternity and parental benefits. In provinces and territories other than Québec, benefits paid increased.</p>			

Employment Insurance: Parental Benefits			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$502,000,000	Not applicable	177 000 children
2001–2002	\$1,311,000,000	Not applicable	196 000 children
2002–2003	\$1,880,000,000	Not applicable	193 000 children
2003–2004	\$2,015,000,000	Not applicable	205 000 children
2004–2005	\$2,112,000,000	Not applicable	202 000 children
2005–2006	\$2,064,000,000	Not applicable	Not available at time of printing
<p>Expenditures: The expenditures reflect the amounts paid out to claimants and do not include operations and management costs or salaries.</p> <p>Children under 6 and their families: The estimated number of children is based on the actual number of new claims filed for maternity and adoption benefits. The exact number of families that received these benefits is not known because sharing of parental benefits between parents can result in two claims per family instead of one.</p> <p>2002–2003: These expenditures were revised from estimates to actuals in the 2003–2004 report.</p> <p>2005–2006: EI maternity and parental benefits decreased from the previous year, further to Quebec's introduction of its own parental insurance plan as of January 1, 2006, replacing EI maternity and parental benefits. In provinces and territories other than Québec, benefits paid increased.</p>			

Public Health Agency of Canada

Canada Prenatal Nutrition Program

The Canada Prenatal Nutrition Program (CPNP) provides funding to community agencies and coalitions to increase access to health and social supports for women who face challenging circumstances that threaten their health and the development of their infants and to increase the availability of culturally appropriate prenatal services for Aboriginal women living apart from First Nations and Inuit communities.

The CPNP funds a comprehensive range of activities to attract potentially isolated pregnant women to prenatal care and support their connection to the broader community. These include provision of food supplements; counselling on nutrition and other health practices; education about breastfeeding, infant attachment and child development; social support and skill development; and referral on health and social issues.

In 2005-2006, an estimated 50 000 women participated in programs and services offered at 330 CPNP project sites across Canada.

Website: www.phac-aspc.gc.ca/dca-dea/programs-mes/cnpn_main_e.html.

Canada Prenatal Nutrition Program			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$27,366,000	301 projects	34 000 women
2001–2002	\$31,000,000	325 projects	45 600 women
2002–2003	\$31,000,000	320 projects	44 000 women
2003–2004	\$29,544,353	330 projects	>47 000 women
2004–2005	\$31,729,121	338 projects	50 000 women
2005–2006	\$30,700,819	330 projects	50 000 women

Expenditures from 2000–2003 are allocations and include grants and contributions, operations and management costs, and salaries.
 The CPNP programs serve pregnant women and women with infants up to one year of age.
 2003–2004: Expenditures include grants and contributions (actuals), operations and management costs (allocations), and salaries (allocations). The reduction in expenditures is due to a decrease in actual grants and contributions in response to departmental budgetary pressures.
 2004–2005: Expenditures include grants and contributions (actuals), operations and management costs (allocations), and salaries (allocations).
 2005–2006: Expenditures include grants and contributions (actuals), operations and management costs (allocations), and salaries (allocations).

Family-Centred Maternity and Newborn Care National Guidelines

These national guidelines were widely distributed in 2000 to health professionals and programs offering maternal and newborn care to Canadians. The objective of the guidelines is to ensure a healthy and satisfying pregnancy, birth and postpartum experience for all mothers, babies and families. The guidelines are based on research evidence and represent the “gold standard” for family-centred maternal and newborn care.

Website: www.phac-aspc.gc.ca/dca-dea/publications/fcmc00_e.html.

Family-Centred Maternity and Newborn Care: National Guidelines			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$15,000	Public Health Agency of Canada Web site	Health professionals, health care facilities, public health and other planning, implemental and evaluating maternal and newborn care programs and services
2001–2002	NA		
2002–2003	NA		
2003–2004	NA		
2004–2005	NA		
2005–2006	NA		

While no new funds were committed to the guidelines after 2000–2001, copies of the report continue to be distributed and are available online.

Section I

Healthy Pregnancy Strategy

The Healthy Pregnancy Strategy is a collaborative effort of the Public Health Agency and Health Canada to raise awareness of the major factors in a healthy pregnancy. Components of the strategy include the following:

- *Folic Acid Awareness Campaign*

Folic acid is essential to the normal development of a baby's spine, brain and skull, especially during the first four weeks of pregnancy. To reduce the risk of neural tube defects, it is important for women to start taking folic acid before getting pregnant. This awareness campaign delivers the message that all women who could become pregnant should be taking folic acid daily.

Website: <http://www.phac-aspc.gc.ca/fa-af/index.html>.

Folic Acid Awareness Campaign			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Family physicians, neonatologists, obstetricians, midwives, hospitals, pharmacists, dieticians, geneticists, nursing schools and public health units	Health professionals
2001–2002	\$600,000		
2002–2003	\$85,000		
2003–2004	NA		
2004–2005	NA		
2005–2006	NA		
Expenditures above include operations and management costs, and salaries. 2002–2003: No new materials were produced, resulting in a decrease in expenditures. 2003–2004: There were no expenditures due to financial constraints, but copies of information materials continued to be distributed. 2004–2005: The Folic Acid Awareness Campaign is now included in the Healthy Pregnancy Social Marketing Campaign.			

- *Healthy Pregnancy Social Marketing Campaign*

The objective of this campaign is to raise awareness of key healthy pregnancy issues and encourage women to explore the new Government of Canada portal on healthy pregnancy.

In 2005-2006 several creative concepts and key messages were developed as the next step towards launching an advertising campaign.

The key issues highlighted as part of the Healthy Pregnancy campaign are:

- alcohol (Fetal Alcohol Spectrum Disorder)
- tobacco
- physical activity
- oral health
- folic acid
- nutrition
- mental health

Website: www.healthycanadians.ca.

Healthy Pregnancy Social Marketing Campaign		
Expenditures	Delivery Agent	The activity reaches
2000–2001	NA	Advertising campaign. Women aged 18 to 29 who are pregnant or planning a pregnancy
2001–2002	\$12,000	
2002–2003	\$125,000	
2003–2004	\$51,765	
2004–2005	\$121,171	
2005–2006	\$17,125	
Expenditures above include operations and management costs only. 2002–2003: The increase in expenditure was the result of an agreement with programs to pursue needed research. 2003–2004: Due to fiscal restraints, programs were unable to contribute as much as in the previous year. However, marketing pursued further research of the target audience and health professionals in preparation for a future campaign launch. 2004–2005: The increase in expenditures is due to the Healthy Pregnancy Social Marketing Campaign receiving Treasury Board approval as an advertising initiative. The expenditures were made on behalf of the seven programs involved in the Healthy Pregnancy Strategy in preparation for a future advertising campaign. 2005–2006: Plans to launch the campaign did not occur due to federal election.		

- *National Fetal Alcohol Spectrum Disorder Social Marketing Campaign*

The social marketing campaign related to Fetal Alcohol Spectrum Disorder (FASD) raises awareness about preventing FASD, emphasizing that there is no safe amount of alcohol during pregnancy.

Website: www.publichealth.gc.ca/healthypregnancy.

National Fetal Alcohol Spectrum Disorder Social Marketing Campaign		
Expenditures	Delivery Agent	The activity reaches
2000–2001	NA	Not applicable
2001–2002	\$240,000	
2002–2003	\$120,000	
2003–2004	NA	
2004–2005	NA	
2005–2006	NA	
Expenditures above include operations and management costs only. 2002–2003: Health Canada’s role changed from supporting implementation and monitoring to providing resource materials to the program, resulting in a decrease in expenditures. 2003–2004: There was no budget for public education (marketing) in 2003–2004. 2004–2006: The National Fetal Alcohol Spectrum Disorder Social Marketing Campaign was included in the Healthy Pregnancy Social Marketing Campaign.		

National Fetal Alcohol Spectrum Disorder Initiative

The National Fetal Alcohol Spectrum Disorder (FASD) Initiative provides a focal point to coordinate work to prevent future births affected by alcohol, and improve outcomes for those affected by prenatal alcohol exposure. The initiative supports prevention, public and professional education and training, capacity building, the development of practical tools and resources, and national leadership/coordination. It does not provide direct services to children and families affected by FASD.

Website: <http://www.phac-aspc.gc.ca/fasd-etcaf/index.html>.

Section I

National Fetal Alcohol Spectrum Disorder Initiative			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$912,600	Community-based program workers, health professionals, vintners, brewers, other government departments and other levels of government	Stakeholders who serve families and children
2001–2002	\$1,421,100		
2002–2003	\$1,853,000		
2003–2004	\$1,901,600		
2004–2005	\$2,669,204		
2005–2006	\$1,204,002		
<p>All expenditures above include grants and contributions, operations and management costs, and salaries. Amounts from 2000–2001 to 2002–2003 were revised in the 2003-2004 report to reflect actual expenditures. 2004-2005: The increase in expenditures is due to funding through Canada's Drug Strategy to assist with the publication and dissemination of the diagnostic guidelines, which were published in March 2005 as a peer-reviewed supplement to the <i>Canadian Medical Association Journal</i>. 2005-2006: Decrease in expenditures is due to budget reallocations.</p>			

Postpartum Parent Support Program

In this community-based program, hospital and community health nurses educate families of newborns on the postpartum period. Program resources include information sheets for parents that cover a range of topics such as *Breastfeeding*, *Home Safety* and *Postpartum Adjustment Blues and Depression*.

Website: www.fedpubs.com/subject/health/postpartum.htm.

Postpartum Parent Support Program			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$100,000	Hospitals, public/community health centres and health agencies	Health professionals, parents
2001–2002	\$35,000		
2002–2003	\$5,500		
2003–2004	\$3,000		
2004–2005	NA		
2005–2006	NA		
<p>Expenditures above include operations and management costs only. 2001–2002: While financial support for national-level activities (e.g., program maintenance) had declined, a study of hospital and community health sites was conducted to assess the status of the program in these implementing sites and to gain information that would help in setting future directions for the program. 2002–2003: Health Canada's role changed from supporting implementation and monitoring to providing resource materials to the program, resulting in a decrease in expenditures. 2003–2004: Amount related to publishing costs. 2004–2005: No expenditures—publishing of the master sets completed in 2003–2004. 2005–2006: No expenditures. Master sets continue to be sold by Canadian Government Publishing on behalf of the Public Health Agency of Canada.</p>			

Reducing the Risk of Sudden Infant Death Syndrome

The objective of this activity is to give parents of newborns practical information about ways to reduce the risk of Sudden Infant Death Syndrome (SIDS). The ultimate goal is to reduce the number of SIDS deaths in Canada.

The program's primary resource is *Back to Sleep*, a brochure that advises parents how to reduce the risk of SIDS.

Website: www.phac-aspc.gc.ca/dca-dea/prenatal/sids_e.html.

Reducing the Risk of Sudden Infant Death Syndrome			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$40,000	Health professionals, nurses, midwives, physicians, hospitals and public/community health centres	Parents of newborn children
2001–2002	\$50,000		
2002–2003	\$5,000		
2003–2004	\$20,000		
2004–2005	\$23,631		
2005–2006	\$17,350		
<p>Expenditures above include operations and management costs only.</p> <p>2000–2001: This is based on the quantities of resources disseminated. Potentially, parents of all newborn infants will receive this information.</p> <p>2001–2002: \$10,000 for resource dissemination and \$40,000 for tracking survey.</p> <p>2002–2003: Health Canada continued to disseminate materials; however, no new materials were developed in 2002–2003, resulting in a decrease in expenditures.</p> <p>2003–2004: Funds to reprint resources for continued distribution.</p> <p>2004–2005: Funds to host a workshop and reprint resources. There is no specific allocation of funding for this activity.</p> <p>2005–2006: Funds to reprint resources for continued distribution.</p>			

Chapter 3. Parenting and Family Supports

The programs and services described in this chapter provide parents and families with tools, guidance and supports to help ensure that children have the opportunity to grow, play and learn in environments that are safe, healthy and nurturing.

Activities and Expenditures

Canadian Food Inspection Agency

Food Safety Activity Book

This bilingual booklet combines fun activities with simple but important messages about food safety for children aged five to eight. The Canadian Food Inspection Agency (CFIA) distributes the activity book regionally at fairs and other events, and copies are sent to teachers and members of the public, upon request.

Website: www.inspection.gc.ca/english/corpaffr/educ/active5-8e.shtml.

Food Safety Activity Book			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Canadian Food Inspection Agency Exhibits and Web site and through Service Canada	Teachers, the general public and children
2001–2002	NA		
2002–2003	NA		
2003–2004	\$10,800		
2004–2005	\$ 4,254		
2005–2006	\$ 3,378		
<p>2003–2004: Expenditure includes the amount spent to develop and print the publication.</p> <p>2004–2005: Expenditures reflect the cost of supplementary printing.</p> <p>2005–2006: Expenditures reflect the cost of supplementary printing.</p>			

Section I

Health Canada

A Parent's Guide to Sun Protection

This series of public education pamphlets explains risks related to ultraviolet radiation and outlines what parents and caregivers can do to keep children safe from the sun's harmful rays.

Health Canada works with partners, such as public health units and community nurses, to ensure that the information reaches its target audience. *A Parent's Guide to Sun Protection* was originally published in 1992 and was developed into a Web-based resource in 1998.

Website: www.hc-sc.gc.ca/hl-vs/securit/sports/sun-sol/careful-soigneux_e.html.

A Parent's Guide to Sun Protection			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Health Canada Web site	Parents
2001–2002	NA		
2002–2003	NA		
2003–2004	NA		
2004–2005	NA		
2005–2006	\$3,515		
Note: The original document "The Sun, Your Baby and You - A Parent's Guide to Sun Protection" was produced in 1992 at a cost of \$250,000. In 1993, \$20,000 was used to reprint copies. It was adapted to the web as "A Parent's Guide to Sun Protection - Protecting your Family" in 1998. It was also further simplified as a fact sheet entitled "Babies, Children and Sun Safety" available at http://www.hc-sc.gc.ca/hl-vs/pubs/sun-sol/babies_child-bebes_enfant_e.html . The printing cost for 2005-2006 is for this simplified version.			

Consumer Product Safety Activities—Seven Activities

The objectives of Health Canada's Consumer Product Safety activities are to raise awareness among parents, grandparents, caregivers, educators, children and others about the risk of injuries associated with consumer products, and to offer safety tips to minimize the risks. The seven activities in this section are designed to work together to accomplish these objectives.

Website: www.hc-sc.gc.ca/cps-spc/pubs/cons/index_e.html - publications for parents
www.hc-sc.gc.ca/cps-spc/pubs/indust/index_e.html - publications for industry

- *Consumer Product Safety Education Bulletins*

These user-friendly public education bulletins focus on protecting young children from product-related injuries. Fact sheets highlight risks related to the use of cribs, lighters, matches, bunk beds, sleepwear and other products, and offer safety tips to prevent injuries to children.

New bulletins are added to the series as new safety issues emerge. Physicians, public health nurses, teachers, social workers and community service groups each play a role in making sure the information reaches parents and caregivers.

Website: http://www.hc-sc.gc.ca/cps-spc/pubs/cons/index_e.html.

Consumer Product Safety Education Bulletins			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$54,635	Physicians, public health nurses, teachers, community services (e.g., resource centres), social workers and hospital personnel	Families and children
2001–2002	\$46,935		
2002–2003	\$35,823		
2003–2004	\$41,631		
2004–2005	\$62,548		
2005–2006	\$13,364		
Expenditures include operations and management costs for reprinting various bulletins. Expenditures for this project fluctuate, depending on the number of new resources created and the demand for reprints of existing resources. 2005–2006 – several new bulletins were created and printed in this fiscal year.			

- *Consumer Product Safety Industry and Professional Guides*

The Industry Guides advise manufacturers, importers and retailers about safety requirements that products must meet before they can be sold in Canada. Examples include *Children’s Sleepwear: Flammability Requirement Guidelines* and *Information to Dealers of Secondhand Children’s Products*. The objective is to reduce injuries by encouraging industry to make children’s safety an integral part of the way products are designed, manufactured, labeled and advertised.

The Professional Guides are booklets on such topics as crib safety that assist professionals (doctors, public health nurses and social workers) in counseling parents and caregivers about minimizing the risk of injuries to children.

Website: http://www.hc-sc.gc.ca/cps-spc/pubs/indust/index_e.html.

Consumer Product Safety Industry and Professional Guides			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Industry Guide: manufacturers, importers and retailers Professional Guide: public health nurses, doctors, social workers, etc.	Industry Guide: manufacturers, importers and retailers of products to be sold in Canada Professional Guide: professionals working with families with young children
2001–2002	NA		
2002–2003	\$21,435		
2003–2004	\$12,570		
2004–2005	NA		
2005–2006	NA		
Expenditures include operations and management costs for printing and desktop publishing. 2004-2005: There has been no expenditure in this area as sufficient quantities were printed in the previous years to maintain supplies into this fiscal year. 2005-2006 No expenditures in this fiscal year related to children under 6.			

- *Corded Window Covering Awareness Initiative*

This initiative is designed to increase public awareness of the hazards related to corded window coverings and how to minimize the risks. The awareness initiative will be launched in 2005–2006.

Website: <http://www.healthcanada.gc.ca/blindcords>.

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Corded Window Covering Awareness Initiative

Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	News Canada, Physicians, public health nurses, social workers and hospital personnel	The general public
2001–2002	NA		
2002–2003	NA		
2003–2004	NA		
2004–2005	\$24,659		
2005–2006	\$75,425		
2004–2005 Expenditures include costs to develop and produce resources only. 2005–2006 Expenditures include printing of resources, disseminating the messages to paper, radio and T.V. across Canada			

- *Is Your Child Safe?*

This booklet helps parents and caregivers provide a safe environment for infants and young children by explaining how to minimize the risk of injuries related to cribs, pacifiers, strollers and toys. The overall goal is to improve the quality of children’s lives by reducing product-related injuries.

Doctors, public health nurses, social workers and hospital personnel give the booklet to parents and caregivers. Public health officials have described this resource as a “one- stop” booklet that makes parents aware of important safety issues.

Website: http://hc-sc.gc.ca/cps-spc/pubs/cons/child-enfant/index_e.html.

Is Your Child Safe?

Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Physicians, public health nurses, social workers and hospital personnel	Child care providers and families
2001–2002	\$47,474		
2002–2003	NA		
2003–2004	\$29,900		
2004–2005	NA		
2005–2006	\$38,110		
Expenditures include operations and management costs only. 2002–2003: Expenditure was revised in the 2003–2004 report because the reprint was delayed until 2003–2004. 2003–2004: Increase in funding is due to reprinting. 2004–2005: There were no expenditures because sufficient quantities were printed in previous years. This resource is undergoing revisions. 2005–2006: Includes costs to revise/expand and reformat this document – costs for designer and printing of the resource.			

- *Safety with “Radar” Activity Book*

“Radar” is Health Canada’s mascot for injury prevention. *The Safety with Radar Activity Book* has word games, puzzles and pictures that teach everyday safety to children in a fun way. The book features Radar’s safety tips for playground safety, bike safety, safety at bath-time and what to do in case of fire.

The booklet is given to families and children free of charge by public health nurses, social workers, teachers, community services representatives (e.g., fire and police departments) and hospital workers.

Website: http://hc-sc.gc.ca/cps-spc/pubs/cons/activitybook-cahierdexercices/index_e.html.

Safety with "Radar" Activity Book			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Physicians, public health nurses, social workers, teachers, hospital personnel and community services (e.g., fire and police departments)	Children
2001–2002	\$16,100		
2002–2003	\$46,595		
2003–2004	NA		
2004–2005	NA		
2005–2006	NA		
Expenditures include operations and management costs only. 2002–2003: Resource was revised and printed. Expenditures for this resource are done on an as needed basis. In 2002-2003, the resource was revised and sufficient quantities were printed for a few years. The resource remains in high demand by the public and by stakeholders.			

- *Stay Safe Program*

Stay Safe is a multi-component education program about household chemical safety that includes two teaching guides, one for child care providers and educators of preschool children, and another for elementary school teachers. Each teaching activity is linked to specific learning outcomes. An interactive Web site complements the teaching guides and invites user feedback to assist in ongoing program evaluation.

The Stay Safe preschool guide uses games, puppet shows, songs and stories to teach young children to recognize the four hazard symbols for household chemicals. The school-age guide builds on the pre-school program and suggests ways that older children can interact with younger ones to teach them the meaning of hazard symbols.

Website: www.healthcanada.gc.ca/staysafe.

Stay Safe Program			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Preschool teachers, social workers at resource centres, public health nurses, injury prevention specialists	Child care providers of preschool children. Primary teachers of young school-age children.
2001–2002	\$31,132		
2002–2003	\$208,330		
2003–2004	\$133,065		
2004–2005	\$427		
2005–2006	\$12,600		
Expenditures include operations and management costs only. 2001–2003: Expenditures related to development costs; program was launched in 2003–2004. 2004–2005: Expenditures represent ongoing cost of hosting the Web site. Expenditures decreased because there were no costs associated with development of the program for this year. 2005–2006: Expenditures represent cost of hosting the Web site and preparing another children's application for the Web site.			

- *Toy Safety*

Toy Safety activities revolve around the wide distribution of two publications aimed at reducing child injuries related to toys. The first, *Industry Guide to Canadian Safety Requirements for Toys and Related Products*, provides guidance to manufacturers, importers and retailers about safety regulations for toys sold in Canada. The second publication is *Toy Safety Tips*, a flyer that gives guidance to parents and other adults on purchasing and maintaining toys for young children.

Websites:

http://hc-sc.gc.ca/cps-spc/pubs/indust/toys-jouets/index_e.html - Industry Guide

http://hc-sc.gc.ca/cps-spc/pubs/cons/toy_safe-jouet_secur_e.html - Toy Safety Tips

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Toy Safety			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Industry Guide: product safety officers and the Consumer Product Safety Bureau Toy Safety flyer: physicians, public health nurses, social workers and hospital personnel	Industry Guide: manufacturers, importers and retailers of children's play products Toy Safety flyer: adults who purchase toys for young children
2001–2002	NA		
2002–2003	\$12,700		
2003–2004	\$21,093		
2004–2005	\$30,777		
2005–2006	NA		
Expenditures include operations and management costs only. 2002–2003: Expenditures related to development costs; activity was launched in 2003–2004. 2004–2005: Expenditures include publishing and distribution costs.			

Human Resources and Social Development Canada

National Literacy Secretariat—Family Literacy Projects

The National Literacy Program (now integrated under the Adult Learning, Literacy and Essential Skills Program - ALLESP) funds various family literacy projects and encourages other organizations throughout Canada to invest in literacy. The objective is to ensure that families, including parents, children and extended family members, have opportunities to develop literacy skills.

HRSDC recognizes that the family is where literacy begins, and that support for family literacy builds skills and fosters a commitment to continuous learning for the entire family.

Website: <http://www.hrsdc.gc.ca/en/hip/ld/nls/About/aboutus.shtml>.

National Literacy Secretariat—Family Literacy Projects			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$3,507,000	104 projects	Not available
2001–2002	\$3,123,000	90 projects	Not available
2002–2003	\$4,578,000	67 projects	Not available
2003–2004	\$3,839,749	51 projects	Not available
2004–2005	\$4,285,161	60 projects	Not available
2005–2006	\$3,425,830	59 projects	Not available
Expenditures include grants and contributions only. While most of the projects focus on developing literacy skills and tools for young children and their parents prior to school entry, some also include components not directly related to children, but which could not be separated from the overall expenditure figure. Expenditure amounts for 2000 to 2003 were adjusted in the 2003–2004 report to reflect revised reporting categories. 2000–2001 to 2002–2003: Expenditures were budgetary allocations. 2002–2003: The number of projects declined, since a select number were given increased funding for substantial initiatives. 2003–2004: Expenditures decreased due to one-time funding in 2002–2003. 2004–2005: Expenditures increased due to the approval of 10 four-year family literacy projects. 2005–2006: Expenditures decreased due to lesser levels of funding required per project as they are implemented.			

Public Health Agency of Canada

Canada's Physical Activity Guides for Children and Youth

These Guides were developed to help families, caregivers, teachers, physicians and community leaders understand the importance of physical activity to healthy growth and development, and to promote more regular physical activity among children.

The publications feature goals, guidelines and tools to help boost children’s active time and reduce their sedentary time. The Guides and other resource materials are available through a toll-free number (1-888-334-9769) and online.

Website: www.phac-aspc.gc.ca/pau-uap/paguide/child_youth/.

Canada’s Physical Activity Guides for Children and Youth			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$100,000 (estimate)	Children and youth intermediaries	Teachers, children, parents, caregivers, physicians and community leaders
2001–2002	\$200,000 (estimate)		
2002–2003	\$500,000 (estimate)		
2003–2004	\$300,000 (estimate)		
2004–2005	\$250,000 (estimate)		
2005–2006	\$210,984 (estimate)		
Expenditures include grants and contributions, and operations and management costs. Expenditures include children age six to nine. 2002–2003: Increase in expenditure due to printing costs. 2003–2004 and 2004–2005: Expenditures decreased because no expenditures occurred for development/productions. Costs incurred were for printing only. 2005–06: Decrease in expenditure due to slow summer, decrease for ordering requests.			

CAPC/CPNP National Projects Fund

The National Projects Fund (NPF) was created in 1997 to fund initiatives that support the objectives of the Canada Prenatal Nutrition Program (CPNP) and the Community Action Program for Children (CAPC). The NPF aims to support CAPC and CPNP projects across Canada directly, in an attempt to eliminate or minimize conditions of risk for pregnant women, and young children and their families.

Each year, the NPF enables national, regional or local not-for-profit organizations to undertake specific, time-limited initiatives that are national in scope and designed to generate knowledge and action about children, families and the role of the community in supporting families.

Website: http://phac-aspc.gc.ca/dca-dea/programs-mes/npf_main_e.html.

CAPC/CPNP National Projects Fund			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$398,311	CAPC/CPNP project staff	CAPC/CPNP project participants
2001–2002	\$947,621		
2002–2003	\$1,355,616		
2003–2004	\$1,709,016		
2004–2005	\$866,267		
2005–2006	\$1,190,618		
Expenditures include contributions only. 2004–2005: Fluctuation should not be interpreted as a decrease because funds were transferred directly to the regions to carry out National Project Fund objectives. Since these were direct transfers they were not included in expenditures.			

Community Action Program for Children

The Community Action Program for Children (CAPC) provides funding to community-based groups and coalitions to develop and deliver programs that promote the health and social development of children from birth to six years of age who are facing conditions of risk, and their families. CAPC emphasizes partnerships, community capacity building and other promotion strategies that influence the broader determinants of health.

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CAPC aims to reach the following groups of children:

- those who live in low-income families;
- those who live in teenage-parent families;
- those who are experiencing or are at risk of developmental delays or social, emotional or behavioural problems; and
- those who are experiencing or have been exposed to abuse and neglect.

Special consideration is also given to Métis, Inuit and off-reserve First Nations children; the children of recent immigrants and refugees; children in lone-parent families; and children living in isolated and remote communities.

In 2005-2006, approximately 440 CAPC projects operated in more than 3 000 communities across Canada.

Website: www.phac-aspc.gc.ca/dca-dea/programs-mes/capc_main_e.html.

Community Action Program for Children			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$59,500,000	462 projects (estimates)	57 038 children—47 234 parents/caregivers
2001–2002	\$59,500,000	465 projects (estimates)	60 729 children—50 435 parents/caregivers
2002–2003	\$59,500,000	459 projects (estimates)	66 468 children—52 136 parents/caregivers
2003–2004	\$58,509,249	450 projects (estimates)	59 039 children—52 483 parents/caregivers
2004–2005	\$60,595,297	450 projects (estimates)	65 603 children and parents/caregivers
2005–2006	\$60,867,980	440 projects (estimates)	67 884 children and parents/caregivers

Expenditures for 2000 to 2003 are allocations and include grants and contributions, operations and management costs, and salaries.

Numbers of projects are estimates, and were revised for the 2004–2005 report to better reflect the total number of projects for each reporting period, and not just those participating in the national evaluation.

Participant numbers do not include children and parents/caregivers from approximately 50 Aboriginal projects in Ontario that are a part of a separate evaluation.

Numbers of participants (children and parents/caregivers) are based on counts for each program, and represent participants in a typical month. A participant may access more than one program during the year and, as a result, may be counted more than once. Numbers of child participants may include children older than 6 years of age.

2003–2004: Expenditures include grants and contributions (actuals), operations and management costs (allocations), and salaries (allocations). The reduction in expenditures is due to a decrease in actual grants and contributions in response to departmental budgetary pressures.

2004–2005: Expenditures include grants and contributions (actuals), operations and management costs (allocations), and salaries (allocations).

Data on the number of CAPC participants in a typical month were not collected separately for child and adult participants due to modifications in the national evaluation system. The number of monthly participants (children and parents/caregivers combined) was estimated in a different way to reduce the chance of over-counting.

2005–2006: Expenditures include grants and contributions (actuals), operations and management costs (allocations), and salaries (allocations).

Nobody's Perfect

Nobody's Perfect provides parenting education and support to parents of children during the critical early years, from birth to age five. It is designed to meet the needs of parents who are young, single and socially or geographically isolated, or who have low incomes or limited formal education. The *Program* is built upon partnerships with the Provinces and Territories, as well as with non-governmental organizations (NGO's).

The program reaches approximately 12 000 to 20 000 parents every year in over 1 000 different project sites across Canada.

Website: www.phac-aspc.gc.ca/dca-dea/family_famille/nobody_e.html.

Nobody's Perfect			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$140,000	1 000+	12 000 parents
2001–2002	\$70,000	1 000	12 000 parents
2002–2003	\$132,112	1 000	12 000 parents
2003–2004	\$109,442	1 000	12 000 parents
2004–2005	\$110,500	1 000	12 000 parents
2005–2006	\$95,000	1 000 +	12 000 – 20 000 parents

Expenditures for 2000–2001 and 2001–2002 include operations and management costs only.
 2000–2001: Health Canada funding only. Additional implementation costs were covered by provincial and territorial governments.
 2001–2002: Includes national and administrative tasks and facilitating national networking to support initiatives. In addition to these activities, Health Canada also funded a status report on Nobody's Perfect (\$40,000), and revised a training manual and a facilitator's manual (\$30,000).
 2002–2003: Expenditures were revised in the 2003–2004 report to include operations and management costs and salaries. Justice Canada contributed \$30,000 in support of this activity.
 2003–2005: Expenditures include operations and management costs and salaries. Justice Canada contributed \$30,000 each year in support of this activity.
 2004–2005: Expenditures include operations and management costs as well as salaries. Justice Canada contributed \$25,000 in support of this activity.

Transport Canada

Keep Kids Safe Car Time 1-2-3-4

Car Time 1-2-3-4 is a public awareness campaign to provide parents and caregivers with information about the four stages of child safety in vehicles, including when and how to use a rear-facing infant seat, a forward-facing child seat and a booster seat. There are also tips on making car time a safe time for children.

Resource materials for the campaign include fact sheets and a booklet for parents, as well as a companion video for use by health professionals in community settings, such as prenatal classes.

Transport Canada has begun replacing the Keep Kids Safe program with four specific fact sheets related to the four stages of Car Time 1-2-3-4. Costs included in this estimate include maintenance of the older program and migration to the new program.

Free copies of all child restraint safety information may be ordered through a toll-free number (1-800-333-0371) and print materials are also available online.

Website: www.tc.gc.ca/roadsafety/childsafety/.

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Keep Kids Safe: Car Time 1-2-3-4			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$101,000	Video, booklet, Web site, and new individual fact sheets.	Parents and caregivers of children
2001–2002	\$150,000		
2002–2003	\$48,000		
2003–2004	\$72,200		
2004–2005	\$58,300		
2005–2006	\$53,000		
Expenditures include operations and management costs and salaries. Expenditures depend on redesign, printing and distribution costs. Fluctuations should not be viewed as increases or decreases. 2001 to 2003: Expenditures were updated in the 2004–2005 report to include previously unavailable information.			

Road Safety

Transport Canada is responsible for regulations and standards related to the safety of new vehicles, tires and child restraints. The Department also works with provincial and territorial partners to promote awareness of such issues as school bus safety and the correct use of appropriate child restraints.

Website: www.tc.gc.ca/roadsafety/.

Road Safety			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$356,000	This includes defect investigations, testing and regulations covering child restraint systems and school bus compliance and testing.	Parents and caregivers of children
2001–2002	\$396,000		
2002–2003	\$377,000		
2003–2004	\$469,400		
2004–2005	\$441,000		
2005–2006	\$484,000		
Expenditures include operations and management costs and salaries. Expenditures fluctuate depending on the cost of redesigning materials and printing and distribution costs. 2001 to 2003: Expenditures were updated in the 2004–2005 report to include previously unavailable information.			

Chapter 4. Early Childhood Development, Learning and Child Care

The initiatives described in this chapter respond to the diverse and changing needs of families by providing opportunities for children to interact, play and learn in environments that foster healthy development. The Government of Canada supports families through direct financial support and tax measures, as well as programs and services for Aboriginal families, for families of Canadian Forces members and for adult immigrants with young children.

Many programs described in other chapters also provide early development, learning and child care opportunities for children. Examples include a number of the dedicated services for First Nations, Inuit and Métis children and families (Chapter 6) and the Community Action Program for Children (Chapter 3).

Additional information about the Government of Canada's investments in early learning and child care for children can be found in Section II: Early Learning and Child Care Activities and Expenditures, Government of Canada Report 2004–2005 and 2005–2006.

Activities and Expenditures

Canada Revenue Agency

Canada Child Tax Benefit Supplement

The Canada Child Tax Benefit (CCTB) is a tax-free monthly payment made to eligible low- and middle-income families to help them with the cost of raising children under age 18. Families receiving the CCTB also receive a supplement if they are providing care for children under the age of seven at home. The amount of this CCTB supplement is reduced according to child care expenses that are claimed as an income tax deduction.

This report focuses only on the expenditure related to the CCTB supplement and does not track the government's expenditure on the full Canada Child Tax Benefit.

Additional information about the CCTB supplement is available online.

Website: www.cra-arc.gc.ca/benefits/.

Canada Child Tax Benefit Supplement			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$365,899,543	Not applicable	2 624 151 children—1 858 234 families
2001–2002	\$353,723,791	Not applicable	2 564 117 children—1 823 654 families
2002–2003	\$341,764,682	Not applicable	2 487 363 children—1 781 903 families
2003–2004	\$338,136,267	Not applicable	2 446 970 children—1 754 902 families
2004–2005	\$338,231,286	Not applicable	2 439 148 children—1 746 692 families
2005–2006	\$349,550,547	Not applicable	2 465 906 children—1 760 183 families

All expenses above are based on benefit years, July 1 to June 30 of each year.
2000–2006 Data about program expenditures and program availability were revised in the 2003-2004 report, from estimates of the number of claims for children under 6 to the actual number of claims for children under 7 years of age.

Child Care Expense Deduction

The Child Care Expense Deduction (CCED) is an income tax measure. It recognizes that child care expenses are a cost incurred by many parents, in order that they may be employed, operate a business, or pursue education.

The CCED provides an income tax deduction from a parent's or supporting person's income of up to \$7,000 for each child under age seven, \$4,000 for each child from 7 to 16 years of age, and \$10,000 for each child eligible for the disability tax credit.

For CCED purposes, child care expenses are defined as the amounts a parent or another supporting person pays to the following for the care of an eligible child:

- an eligible individual providing child care services;
- a day nursery school or day care centre;
- a day camp or day sports school;
- a boarding school or camp (including a sports school where lodging is involved); and
- an educational institution providing child care services.

Website: www.fin.gc.ca/toce/2005/taxexp05_e.html.

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Child Care Expense Deduction

Expenditures		Claims by individual tax filers
2000-2001	\$595,000,000	1 072 780 claims
2001-2002	\$530,000,000	1 080 210 claims
2002-2003	\$535,000,000	1 109 040 claims
2003-2004	\$535,000,000	1 137 840 claims
2004-2005	\$535 000,000	1 143 680 claims
2005-2006	\$545,000,000	1 099 240 claims

The expenditure amounts are the tax expenditures (or foregone taxes) related to the deduction, and not the total child care expense claims.

Estimates of federal tax expenditures are produced annually by the Department of Finance, and represent expenditures over a calendar year.

See www.fin.gc.ca/toce/2005/taxexp05_e.html.

Tax expenditure figures and the number of claims are for children of all ages. Data is not available for children under age 6.

These figures do not include operating expenditures to administer the deduction.

The number of claims reported is the total claims on which child care expenses were allowed as deductions for tax purposes.

Figures for 2000 to 2002 were revised in the 2003-2004 report to show the tax expenditures (or foregone taxes) related to the deduction. The 2002-2003 report indicated the total child care expense claims.

Figures for expenditures for 2003 through 2005 and the number of claims for 2005 are preliminary.

Citizenship and Immigration Canada

Language Instruction for Newcomers to Canada

The Language Instruction for Newcomers to Canada (LINC) program provides basic language training in one of Canada's official languages to adult newcomers so they may become participating members of Canadian society as soon as possible. An estimated 50 000 adult newcomers attended LINC classes at approximately 300 sites during 2005- 2006.

The program has a childminding component, which helps parents or legal guardians attend LINC classes by covering the cost of either licensed day care or on-site child care. The on-site LINC childminding programs benefit the children as well, because they have an opportunity to learn some English or French in a safe environment, with their parents or guardians on the premises.

Organizations that offer the on-site childminding services must meet national LINC childminding requirements.

Website: <http://www.cic.gc.ca/english/newcomer/welcome/wel-22e.html>.

Language Instruction for Newcomers to Canada

Expenditures	Sites	Children under 6 and their families
2000-2001	\$93,545,000	300 (estimate)
2001-2002	\$90,717,900	300 (estimate)
2002-2003	\$91,734,000	300 (estimate)
2003-2004	\$92,691,000	300 (estimate)
2004-2005	\$94,034,000	300 (estimate)
2005-2006	\$93,561,000	300 (estimate)

Expenditures are allocations and include grants and contributions only.

Does not include British Columbia, Manitoba and Quebec, which are covered by separate agreements.

All amounts above include adult language training, child care and transportation.

2004-2005: In 2004, the Integration Branch, in conjunction with the Finance Branch of Citizenship and Immigration Canada, carried out a review to ensure consistency in published expenditures, and modified previous years accordingly.

National Defence

Military Family Services Program

The Mission of the Military Family Services Program (MFSP) is to promote and facilitate community-based military family services that strengthen Canadian Forces families and communities. The MFSP is delivered by 41 Canadian/Military Family Resource Centres (C/MFRCs), which are third-party independent, not-for-profit organizations. C/MFRCs are located on bases, wings and units. These Centres provide a wide variety of programs for families, including information and referral, services for children and youth, and prevention and intervention services related to deployment, including emergency child care, respite child care and casual child care.

The programs and services are used by Canadian Forces families both in Canada and many out of country locations including, Europe, the United Kingdom and the United States.

Website: www.cfpsa.com/en/psp/DMFS/index.asp.

Military Family Services Program			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$4,000,000 (estimate)	15 000 services in 45 sites (estimates)	8 000 children; 35 000 families
2001–2002	\$4,000,000 (estimate)	15 000 services in 45 sites (estimates)	8 000 children; 35 000 families
2002–2003	\$4,000,000 (estimate)	Not available	Not available
2003–2004	\$4,000,000 (estimate)	42 sites	8 000 children (estimate)
2004–2005	\$4,000,000 (estimate)	42 sites	8 000 children (estimate)
2005–2006	\$4,000,000 (estimate)	41 sites	8 000 children (estimate)
Expenditures include grants and contributions, operations and management costs, and salaries, and are estimates for children from birth to six years of age. 2000–2002: The number of sites includes mandated services (available at every site) and site-specific services based on local need and supported by the local Commanding Officer and/or other sources of funding. It also indicates the total frequency of programs and not the number of programs offered (e.g., the same program might be offered several times throughout the year). Includes 31 sites in Canada, plus 3 Canadian/Military Family Resource Centres in the United States, including Canadian Military Outreach Services at Tyndall AFB, 7 in Europe and other remote, out-of-country locations. 2003–2004: Numbers of children were revised in the 2004–2005 report to indicate individual participation. 2004–2005 and 2005–2006: Number of children indicates individual participation.			

Chapter 5. Community Supports

Community Support programs and services work to strengthen communities to promote and protect the well-being of young children and their families. They include programs focused on literacy, early childhood intervention and parenting supports. Many of these programs are featured in other chapters, including the Brighter Futures and Aboriginal Head Start programs (Chapter 6), the National Literacy Secretariat—Family Literacy Projects and the Community Action Program for Children (Chapter 3), and the Understanding the Early Years pilot project (Chapter 7).

Section I

Activities and Expenditures

National Police Service, Royal Canadian Mounted Police

National Missing Children Services

National Missing Children Services (NMCS) primarily assists law enforcement officials in the search, recovery and return of missing children, and trains police in these activities.

NMCS also maintains a database on missing children, conducts original research, writes a yearly reference report on Canada's missing children, and develops reader-friendly brochures and other information to help Canadians keep their children safe. NMCS publications are available online.

Website: www.ourmissingchildren.gc.ca.

National Missing Children Services		
Expenditures	Delivery Agent	The activity reaches
2000–2001	Law enforcement and police, parents, professionals and the media	Canada's children and families
2001–2002		
2002–2003		
2003–2004		
2004–2005		
2005–2006		
2000- 2004: These expenditures are consistent every fiscal year and are allocations for operations and management costs based on what was spent in previous years. It is not possible to determine a precise figure related to children from birth to six years of age and their families 2004–2005: Increase in expenditures due to increase in salaries and operations and management costs.		

Public Safety and Emergency Preparedness Canada

National Crime Prevention Strategy

The National Crime Prevention Strategy (NCPS), administered by the National Crime Prevention Centre aims to provide national leadership on effective and cost-effective ways to prevent and reduce crime and victimization by addressing known risk factors in high risk populations and places.

The National Crime Prevention Centre (NCPC) provides grants and contributions, along with tools, knowledge and expertise, to communities dealing with the root causes of crime. Many projects funded by NCPC help communities and families address known risk factors in children's lives, such as abuse, poverty, and drug and alcohol abuse.

In the area of public outreach, the NCPC has developed videos, public service announcements, facts sheets and other publications. The NCPC Web site features links to these resources as well as information about projects, funding and evaluations.

Website: www.publicsafety.gc.ca/ncpc.

National Crime Prevention Centre (NCPC)			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$1,370,000	Funding recipients including volunteer and professional not-for-profit organizations, community-based groups, Aboriginal communities, provincial, municipal and regional governments, police, and the health and recreation community.	Canada’s children and families
2001–2002	\$1,378,000		
2002–2003	\$2,628,000		
2003–2004	\$1,946,592		
2004–2005	\$2,446,000		
2005–2006	\$2,223,000		
<p>Prior to December 12, 2003, this program was part of the Department of Justice. The amounts above represent the funding provided by the NCPC (through grants and contributions) for projects related to children up to 12 years of age. It is difficult to distinguish the exact amount of money that went to children under 6 and their families. Increase or decrease in expenditures are due to the number of projects funded and/or funds requested.</p>			

Chapter 6. Dedicated Services for First Nations, Inuit and Métis Children and Families

This chapter discusses activities and expenditures related to programs and services for First Nations, Inuit and Métis children and families including programs that were enhanced under the Federal Strategy on Early Childhood Development for First Nations and Other Aboriginal Children.

Health Canada, Human Resources and Social Development Canada, Indian and Northern Affairs Canada, Public Health Agency of Canada

Federal Strategy on Early Childhood Development for First Nations and Other Aboriginal Children

The goal of the Federal Strategy on Early Childhood Development for First Nations and Other Aboriginal Children, announced in October 2002, is to address the gap in life chances between Aboriginal and non-Aboriginal children.

This initiative provides \$320 million over five years in the following four areas:

- working towards better integration of federal early childhood development (ECD) programs and services, including support for joint planning, joint training and co-location;
- building capacity and networks, through annual funding to six national Aboriginal organizations (the Assembly of First Nations, Inuit Tapiriit Kanatami, Congress of Aboriginal Peoples, Métis National Council, Native Women’s Association of Canada, and Pauktuutit Inuit Women’s Association), as well as support for the development of an Aboriginal service providers’ network, now called Aboriginal Children’s Circle of Early Learning (www.accel-capea.ca/index_en.htm)²;
- advancing research and knowledge, including development of the Aboriginal Children’s Survey; and
- making new investments to enhance existing programs (Aboriginal Head Start in Urban and Northern Communities, Aboriginal Head Start On Reserve, and the First Nations and Inuit Child Care Initiative) and to intensify efforts to address Fetal Alcohol Spectrum Disorder in First Nations communities.

² The launch of the ACCEL Web site was mentioned in the 2003–2004 report. However, since the launch took place during 2004–2005, with development continuing into 2005–2006, the activity and its associated expenditure are recorded officially in this report.

Section I

Four federal departments, Health Canada, Human Resources and Social Development Canada, Indian and Northern Affairs Canada, and the Public Health Agency of Canada work collaboratively to undertake these activities.

The descriptions of programs and expenditures in the fourth area (above) are outlined later in this chapter along with other programs dedicated to First Nations and other Aboriginal children and families.

Working Towards Better Integration of Early Childhood Development Programs and Services

The four departments involved in the Federal Strategy have been working towards better integration and coordination of federal Aboriginal Early Childhood Development (ECD) programming. This includes such activities as:

- developing a series of papers on best practices/case studies on the integration of ECD programs at local and regional levels;
- doing a comparative analysis of federal Aboriginal ECD program data collection; and
- conducting research on current trends in child care and ECD programming in Canada.

The objective has been to assess whether a “single window” approach to ELCC programming is viable within the context of a national early learning and child care initiative.

Website: Not available

Working Towards Better Integration of Federal Early Childhood Development Programs and Services			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Health Canada, Human Resources and Social Development Canada, Indian and Northern Affairs Canada, and the Public Health Agency of Canada	Front-line workers, national aboriginal organizations
2001–2002	NA		
2002–2003	\$1,003,100		
2003–2004	\$993,500		
2004–2005	\$993,500		
2005–2006	\$993,500		
Expenditures are allocations and include contributions, operations and management costs, and salaries.			

Building Capacity and Networks

As part of the Federal Strategy’s capacity-building component, funding was provided annually to six national Aboriginal organizations: the Assembly of First Nations, Inuit Tapiriit Kanatami, Congress of Aboriginal Peoples, Métis National Council, Native Women’s Association of Canada, and Pauktutit Inuit Women’s Association.

In 2004–2005, the funding enabled these organizations to contribute to the development of the Federal Strategy through strategic planning and capacity building in their own organizations. The funding also supported work on developing terms of reference and selecting sites for case studies on community best practices related to the integration of ECD programs.

Funding from the Federal Strategy also continued to support the development of an Aboriginal service providers’ network, which is now called the Aboriginal Children’s Circle of Early Learning.

Website: Not available

Building Capacity and Networks			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Health Canada, Indian and Northern Affairs Canada and national Aboriginal organizations	Other Aboriginal organizations and service providers
2001–2002	NA		
2002–2003	\$1,373,200		
2003–2004	\$1,373,200		
2004–2005	\$1,373,200		
2005–2006	\$1,373,200		
Expenditures are allocations and include contributions, operations and management costs, and salaries.			

Advancing Research and Knowledge—Aboriginal Children’s Survey

This research activity has been led by Human Resources and Social Development Canada, in consultation with Indian and Northern Affairs Canada, Health Canada, and the Public Health Agency of Canada.

Aboriginal Children’s Survey (ACS)

Loosely based on the design of the National Longitudinal Survey on Children and Youth (NLSCY), the primary purpose of the ACS is to gather relevant information about factors that influence a child’s social, emotional and behavioural development and will provide an accurate picture of ECD and the well-being of Canada’s young Aboriginal children. Program objectives include the following:

- to determine the prevalence of various health, social and economic characteristics and factors affecting Aboriginal children;
- to contribute to our understanding of the impact of such factors, life events and protective factors on the development of Aboriginal children, viewed holistically; and
- to provide this information to policy and program officials for use in developing effective policies and strategies to help Aboriginal children live healthy, active and rewarding lives.

Websites: <http://www.statcan.ca/english/aboriginal/acs/acs-en.htm>.

Advancing Research and Knowledge—Aboriginal Children’s Survey			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Human Resources and Social Development Canada and Statistics Canada	Governments, non-governmental organizations, Aboriginal organizations, service providers, researchers and parents of Aboriginal children
2001–2002	NA		
2002–2003	\$4,212,600		
2003–2004	\$4,300,000		
2004–2005	\$1,200,000		
2005–2006	\$1,800,000		
2000–2003: Expenditures are allocations and include contributions, operations and management costs, and salaries. 2003–2004: The expenditure figure represents the sum of actual expenses for the Aboriginal Children’s Survey (\$3,600,000) and the allocation for Aboriginal UEY (\$700,000). Expenditures were revised in the 2004–2005 report to reflect actual expenditures for start-up of the Aboriginal Children’s Survey program and feasibility study. 2004–2005: Expenditures are actual expenses for the Aboriginal Children’s Survey (\$1,200,000). 2005–2006 Expenditures are actual expenses for the Aboriginal Children’s Survey (\$1,800,000).			

Section I

Other Activities and Expenditures

Health Canada

Aboriginal Head Start On Reserve

Aboriginal Head Start On Reserve (AHSOR) is an early intervention program for First Nations children (children from birth to six years of age) living on reserve, and their families. It is intended to prepare these children for their school years by meeting their emotional, social, health, nutritional and psychological needs.

The budget of the AHSOR program in 2004-2005 was \$46.5 million, including \$21.5 million annually in enhanced funding under the Federal Strategy. In 2005-2006, an additional \$7.5 million in Early Learning and Child Care (ELCC) funds were added to the Head Start budget. This brought the AHSOR budget in 2005-2006 to \$54 million.

Additional information, including a description of program standards and links to newsletters and annual reports, is available online.

Website: www.hc-sc.gc.ca/fnih-spni/famil/develop/ahsor-papa_intro_e.html.

Aboriginal Head Start On Reserve			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$24,398,500	314	6 467 children
2001–2002	\$22,625,300	307	7 150 children
2002–2003	\$34,727,000	307	7 429 children
2003–2004	\$35,095,244	354	9 101 children
2004–2005	\$41,462,356	332	9 415 children
2005–2006	\$50,165,212	NA	NA

Expenditures include grants and contributions, operations and management costs, and salaries. Figures for 2000–2001 and 2001–2002 were revised in the 2003–2004 report to reflect actual expenditures. 2001–2002: This does not include Northern Equity Funds transferred to Health Canada's Population and Public Health Branch (now PHAC). 2002–2003: Due to the late announcement of the Federal Strategy (October 2002), full annual funding of \$46.5 million could not be expended in this fiscal year. All available funding was allocated to meet other regional health program needs, including support for services First Nations have identified as priorities. 2003 to 2005: Full annual funding of \$46.5 million could not be expended in these fiscal years. All available funding was allocated to meet regional health program needs, including those services that First Nations have identified as priorities. 2004-2005: The change in the number of sites is actually negligible as the decrease in 2004-2005 is due to a change in some regions in how this data is reported. 2005-2006: Full allocated funding of \$54 million could not be expended. All available funding was allocated to meet regional health program needs, including those services that First Nations have identified as priorities.

Brighter Futures

Brighter Futures assists First Nations and Inuit communities in developing holistic, culturally appropriate programs for community mental health, child development, injury prevention, parenting and healthy babies. The program has a special emphasis on children, but it also recognizes that the needs of children cannot be separated from the needs of their families and communities.

Communities may use Brighter Futures funding for awareness and prevention activities related to such matters as family violence, suicide and its aftermath, counselling and parenting courses, as well as cultural activities. During 2004–2005, the Brighter Futures program provided these kinds of services to an estimated 600 community sites overall.

Website: Not available

Brighter Futures			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$20,129,689	650	45 000 children (estimate)
2001–2002	\$18,648,825	650	NA
2002–2003	\$18,072,683	650	NA
2003–2004	\$17,827,695	650	NA
2004–2005	\$18,889,616	Approx 600	NA
2005–2006	\$31,202,914	Approx 600	NA

Expenditures above include grants and contributions, operations and management costs, and salaries. While this program has a special emphasis on children, it cannot accurately determine, in any fiscal year, how many children are served through its wide range of activities.

2000–2004: Expenditures were revised in the 2004–2005 report.

2001 to 2005: Some First Nation communities assumed control over their health services through the Health Services Transfer process, and no longer provide information on Brighter Futures. Through the Health Services Transfer Agreements, funds are removed from the Brighter Futures allocation and placed in the Transfer allocation. Therefore, while the expenditure allocated to Brighter Futures may appear to have decreased, there has been no loss of funds to the community or the Brighter Futures Program.

2005–2006: Expenditures included in Integrated Agreements are now reported using Brighter Futures codes. For previous years, these expenditures were not reported using the Brighter Futures code but were using a separate, Integrated Agreements code.

Canada Prenatal Nutrition Program: First Nations and Inuit Component

This program is for First Nations and Inuit women who are pregnant or have infants up to one year of age. The program is offered in most First Nations and Inuit communities. The goal is to improve the nutritional health of mothers and infants.

Communities tailor services to meet local needs and priorities related to nutrition screening, education and counselling; maternal nourishment; and breastfeeding promotion and support. The most common activities include the following:

- the provision of food or food vouchers to provide the key nutrients essential for a healthy pregnancy;
- community kitchens focused on skills development, where a menu is planned and food is prepared and eaten by participants or taken home to families;
- breastfeeding promotion and counselling;
- workshops on making baby food and other educational activities related to infant nutrition, such as age-appropriate introduction of foods and preventing iron deficiency anaemia; and
- nutrition education for women in group and one-on-one sessions dealing with such topics as reading food labels and meeting nutritional recommendations

In 2004–2005 and 2005–2006, more than 9 000 women participated in the program through approximately 450 projects serving more than 600 communities.

Website: http://www.hc-sc.gc.ca/fnih-spni/pubs/home-domicile/2000_cp-pc_rev-exam/04_cpnp-pcnp_nutrition_e.html.

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Canada Prenatal Nutrition Program: First Nations and Inuit Component			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$7,248,468	450 projects (estimate)	6 000 women (and families) (estimate)
2001–2002	\$9,353,462	450 projects (estimate)	6 000 women (and families) (estimate)
2002–2003	\$8,865,174	450 projects (estimate)	6 000 women (and families) (estimate)
2003–2004	\$9,343,400	450 projects (estimate)	6 000 women (and families) (estimate)
2004–2005	\$8,902,031	450 projects (estimate)	9 000 women (and families) (estimate)
2005–2006	\$9,328,012	450 projects (estimate)	9 000 women (and families) (estimate)
<p>2000–2006: Up to 50% of projects have been included in Health Services Transfer Agreements in which the community has greater flexibility in the management of its resources and detailed financial reporting on expenditures is not mandatory. This makes it difficult to pinpoint actual expenditures though the full annual funding allocation, beginning in 2001-2002, is \$14,100,000.</p> <p>The expenditures that have been reported are provided above, and include: grants and contributions, and operating and management costs.</p> <p>Financial figures for 2000 to 2005 were revised in the 2004–2005/2005–2006 report to reflect reported expenditures.</p>			

Fetal Alcohol Spectrum Disorder Program: First Nations and Inuit Component

Under the Federal ECD Strategy for First Nations and Other Aboriginal Children, new investments were provided to intensify efforts to address Fetal Alcohol Spectrum Disorder (FASD) in First Nations communities. The new investments totaled \$10 million in 2002–2003, and \$15 million annually starting in 2003–2004.

The FASD program is focused on preventing FASD births and improving the quality of life of those affected by FASD. Actions to achieve these goals include the following:

- building awareness of FASD in First Nations and Inuit communities;
- targeted interventions for women at risk of having a child with FASD;
- collaborative work with communities to address the broader determinants of health;
- education and training for frontline workers and health professionals with First Nations and Inuit clients; and,
- earlier diagnosis and earlier intervention for pre-school aged children with FASD and their families.

Website: http://www.hc-sc.gc.ca/fnih-spni/famil/preg-gros/intro_e.html.

Fetal Alcohol Spectrum Disorder Program: First Nations and Inuit Component			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$1,311,800	National Aboriginal organizations, federal and regional departments, Health Canada programs, day cares, doctors, regional Inuit organizations, and all Chiefs committees	Stakeholders who serve families and children
2001–2002	\$1,658,000		
2002–2003	\$1,658,000		
2003–2004	\$7,251,413		
2004–2005	\$10,729,173		
2005–2006	\$14,860,871		
<p>Expenditures include grants and contributions, operations and management costs, and salaries.</p> <p>2002-2006: Full allocated funding could not be expended. All available funding was allocated to meet regional health program needs, including those services that First Nations have identified as priorities.</p>			

Maternal Child Health (MCH) Program for First Nations and Inuit

Background

Funding for the MCH program was announced in Budget 2005. This program is designed to provide maternal child health services, on reserve, comparable to what is provided to other provinces/territories; as well as to enhance the health promotion programs that Health Canada (HC) provides for Aboriginal people living in the North³.

Planning and Implementation

Planning for the MCH Program in First Nations communities, on reserve, took place in 2005-2006. During the first half of 2006-07, program materials were prepared with input from regional FNIHB and First Nations partners. The program is currently being introduced to approximately 5-10 communities in each Region across the country.

In the North, funding from the MCH program has been provided to enhance existing health promotion programs (CPNP and FASD) for pregnant Aboriginal women and families with infants/young children living in these areas.

Website: Not available

Maternal and Child Health			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	First Nations communities that have been identified through regional planning processes. CPNP and FASD programs enhanced in the North.	Pregnant First Nations and Inuit women and families with infants/young children.
2001–2002	NA		
2002–2003	NA		
2003–2004	NA		
2004–2005	NA		
2005–2006	\$2,950,567		
Expenditures above include grants and contributions, operations and management costs, and salaries. 2005–2006: Full allocated funding of \$5 million could not be expended. All available funding was allocated to meet regional health program needs, including those services that First Nations have identified as priorities.			

Human Resources and Social Development Canada

First Nations and Inuit Child Care Initiative

The First Nations and Inuit Child Care Initiative (FNICCI) supports First Nations and Inuit communities in developing and implementing child care programs designed to address their local and regional needs. The objective of the initiative is to increase the supply of quality child care services in First Nations and Inuit communities.

Website: www17.hrdc-drhc.gc.ca/AHRDSInternet/general/public/ChildCare/FNICCI_e.asp.

³ The North includes the territories, Nunavik and Nunatsiavut.

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First Nations and Inuit Child Care Initiative		
Expenditures		Children under 6 and their families
2000–2001	\$41,000,000	7 000 spaces
2001–2002	\$41,000,000	7 000 spaces
2002–2003	\$50,140,000	7 000 spaces
2003–2004	\$50,140,000	7 500 spaces
2004–2005	\$50,140,000	7 500 spaces
2005–2006	\$57,140,000	7 500 spaces

Expenditures are budgetary allocations and include program and operating resources (including Employee Benefit Plan). Also included are infrastructure dollars.

All amounts are for children under age 12, but are mostly for children under 6 years of age.

Data about the number of children served is not available.

2002–2003: Funding was increased by \$9 million under the Federal Strategy on Early Childhood Development for First Nations and Other Aboriginal Children.

2005–2006: Funding was increased by \$7.0 million under the Enhanced Early Learning and Child Care for First Nations Children Living on Reserve and Working Towards the First Phase of a Single Window, to support joint planning, training, and capital.

Indian and Northern Affairs Canada

Child/Day-care Program—Alberta

The Government of Canada has a financial and administrative agreement with the Government of Alberta through which Canada directly funds more than 800 First Nations child care spaces on reserve. The purpose is to provide early childhood development programming and learning services that are comparable to the services offered by the provincial government to people living off reserve.

During 2005-2006, the program funded 812 spaces, which were shared by 1 157 children under age 12 at 17 child care centres.

Website: <http://www.ainc-inac.gc.ca>.

Child/Day-care Program—Alberta			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$2,665,000	17	1 046 children
2001–2002	\$2,665,000	17	1 113 children
2002–2003	\$2,665,000	17	1 006 children (estimate); 812 spaces
2003–2004	\$2,502,620	15	976 children; 762 spaces
2004–2005	\$3,418,135	17	812 spaces
2005–2006	\$4,058,657	17	812 spaces, 1 157 children

Expenditures are allocations and include grant and contribution funding only.

Some of the children accessing the services are between the ages of 6 to 12.

2002–2003: Number of children for 2002–2003 has been revised in the 2004–2005 report.

2003–2004: Expenditures decreased due to two day care centres not meeting provincial licensing standards. Day care centres are not funded unless provincial standards are met.

2004–2005: Expenditures increased as the two day cares that were not licensed in 2003–2004 received provincial licences for 2004–2005. Day care centres are not funded unless provincial standards are met. In addition, the 2004–2005 figure includes the provincial bill of approximately \$750,000 for First Nations children who are ordinarily residents on reserve, but are accessing daycare services off reserve.

2005–2006: Figure includes INAC expenditures of \$2,668,135 and an increased provincial bill of \$1,390,522 for which INAC reimburses the province for daycare subsidies for First Nations children who are ordinarily residents on-reserve, but are accessing daycare services off-reserve.

Provincial bill also includes the cost of provincial licensing fees.

Child/Day-care Program—Ontario

The Government of Canada has a financial agreement with the Government of Ontario to support child care services on reserve. The purpose is to provide early childhood programming and learning services comparable to those offered by the provincial government to people living off reserve.

During 2004–2005, the program provided services for 2 799 children under age six at 57 program sites in 52 First Nations communities. Information about the number of regulated spaces was not available. Data reported is on the number of children served and the number of First Nations offering child care programs. A single First Nations community could offer multiple child care programs. In 2005–2006, 57 program sites in 52 First Nations communities provided services for 2 951 children.

Website: <http://www.ainc-inac.gc.ca>.

Child/Day-care Program—Ontario			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$12,177,000	67 programs	2 097 spaces
2001–2002	\$13,407,000	51 First Nations with 57 programs	3 243 children
2002–2003	\$14,291,000	51 First Nations with 57 programs	3 018 children
2003–2004	\$15,367,292	51 First Nations with 57 programs	2 797 children
2004–2005	\$15,517,348	52 First Nations with 57 programs	2 799 children
2005–2006	\$15,582,150	52 First Nations with 57 programs	2 951 children

Expenditures are allocations and include grant and contribution funding only.
 2001–2002: Expenditures do not include the provincial share of expenditures. In 2001–2002, Indian and Northern Affairs Canada’s regional office in Ontario began collecting and reporting data for this program by the number of First Nations offering child care programs. A single First Nations community can offer multiple child care programs.

Elementary/Secondary Education Program (Kindergarten to Grade 12)

Indian and Northern Affairs Canada supports First Nations in the delivery of elementary and secondary programs (K–12) to students on reserve. The support is to provide programs that are comparable to those required in the province or territory of residence, or to arrange for students living on reserve to attend provincial schools. The objective is to provide students on reserve with high-quality, culturally relevant education that supports lifelong learning from elementary/secondary education to post-secondary education.

First Nations use Elementary/Secondary Education Program funding for the following purposes:

- I.** instructional costs in First Nations-operated and federal schools;
- II.** reimbursement of costs of on-reserve students attending provincial and territorial schools;
- III.** student support services, such as transportation, counselling, and accommodation;
- IV.** school board-type services; and
- V.** special education programs and services

Website: http://www.ainc-inac.gc.ca/ps/edu/index_e.html.

Section I

Elementary/Secondary Education: K4-K5 Expenditures

Elementary/Secondary Education: K4-K5 Expenditures			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$33,055,000	384	13 793 children
2001–2002	\$32,388,000	387	13 409 children
2002–2003	\$34,615,000	387	13 846 children
2003–2004	\$51,408,500	380 First Nations schools	13 483 children
2004–2005	\$50,417,250	414 First Nations schools, 6 federal schools, 207 private schools and 1 807 provincial school	13 239 children
2005–2006	\$51,754,300	418 First Nations schools, 6 federal schools, 217 private schools and 1 851 provincial schools	13 325 children

Expenditures from 2000 to 2005 are estimates based on the number of children enrolled in Kindergarten programs in First Nations, federal, provincial or private schools.

First Nation Child and Family Services Head Start—New Brunswick

The main objectives of this program are to maintain the strength of the family unit; assist children facing physical, emotional, social and/or educational deprivation; and protect children from harmful environments.

The First Nation Child and Family Services Head Start—New Brunswick program operates at 15 different sites, offering centre- or home-based care for children under six and services for parents.

Website: <http://www.ainc-inac.gc.ca>.

First Nation Child and Family Services Head Start—New Brunswick

First Nation Child and Family Services Head Start—New Brunswick			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$1,544,000	15	Not available
2001–2002	\$1,466,000	15	381 children
2002–2003	\$1,408,000	15	Not available
2003–2004	\$1,408,000	15	Not available
2004–2005	\$1,408,000	15	Not available
2005–2006	\$1,408,000	15	Not available

Expenditures are allocations and include contribution funding only.
This funding is calculated using the registered on-reserve population (children from birth to 6 years of age). If a child becomes 7 years of age prior to completion of the case plan, his or her case will still be included.

First Nations National Child Benefit Reinvestment Initiative

The National Child Benefit Reinvestment Initiative (NCBR) is a partnership among federal, provincial and territorial governments and First Nations that helps prevent and reduce the depth of child poverty, while supporting parents as they move into the labour market.

Under the NCB Initiative, the Government of Canada has increased the benefits it pays through the NCB Supplement to low-income families with children, regardless of their source of income. At the same time, most provinces, territories and First Nations have reduced income assistance benefits provided to these families by the full or partial amount provided under the NCB Supplement. These income assistance adjustments have allowed provinces, territories and First Nations to create a savings envelope which is used to pay for new and enhanced benefits and services for low-income families with children.

No family in any jurisdiction receiving income assistance experienced a reduction in its overall level of income support as a result of the National Child Benefit Initiative.

Website: http://www.ainc-inac.gc.ca/pe-cp/ncb_e.html.

First Nations National Child Benefit Reinvestment Initiative			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$4,080,000	Health centres, family resource centres and child care providers	Families and children 0 to 18 on reserve
2001–2002	\$2,102,735		
2002–2003	\$1,931,483		
2003–2004	\$2,615,800		
2004–2005	\$7,318,200		
2005–2006	NA		

Expenditures include contribution funding only. It is important to note that while the NCB Initiative is for all children 0 to 18 and their families living on reserve, reporting is done by reinvestment area rather than by age group. The figures reported represent expenditures in two of the possible reinvestment areas: Child/Day Care and Support for Parents (formerly called Early Childhood Development). The other reinvestment areas of Child Nutrition, Home to Work Transition (formerly known as Employment Opportunities/Training), and Cultural Enrichment (formerly known as Community Enrichment) are outside the scope of this report. The variation in expenditures between the reporting years can be attributed to the fact that First Nations have the ongoing flexibility to reinvest in any of the 5 reinvestment areas, in any given year. Beginning in 2003–2004, Manitoba opted to pay all children's benefits directly to families. Therefore, reinvestment funds are no longer available.

Public Health Agency of Canada

Aboriginal Head Start in Urban and Northern Communities

Aboriginal Head Start in Urban and Northern Communities (AHSUNC) is a comprehensive early intervention program for First Nations, Inuit and Métis children and their families living in urban centres and large northern communities. It is primarily a preschool program that prepares young Aboriginal children for school by meeting their spiritual, emotional, intellectual and physical needs.

Additional information about the program's values, mandate and components is available online.

Website: www.phac-aspc.gc.ca/dca-dea/programs-mes/ahs_main_e.html.

Aboriginal Head Start in Urban and Northern Communities			
Expenditures		Sites	Children under 6 and their families
2000–2001	\$22,500,000	114	3 200 children
2001–2002	\$22,500,000	114	3 536 children
2002–2003	\$25,821,117	114	3 616 children
2003–2004	\$31,241,000	128	4 122 children
2004–2005	\$31,466,853	131	3 980 children
2005–2006	\$31,214,713	131	4 500 children

2002–2003: Due to the late announcement (October 2002), full annual funding of \$35 million could not be fully allocated in the fiscal year. Actual expenditure for contributions was \$25,821,117. Expenditures for 2002–2003 were revised from allocations to actuals in the 2003–2004 report.

2003–2004: Expenditures include actual contributions (including regions), salaries and other operating costs for the national office only. The number of sites increased to 128 from December 2003 to March 2004, but most of the new sites did not enroll children until the fall of 2004.

2004–2005: Expenditures include actual contributions, salaries and other operating costs for the national office and regions with the exception of the Northern Secretariat. Northern Secretariat expenditures are not available by program. The participation rates for 2004–2005 are slightly lower because four sites experienced temporary closures. They will reopen under new sponsorship. In addition, there are a number of new sites to be launched in 2005. With these new developmental spaces, Aboriginal Head Start in Urban and Northern Communities will host a total of 4 500 child spaces

2005–2006: Expenditures include actual contributions, salaries and other operating costs for the national office and regions with the exception of the Northern Secretariat. Northern Secretariat expenditures are not available by program.

Section I

Chapter 7. Research and Information

The Government of Canada’s investments in research and information are described in this chapter. Investments include the collection of data such as the National Longitudinal Survey of Children and Youth, as well as public education such as a campaign to reduce the exposure of children to secondhand smoke, research that identifies factors associated with aggression in toddlers, and a project to gauge the benefits of enriched literacy services for children living in official minority language communities.

Some research and information activities funded by the Government of Canada are described in other chapters. One example is the Aboriginal Children’s Survey, which is featured in Chapter 6 in the section outlining the Federal Strategy on Early Childhood Development for First Nations and Other Aboriginal Children

Activities and Expenditures

Canadian Institutes of Health Research

CIHR - Institute of Human Development, Child and Youth Health (IHDCYH)

As one of CIHR’s Institutes, IHDCYH promotes and supports the creation and application of knowledge that contributes to the improvement of the health of children, youth, and mothers in Canada and throughout the world.

As a life-cycle based Institute, IHDCYH has a broad mandate that covers defined time periods and a wide range of issues pertaining to human development: pre-conception; fertilization; embryonic and fetal development; the health of the mother; and child health and development.

As a virtual institute, IHDCYH supports and links researchers located in universities, hospitals and other research centres across Canada.

Website: www.cihr-irsc.gc.ca/e/8688.html.

Institute of Human Development, Child and Youth Health			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$14,600,000 (estimate)	Web site	Canadian health researchers
2001–2002	\$22,400,000 (estimate)		
2002–2003	\$31,800,000 (estimate)		
2003–2004	\$37,000,000 (estimate)		
2004–2005	\$41,000,000 (estimate)		
2005–2006	\$49,000,000 (estimate)		
<p>Expenditures are estimates for activities related to pregnancy, birth and early childhood. Total expenditures could only be calculated to an amount plus or minus \$500,000. Expenditures include grants and contributions, and salaries for researchers or trainees.</p> <p>2003–2004 and 2004–2005: Expenditures increased as there were increases in the total budget for the Canadian Institutes of Health Research.</p> <p>2005–2006: Increase in expenditures is due to increase in research.</p>			

Health Canada

Children’s Health and the Environment

The Vulnerable Populations Division (formerly the Office of Children’s Environmental Health (OCEH)) carries out a range of activities to advance the protection of children’s health from hazards in the physical environment. The division’s objectives are to lead and coordinate federal and federal-provincial-territorial activities on children’s environmental health, improve the understanding of the role of the environment as a determinant of child health, promote action to manage environmental risks to children’s health, and provide advice to Health Canada decision makers.

Website: Not available

Children’s Health and the Environment			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$100,000	The Vulnerable Populations Division (formerly the Office of Children’s Environmental Health) and federal/provincial/territorial environment and health departments	Federal/provincial/territorial environment and health departments, parents and caregivers of children, the public interested in children’s environmental health (CEH), public health officials, physicians, non-governmental organizations, researchers, universities involved with CEH, and international organizations such as Pan American Health Organizations, the Commission for Environmental Cooperation, the Intergovernmental Forum on Chemical Safety and the World Health Organization
2001–2002	\$200,000		
2002–2003	\$70,000		
2003–2004	\$220,000		
2004–2005	\$176,000		
2005–2006	\$260,000		
Expenditures above include operations and management costs, and salaries. The activity benefit all children, but mostly children under 6 years of age. 2002–2003: Decrease in expenditures due to staffing vacancy. 2004–2005: Decrease in expenditures due to decrease in operations and management costs. 2005–2006: Increase in expenditures due to division growth and broadened mandate			

Tobacco Control Programme

The Federal Tobacco Control Strategy (FTCS) is dedicated to reduce tobacco use in Canada. It focuses on four components that reinforce one another: protection, prevention, cessation and harm reduction. The Tobacco Control Programme’s Web site provides one-stop shopping for information, resources and activities relating to tobacco control.

Website: www.gosmokefree.ca.

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Tobacco Control Programme			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Office of Programs and Mass Media, Marketing and Corporate Communications Division, F/P/T health departments, academia and non-governmental organizations	General public, researchers, health professionals, pregnant women, parents and young people
2001–2002	\$93,000		
2002–2003	\$165,000		
2003–2004	\$282,831		
2004–2005	\$4,393,700		
2005–2006	\$1,562,164		
<p>Expenditures are for projects related to pregnant women and parents with young children. Expenditures above include contributions and operations and management costs.</p> <p>2001–2002: Figures were revised in the 2003–2004 report.</p> <p>2003–2004: Increase due to more approved projects that focus on this age group or on pregnancy.</p> <p>2004–2005: Increase in funding due to launch of the “TARGET” marketing campaign. This campaign focuses on smoke-free houses and cars.</p> <p>2005–2006: Decrease in funding due to lack of national mass media campaigns, however, there is an overall increase in the program delivery funds.</p>			

Human Resources and Social Development Canada

1997 Manitoba Birth Cohort Study/Tots Study

The 1997 Manitoba Birth Cohort Study (also known as the “Tots Study” or “Parlons petite enfance”) is a longitudinal study that follows the development of a sample of preschool children in Manitoba. The study began with 635 children from Manitoba’s largely rural South Eastman region and from francophone communities throughout the province. The study sample was later increased to 740.

The purpose of the study is to increase knowledge about the factors, including various types of child care, that influence the early development of children growing up in rural and francophone communities. At present, there is limited research available about these unique populations.

Website: http://www.gov.mb.ca/healthychild/ecd/cohort_study_reports.html.

1997 Manitoba Birth Cohort Study/Tots Study (New to Report)			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	The study partners are Human Resources and Social Development Canada, Healthy Child Manitoba (HCM), South Eastman Health/Santé Sud-Est (SEH/SSE), Fédération provinciale des comités de parents (FPCP) and Division scolaire franco-manitobaine (DSFM)	Early childhood educators, early childhood development and other service providers, policy makers at all levels of government, researchers, national and regional early childhood development organizations, school boards and community alliances with an interest in children, and parents and young children
2001–2002	\$200,000		
2002–2003	\$115,000		
2003–2004	NA		
2004–2005	NA		
2005–2006	\$148,000		
<p>Note: Healthy Child Manitoba provided all of the funding for the Tots Study in reporting years where Human Resources and Social Development Canada’s contribution is \$0.</p>			

Child Care Human Resources Sector Council – Sector Council Program

The Child Care Human Resources Sector Council (CCHRSC) is a pan-Canadian, non-profit organization that addresses pressing human resources and skills development issues in the child care sector. The Council develops research, strategies, and tools to meet the needs of employers and the early childhood education and care (ECEC) workforce, and to achieve related goals.

The Child Care Human Resources Sector Council (CCHRSC) was officially incorporated and launched in November 2003. Prior to incorporation, CCHRSC operated as the Child Care Human Resources Round Table (CCHRRT) working on several labour market initiatives including the 1998 child care sector study *Our Child Care Workforce: From Recognition to Remuneration*. Funded by HRDC, the study was the first to examine the challenges facing Canada’s ECEC workforce.

In November 2004, the CCHRSC released a follow-up labour market study entitled *Working for Change: Canada’s Child Care Workforce*. Together, these two sector studies provide the foundation for the work of the CCHRSC.

Website: <http://www.ccsc-cssge.ca/>.

Child Care Human Resources Sector Council - Sector Council Program			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	NA	NA
2001–2002	NA	NA	NA
2002–2003	NA	NA	NA
2003-2004	NA	NA	NA
2004–2005*	\$494,264	Council office is in Ottawa but the activities and projects have Pan-Canadian application. Grants and Contributions Website http://csgc-scsc.prv/	The council’s activities are expected to indirectly benefit children and their families. By improving recruitment, retention and skills development of the ECEC workforce, the availability and quality of care are expected to improve.
2005–2006*	\$822,814	Pan-Canadian. Grants and Contributions Website http://csgc-scsc.prv/	
* The amounts are exclusively for the infrastructure and projects of the Child Care Human Resources Sector Council. Most of those projects are multi-year projects. For the two years prior to 2004-2005, when the Child Care Human Resources Sector Council became legally incorporated, the development and establishment of the Council was supported through a contribution agreement between Human Resources Development Canada and the Canadian Child Care Federation.			

National Longitudinal Survey of Children and Youth

The National Longitudinal Survey of Children and Youth (NLSCY) is a longitudinal study of Canadian children that follows their development and well-being from birth to early adulthood. The NLSCY began in 1994. Every two years it surveys more than 30 000 Canadian children, about one third of them under six years of age.

The study is designed to collect information about factors (family, friends, schools and communities) influencing a child’s social, emotional and behavioural development, and to monitor the impact of these factors on the child’s development over time. Information from the NLSCY is used at all levels of government, in universities and in policy-making organizations.

Website: <http://www11.hrdc-drhc.gc.ca/pls/edd/NLSCY.shtml>.

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National Longitudinal Survey of Children and Youth (NLSCY)			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$7,742,000	Human Resources and Social Development Canada, Statistics Canada, Provincial/ Territorial governments	NLSCY: Research and policy community, governments, and non-governmental organizations
2001–2002	\$7,818,000		
2002–2003	\$8,500,000		
2003–2004	\$9,000,000		
2004–2005	\$9,000,000		
2005–2006	\$5,800,000		
Expenditures for the NLSCY include data development and collection costs such as contribution funding, operations and management costs and salaries.			

Social Development Partnerships Program - Children and Families

The Social Development Partnerships Program (SDPP) is a broad-based and flexible grant and contribution instrument that makes investments through distinct funding components to improve life outcomes for children and families, persons with disabilities and other vulnerable populations.

The SDPP's child care component is relevant to this report since it focuses on supporting projects that enhance child care for young children (0-6) in Canada. Examples of projects funded through this component include:

- create and share tools for childcare centers to help them develop the characteristics of quality child care practices that are inclusive of the needs of children with disabilities;
- develop tools and models to improve programs and services;
- design and share childcare programming for Aboriginal children; and
- gather information on the array of child care arrangements in Canada.

Website: www.hrsdc.gc.ca/en/hip/sd/05_SDPP.shtml.

Social Development Partnerships Program—Children and Families			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$5,224,000	13 non-profit organizations working on early learning and child care, 8 university research groups, and 12 Understanding the Early Years pilot community coalitions	Early childhood educators, early childhood development and other service providers, policy makers at all levels of government, researchers, national and regional early childhood development organizations, school boards and community alliances with an interest in children, and parents and children under 6
2001–2002	\$5,224,000		
2002–2003	\$5,224,000		
2003–2004	\$5,217,000		
2004–2005	\$6,101,183		
2005–2006	\$5,540,407		
Expenditures above include grants and contributions only. Although the early learning and child care focus of the Program is mostly on children under 6 years of age, some research and development related to after-school care, which may benefit older children, has been undertaken. 2000–2001 to 2002–2003: Expenditures are budgetary allocations. 2003–2004: Expenditures were revised in the 2004–2005 report to deduct \$294,000 which is now reported separately in the Action Plan for Official Languages expenditures. 2004–2005: Includes a new multi-year grant of \$750,000 to the Canadian Child Care Federation. Also includes funding to support the 12 Understanding the Early Years pilot communities (\$1,779,102). 2005–2006: Includes funding to support the 12 Understanding the Early Years pilot communities (\$1,218,843)			

Support of Early Childhood Development in Official Language Minority Communities under the Action Plan for Official Languages

Human Resources and Social Development Canada (HRSDC) is responsible for two initiatives related to early childhood development under the Government's Action Plan for Official Languages. Overall, the Action Plan is designed to enhance and promote linguistic duality in Canada by focusing on three broad components: education, community development and the federal public service. HRSDC's early childhood development initiatives are part of the community development component. These two initiatives are described below.

Child Care Pilot Project

The purpose of this five-year research initiative is to obtain evidence of the benefits of enriched child care services in French for the linguistic, cultural and overall development of preschool francophone children living in minority language communities.

The pilot will involve at least 200 children from five different communities. Half will receive enriched child care services in French in a day care centre, and their families will be given family literacy services. The impact of the program will be assessed by comparing the outcomes for these children with the outcomes for children who did not receive enriched services.

Strengthening the Capacity of Non-governmental Organizations

This initiative is intended to promote linguistically and culturally relevant early childhood development programs and services in official language minority communities by enabling national francophone non-governmental organizations to support their network of local organizations.

Projects funded during 2004–2006 under this initiative include the following:

- *Partir en Français* and *Partir en Français 2*. These projects support the work done by the Commission nationale des parents francophones (CNPF). They have produced a cross-Canada report on availability of early childhood development programs and services in minority Francophone communities and created teaching aids to their members.
- *Profil d'entrée à la 1^{re} année dans une perspective langagière et culturelle*. The Canadian Teachers' Federation carried out this project. The objective was to create a toolkit and supporting material that identifies the linguistic and cultural skills and knowledge children need in grade one in order to be prepared to learn and thrive in French-language schools in official language minority communities.

Website: www.hrsdc.gc.ca.

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Support of Early Childhood Development under the Action Plan for Official Languages: Strengthening NGO Capacity and Child Care Pilot Project

Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Non-governmental organizations working to enhance official language opportunities for children in official language minority communities	Early childhood educators, early childhood development and other service providers, policy makers at all levels of government, researchers, national and regional early childhood development organizations, school boards and community alliances with an interest in children, and parents and children under 6
2001–2002	NA		
2002–2003	NA		
2003–2004	\$294,000		
2004–2005	\$676,903		
2005–2006	\$1,132,379		

All expenditure data are based on actual amounts spent:

2003–2004: Treasury Board submission for funds was given approval in February 2004. Expenditures are contribution funds for supporting the capacity of non-governmental organizations. This was reported in the 2003-2004 Activities and Expenditures Report as part of the expenditures in the Social Development Partnerships Program.

2004–2005: Expenditures are contribution funding for supporting the capacity of non-governmental organizations (\$657,058), and operations and maintenance for the Child Care Pilot Project (\$19,845).

2005–2006: Expenditures are contribution funding for supporting the capacity of non-governmental organizations (\$917,757), and operations and maintenance for the Child Care Pilot Project (\$214,622).

Understanding the Early Years Initiative

Understanding the Early Years (UEY) is a national initiative that provides communities with local, place-based information about their children's school readiness and the factors that influence child development, including family background, neighbourhood characteristics and community resources.

The goal is to give children the best possible start in life by giving communities the information they need to make informed decisions about programs, policies and investments that can have a positive impact on early childhood outcomes.

Based on the success of the UEY pilots, the national Initiative which began in 2004, will include 50 communities by 2008.

Website: http://www.hrsdc.gc.ca/en/hip/sd/300_UEYInfo.shtml.

Understanding the Early Years Initiative

Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Data collections: Statistics Canada Offord Centre for Child Studies at McMaster University	Participating UEY communities, including ECD coalitions, parents and children, service providers, policy makers and researchers
2001–2002	NA		
2002–2003	NA		
2003–2004	NA		
2004–2005	\$651, 340	21 UEY projects sponsored by community organizations. Data collections: Offord Centre for Child Studies at McMaster University	Participating UEY communities, including ECD coalitions, parents and children, service providers , policy makers and researchers
2005–2006	\$2,379,133		

2004–2005: This figure represents expenditures on operations and management costs and salaries for the establishment of the national UEY Initiative.

2005–2006: This figure represents expenditures on operations and management costs and salaries (\$786,139), plus the contribution funding costs for the 21 initial participating communities in the national initiative which were started in October/November 2005 (\$1,592,994).

National Film Board of Canada

Ludovic and Cuckoo! Web sites

Ludovic and Cuckoo are animated characters that guide children through a series of interactive games and learning modules on the National Film Board’s Web site.

Ludovic is a teddy bear, and his Web site takes children from three to six years of age through age-appropriate lessons about friendship, play, cooperation and dealing with grief. Youngsters are able to navigate their way through the site because Ludovic explains what to do. The Web site also has modules about weather, the calendar, the days of the week and how to tell time.

The Cuckoo! Web site features games for children aged six to nine. Younger children may require assistance with some of the on-screen instructions.

Website: <http://www.nfbkids.ca>.

Ludovic and Cuckoo! Web sites			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Web site	Parents and children
2001–2002	NA		
2002–2003	\$30,819		
2003–2004	\$53,779		
2004–2005	NA		
2005–2006	NA		
Expenditures include salaries only. 2004-2005: The sites are currently online, but no new expenditure was devoted to them during the last year.			

Networks of Centres of Excellence Canada

Canadian Language and Literacy Research Network

The Canadian Language and Literacy Research Network is Canada’s national early childhood language and literacy improvement strategy. The Network brings together more than 500 researchers, practitioners and students from more than 32 member institutions across Canada. The Network also has world-class partnerships with more than 125 organizations focused on improving the language and literacy skills of Canada’s children.

The research activities carried out by the Network focus on early child development because language and literacy deficiencies are best addressed and prevented early in life.

Examples of research projects funded by the Canadian Language and Literacy Research Network, details about conferences, and a wide variety of resource materials are available on the Network’s Web.

Website: www.cllrnet.ca.

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Canadian Language and Literacy Research Network			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	The Network's administrative centre, communications department and research project investigators and partners	Network internal members, researchers, (external) educators, clinicians, economic partners, the media, government (all levels) and Web site visitors
2001–2002	\$2,500,000		
2002–2003	\$2,160,000		
2003–2004	\$2,000,000		
2004–2005	\$1,550,500		
2005–2006	\$1,035,162		
<p>Expenditures include research dollars.</p> <p>2002–2003 and 2003–2004: Decrease in expenditures reflects budget allocation procedures of the Networks of Centres of Excellence.</p> <p>2004–2005: Expenditures do not include a \$100,000 research grant from the Canadian Institutes of Health Research (included in the expenditure figure for the Institute of Human Development, Child and Youth Health).</p> <p>2005–2006: Research program was expanded to include three new programs as well as a second award cycle which did not take place until after the fiscal year-end. The only awards captured in the 2005/2006 period were those awards that were committed in the first award cycle. All projects awarded in the second cycle will be captured in 2006/2007.</p>			

Public Health Agency of Canada

Canadian Childhood Cancer Surveillance and Control Program

The Canadian Childhood Cancer Surveillance and Control Program (CCCSCP) describes the patterns of health care used by children with cancer. It also assesses their clinical outcomes and determines the risk factors for developing childhood cancer. The users of the information include health professionals, policy makers, governments, patients and families.

Website: www.phac-aspc.gc.ca/ccdpc-cpcmc/program/cccscp-pcslce/index.html.

Canadian Childhood Cancer Surveillance and Control Program			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$263,000 (estimate)	Not applicable	Pediatric oncology community
2001–2002	\$223,000 (estimate)		
2002–2003	\$227,000 (estimate)		
2003–2004	\$142,000 (estimate)		
2004–2005	\$125,900 (estimate)		
2005–2006	\$119,775 (estimate)		
<p>Expenditures above include operations and management costs, and salaries.</p> <p>Since the program does not differentiate expenditures by age, the expenditure estimates are based on the proportion of new cases of childhood cancer in children from birth to six years of age from total cases in children age 0 to 19 years (35%).</p> <p>2000-2002, 2003-2006: Decrease in expenditures due to an overall decrease in budget/funding provided.</p>			

Canadian Hospitals Injury Reporting and Prevention Program

The Canadian Hospitals Injury Reporting and Prevention Program (CHIRPP), supports a computerized information system that collects and analyzes data on injuries and poisonings from the emergency departments of 10 pediatric and 4 general hospitals in Canada.

The program helps to identify hazards and high-risk situations for children, and the information is provided to interested parties who are striving to make childhood safer, including policy makers, public health units, other health and safety organizations, researchers, and the media. They use the data to increase awareness, set priorities and develop targeted strategies to prevent injuries to children.

Website: <http://hc-sc.gc.ca/pphb-dgspsp/injury-bles/index.html>.

Canadian Hospitals Injury Reporting and Prevention Program			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$400,000 (estimate)	Policy makers, public health units, hospitals, non-governmental organizations, professionals, researchers, the media and the public	Policy makers, public health units, non-governmental organizations, professionals, researchers, the media and the public
2001–2002	\$480,000 (estimate)		
2002–2003	\$207,000 (estimate)		
2003–2004	\$207,000 (estimate)		
2004–2005	\$235,000		
2005–2006	\$241,000		
<p>The expenditures provided for all years are estimates since the surveillance system collects data on emergency department patients of all ages. Therefore, the calculations are based on the estimated portion of the program that serves children from birth to six years of age.</p> <p>2000–2001 and 2001–2002: Expenditures include operations and management costs only.</p> <p>2002–2003: Decrease in expenditures due to fiscal pressures. Figures were revised in the 2003–2004 report to include salaries.</p> <p>2004–2005: Increase in expenditures due to increase in cost of operating the program</p> <p>2002–2006: Expenditures include operations and management costs, and salaries.</p>			

Canadian Perinatal Surveillance System

The Canadian Perinatal Surveillance System (CPSS) monitors and reports on maternal and infant health determinants and outcomes. It does this through an ongoing cycle of data collection, expert analysis and interpretation, and communication of information for action. The objective is to contribute to improved health for pregnant women, mothers and infants in Canada. Users of CPSS information include health professionals, public health practitioners, health policy makers, researchers and academics, and individual Canadians. These reports are available online.

Website: www.phac-aspc.gc.ca/rhs-ssg/index.html.

Canadian Perinatal Surveillance System			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$2,600,000	Public Health Agency staff and the CPSS Steering Committee and Study Groups	Health professional organizations, health departments and agencies, health research institutions, health departments at universities and colleges, and individuals
2001–2002	\$3,000,000		
2002–2003	\$2,125,502		
2003–2004	\$1,550,000		
2004–2005	\$1,842,439		
2005–2006	\$1,900,000		
<p>Expenditures include operations and management costs; and salaries.</p> <p>Expenditures for 2000–2003 were revised in the 2003–2004 report to include salaries.</p> <p>2002–2003 and onwards: Decrease in expenditures from 2001-2002 due to fiscal pressures. Within this decrease, annual variability is due mainly to cycle of our larger surveillance projects.</p>			

Centres of Excellence for Children’s Well-Being

The Centres of Excellence for Children’s Well-Being Program works to improve understanding of the physical and mental health needs of children, and the critical factors necessary for healthy child development.

Within the program, there are four Centres of Excellence. Three of the four centres carry out activities related to early childhood development and are described below.

Section I

- *Centre of Excellence for Early Childhood Development*

The Centre of Excellence for Early Childhood Development identifies and summarizes the best scientific work on the social and emotional development of young children and makes this information available to policymakers, service planners, service providers and parents. A free web-based Encyclopedia provides users with the latest reliable information.

Website: www.excellence-earlychildhood.ca/home.asp?lang=EN.

Centre of Excellence for Early Childhood Development			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$300,000	Networks, partners, conferences, bulletins, websites, reports and publications	Policy makers, service planners, service providers and parents.
2001–2002	\$650,000		
2002–2003	\$945,000		
2003–2004	\$680,000		
2004–2005	\$730,000		
2005–2006	\$673,497		
Expenditures include contributions only. Figures for 2000–2003 were revised in the 2003–2004 report. Variations of funding should not be considered an increase or decrease since these amounts were pre-established according to Treasury Board and vary from year to year.			

- *Centre of Excellence for Children and Adolescents with Special Needs*

The Centre's mandate is to produce and disseminate knowledge about children and adolescents with special needs in rural and northern Canada and to transfer that knowledge effectively to those who can use it to make a difference in the lives of these children. The Centre documents and describes the opportunities and challenges for children with special needs in rural and northern communities highlighting best policies, practices and principles for prevention, early intervention and supports.

Website: www.coespecialneeds.ca/.

Centre of Excellence for Children and Adolescents with Special Needs			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$165,000 (estimate)	Website, conferences, media, online service directories, reports, posters, pamphlets	Parents, teachers, service providers, researchers and policy makers
2001–2002	\$355,230 (estimate)		
2002–2003	\$440,562 (estimate)		
2003–2004	\$353,752 (estimate)		
2004–2005	\$354,915 (estimate)		
2005–2006	\$324,500 (estimate)		
Expenditures include contributions only. Figures for 2000–2003 were revised in the 2003–2004 report. The estimate of expenditures on early childhood development for this particular Centre is 55% of the Centre's total budget. Variations in funding should not be considered an increase or decrease since these amounts were pre-established according to Treasury Board and vary from year to year.			

- *Centre of Excellence for Child Welfare*

The Centre of Excellence for Child Welfare (CECW) consists of a network of researchers, service provider organizations, and policy makers. The Centre promotes effective practice in the field of child welfare through conducting research and widely disseminating child welfare knowledge. The CECW emphasizes policy development in child welfare and has a special emphasis on Aboriginal child welfare.

Information sheets are available online along with the Centre’s annual report and additional details about research projects, evaluations, conferences and other events.

Website: www.cecw-cepb.ca/home.shtml.

Centre of Excellence for Child Welfare			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$179,430 (estimate)	Child Welfare League of Canada, University of Toronto, University of Montreal, First Nations Child and Family Caring Society of Canada, networks, web sites, conferences, presentations, published journal articles, reports, brochures and information sheets.	Policy makers, researchers, health practitioners and families.
2001–2002	\$430,041 (estimate)		
2002–2003	\$450,000 (estimate)		
2003–2004	\$474,000 (estimate)		
2004–2005	\$398,126 (estimate)		
2005–2006	\$374,027 (estimate)		
<p>Expenditures above include contributions only. Figures for 2000–2003 were revised in the 2003–2004 report. 2003–2004: The estimate of expenditures on early childhood development is 60% of the Centre's total budget. 2004–2005: The estimate of expenditures on early childhood development is 38% of the Centre's total budget. More money was spent on Aboriginal related issues due to an international conference on Reconciliation in Child Welfare in October 2005. 2005–2006: The estimate of expenditures on early childhood development is 38% of the Centre's total budget. Variations in funding should not be considered as an increase or decrease since these amounts were pre-established according to Treasury Board and vary from year to year.</p>			

Child Maltreatment Surveillance Activity

The Canadian Incidence Study of Reported Child Abuse and Neglect (CIS) is a national child maltreatment surveillance program led by the Public Health Agency of Canada. It is a periodic, ongoing national study of the incidence of child abuse and neglect reported to and investigated by child welfare services across Canada.

The data and reports from the CIS increase public and professional awareness of the types and severity of child abuse and neglect. They also provide evidence-based research for the development of policies and programs aimed at preventing child maltreatment.

Website: <http://phac-aspc.gc.ca/cm-vee/index.html>.

Child Maltreatment Surveillance Activity (including Canadian Incidence Study of Reported Child Abuse and Neglect)			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$314,000	Child welfare agencies and social workers, policy makers, public health units, non-governmental organizations, professionals, researchers, and the media	Researchers, federal departments and agencies, provinces and territories, public health units, non-governmental organizations, professionals, the media, and the public
2001–2002	\$268,000		
2002–2003	\$85,000		
2003–2004	\$245,000		
2004–2005	\$300,000		
2005–2006	\$357,499		
<p>Expenditures include operations and management costs only. Expenditures are for children age 0 to 15 since this surveillance activity does not specifically target children from birth to six years of age. 2002–2003: Decrease in expenditure due to fiscal pressures. This figure was revised from an estimate to an actual in the 2003–2004 report. 2003–2004: Increase due to partially restored budget. 2003–2004: Increase due to partially restored budget, and due to data collection phase of second cycle of CIS (CIS-2003). 2004–2005: Expenditures for data entry, analysis and draft of Canadian Incidence Study – 2003 final report. 2005–2006: Expenditures for report finalization, translation and publication; release; dissemination strategy, and secondary analysis.</p>			

Section I

Family Violence Initiative—National Clearinghouse on Family Violence

The Family Violence Initiative promotes public awareness of the risk factors of family violence and the need for public involvement in responding to the problem. It also works to strengthen the ability of the criminal justice, housing and health systems to respond to the problem, and supports data collection, research and evaluation to identify effective interventions.

There are 15 federal departments, Crown corporations and agencies involved in the Initiative. On their behalf, the Public Health Agency of Canada takes the lead role and also manages the National Clearinghouse on Family Violence (NCFV). The Clearinghouse is Canada’s resource centre for information about family violence and ways to address it.

The NCFV provides a centralized and comprehensive reference, referral and distribution service for information on aspects of family violence prevention, protection and treatment. Resources and services are available free of charge in English and French, and include more than 130 publications, a video library, and a bi-monthly e-bulletin.

Website: www.phac-aspc.gc.ca/nc-cn.

Family Violence Initiative—National Clearinghouse on Family Violence			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$886,000	NCFV Web site, health and social service providers, students and academics, community groups, policy makers, and media representatives	15 participating federal departments, provincial and territorial partners, health and social service providers, criminal justice personnel students and academics, community groups, policy makers, media representatives, and the Canadian public
2001–2002	\$886,000		
2002–2003	\$701,000		
2003–2004	\$517,554		
2004–2005	\$724,386		
2005–2006	\$728,303		
Expenditures include operations and management costs, and salaries. Expenditures include all children age 0 to 18. 2002–2003: A shift in priorities within Health Canada led to a portion of the budget being assigned to another part of the department. 2003–2004: Decrease in expenditures is due to financial pressures. 2004–2005: Increase in expenditures reflects current estimates of average salaries for a range of positions.			

Healthy Images

Healthy Images is a collection of photographs and images that portrays positive, healthy lifestyles by incorporating the safe use of equipment, clothing and physical environments (including sun safety), appropriate skill levels, and adult supervision.

Groups such as the media and public health associations may use the images free of charge in their productions and publications, as long as they are promoting healthy lifestyles for non-commercial purposes. The objective is to foster a safety culture and reduce injuries to children.

The Healthy Images are on view online. Selected photographs from the Healthy Images Web site have been used as illustrations throughout this report.

Website: www.phac-aspc.gc.ca/dca-dea/allchildren_touslesenfants/she_healtyimages_e.html.

Healthy Images		
Expenditures	Delivery Agent	The activity reaches
2000–2001	Web site	The media and public health associations
2001–2002		
2002–2003		
2003–2004		
2004–2005		
2005–2006		
Expenditures are allocations and include operations and management costs only. 2003–2004: Decrease due to budgetary restrictions. 2004–2005; 2005–2006: There was no expenditure for this program due to changing priorities and budgetary restrictions.		

National Child Day

The Government of Canada’s *Child Day Act* of 1993 designates November 20 of each year as the national day of the child. The purpose of National Child Day is to promote awareness in Canada of the United Nations *Convention of the Rights of the Child*. The Convention spells out the basic human rights to which children (under the age of 18) everywhere are entitled.

The Public Health Agency of Canada provides leadership and helps build momentum for National Child Day by developing and distributing educational and promotional materials to encourage schools, community groups, families and others to celebrate this day.

The National Child Day Web site features suggestions for community celebrations, participation certificates and a *Fun Zone* for children.

Website: http://www.phac-aspc.gc.ca/dca-dea/ncd-jna/index_e.html.

National Child Day		
Expenditures	Delivery Agent	The activity reaches
2000–2001	Web site, teachers and non-governmental organizations	Children and their families
2001–2002		
2002–2003		
2003–2004		
2004–2005		
2005–2006		
Expenditures include operations and management costs only. Expenditures include children ages 6 to 18. Figures cannot be broken down for children under 6. 2002–2003: Decrease in expenditures due to sharing of expenses with other federal departments and non-governmental organizations planning National Child Day. 2003–2005: Decrease in expenditures due to budget pressures.		

National Study on Balancing Work, Family and Lifestyle

This is a multi-year research project that examines critical issues associated with balancing work and family. It identifies who is at risk for work–life conflict, examines the impact such conflict may have on people’s lives, and makes recommendations to achieve a better balance.

The study findings, which are based on responses from employees in public, private and not-for-profit organizations, are expanding the knowledge base in this area. The full report is available online.

Website: <http://www.phac-aspc.gc.ca/publicat/work-travail/report4/index.html>.

Section I

National Study on Balancing Work, Family and Lifestyle

Expenditures		Delivery Agent	The activity reaches
2000–2001	NA	Public Health Agency of Canada Web site	Governments, businesses and the public
2001–2002	\$77,000		
2002–2003	\$34,700		
2003–2004	\$42,016		
2004–2005	\$42,850		
2005–2006	\$35,400		

Expenditures include operations and management costs, and salaries.
 2002–2003: Expenditure for the entire study is included, since data for families with children under 6 are not known.
 2003–2006: Expenditure fluctuations from year to year are due to variations in the cost of producing and disseminating reports.

Population Health Fund

This fund supports time-limited projects that are sponsored by Canadian not-for-profit organizations and/or educational institutions. Projects must apply a population health approach, which means they must aim to improve the health of the entire population and reduce health inequities among population groups. To qualify for funding, projects must also address priorities, identified by the Public Health Agency of Canada.

A Book of Abstracts for the 2001 solicitation is available online.

Website: www.phac-aspc.gc.ca/ph-sp/phdd/phfp/intro.html.

Population Health Fund

Expenditures		Delivery Agent	The activity reaches
2000–2001	\$257,000 (estimate)	Early childhood educators, health professionals, public health nurses, social workers, peer workers, parents and caregivers, child care providers and agencies, family educators, school boards, teachers, and Aboriginal child welfare agencies	Health professionals and organizations; child care providers; early childhood educators; Aboriginal child welfare agency staff; foster, adoptive and birth families; and youth groups
2001–2002	\$59,000 (estimate)		
2002–2003	\$524,329 (estimate)		
2003–2004	\$779,832 (estimate)		
2004–2005	\$350,721 (estimate)		
2005–2006	\$519,337 (estimate)		

Expenditures include grants and contributions only.
 2000–2001: 11% of total value (\$2,337,000) reflects expenditures for children from birth to six years of age.
 2001–2002: 6% of total value (\$97,766) reflects expenditures for children from birth to six years of age for multi-year projects that began in 1999–2000. In 2001–2002, Health Canada solicited new proposals focused on children and youth under the Population Health Fund; however, funding for those proposals will begin to flow in 2002–2003.
 2002–2003: Increase in expenditures is the result of funding new proposals approved in 2001–2002.
 2003–2004: Increase in expenditures is the result of extended programs receiving additional funding.
 2004–2005: Decrease due to the Fund being at the end of its funding cycle in 2004–2005.
 2005–2006: Increase in expenditures is the result of funding new proposals from the September 2004 solicitation.

EARLY LEARNING AND CHILD CARE ACTIVITIES AND EXPENDITURES: GOVERNMENT OF CANADA REPORT 2004–2005 and 2005–2006

Chapter 1. Introduction

Federal/Provincial/Territorial Initiatives Supporting Early Childhood Development, Early Learning and Child Care

The Government of Canada provides cash transfers to the provinces and territories to support their investments in early childhood development and early learning and child care under two federal/provincial/territorial initiatives: the Early Childhood Development (ECD) Agreement (September 2000) and the Multilateral Framework on Early Learning and Child Care (March 2003).⁴

Details about the ECD Agreement are outlined in Section I, Early Childhood Development Activities and Expenditures: Government of Canada Report 2004–2005 and 2005–2006.

Details related to the Multilateral Framework on Early Learning and Child Care are presented in this section.

Multilateral Framework on Early Learning and Child Care

On March 13, 2003, federal/provincial/territorial Ministers Responsible for Social Services agreed on a framework for improving access to affordable, quality, provincially and territorially regulated early learning and child care services.

The Multilateral Framework, which builds on the commitments made by governments in the ECD Agreement (reported in Section I), has two main objectives:

- to promote early childhood development; and
- to support the participation of parents in employment or training by improving access to affordable, quality early learning and child care programs and services.

The full text of the Multilateral Framework on Early Learning and Child Care is featured in Annex E of this report.

Under the Multilateral Framework, the Government of Canada agreed to support the provinces and territories over five years, to assist their investments in early learning and child care. For their part, the provinces and territories agreed to further invest in provincially and territorially regulated early learning and child care programs for children under six.

⁴ While the Government of Québec supports the general principles of the Early Childhood Development Agreement and the Multilateral Framework on Early Learning and Child Care, it did not participate in developing these initiatives because it intends to preserve its sole responsibility on social matters. However, Québec receives its share of federal funding and the Government of Québec is making major investments towards programs and services for families and children. All references in this document to viewpoints shared by federal, provincial and territorial governments do not include the views of Québec.

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Public Reporting

As part of the Multilateral Framework, governments agreed to report annually to Canadians on their progress in improving access to affordable, quality early learning and child care programs.

These 2004–2005 and 2005–2006 reports on activities and expenditures fulfill the Government of Canada’s commitment to report annually on all early learning and child care programs and services, as defined in the Multilateral Framework.

Previous reports can be found at www.ecd-elcc.ca.

Federal Transfers to Support Provincial and Territorial Early Learning and Child Care Programs and Services

In 2003, the Government of Canada committed to support the Multilateral Framework by transferring funding to the provinces and territories, to support their investments in early learning and child care programs and services. Budget 2007 sets out funding levels for the CST, including ongoing funding for ELCC, through 2013-2014 and proposes the introduction of an annual 3% escalator beginning in 2009-2010.

Table 1.1 provides details on federal transfers to the provinces and territories in support of early learning and child care programs.

	2003-04	2004-05	2005-06	2006-07	2007-08	Total
Newfoundland and Labrador	0.4	2.4	3.6	4.7	5.4	16.5
Prince Edward Island	0.1	0.6	1.0	1.3	1.5	4.5
Nova Scotia	0.7	4.4	6.5	8.6	10.0	30.2
New Brunswick	0.6	3.5	5.2	6.9	8.0	24.3
Quebec	5.9	35.4	53.0	70.4	81.9	246.5
Ontario	9.7	58.2	87.5	116.7	136.5	408.4
Manitoba	0.9	5.5	8.2	10.8	12.6	38.0
Saskatchewan	0.8	4.7	6.9	9.1	10.5	31.9
Alberta	2.5	15.0	22.8	31.0	36.3	107.6
British Columbia	3.3	19.7	29.7	39.6	46.4	138.6
Yukon	0.02	0.1	0.2	0.3	0.3	1.0
Northwest Territories	0.03	0.2	0.3	0.4	0.5	1.4
Nunavut	0.02	0.1	0.2	0.3	0.3	1.0
TOTAL	25.0	150.0	225.0	300.0	350.0	1,050.0

Note: Payments are notionally provided under the Canada Health and Social Transfer (CHST) in 2003-04 and under the Canada Social Transfer (CST) for 2004-05 and beyond.

Figures are based on Statistics Canada population estimates up to 2006-07 and projections for 2007-08. Figures beyond 2003-04 are subject to revision upon periodic release of Statistics Canada official population estimates. Totals may not add due to rounding.

Scope and Structure of Section II

The early learning and child care activities in this report are organized alphabetically according to the federal department or agency responsible for the activity. For each activity, there is a capsule description outlining the main focus of the program or service. This is followed by information,

where available, about major changes that have taken place during 2004–2005 and 2005–2006 with regard to availability, affordability and quality, as well as an expenditure chart.

All program expenditures and information about program availability are for children from birth to age six, unless otherwise indicated. Where possible, information on availability includes the number of regulated child care spaces. The expenditures listed are direct investments.

All of the programs and services in this report are also featured in Section I, Early Childhood Development Activities and Expenditures: Government of Canada Report 2004–2005 and 2005–2006. In particular, the six early learning and child care programs and services for Aboriginal communities are described in Section I, Chapter 6, while the program on Canadian Forces bases is featured in Section I, Chapter 4.

The expenditure information for programs and services described in this report mirrors the expenditure information presented in Section I, and does not represent additional expenditures for these activities in 2004–2005 and 2005–2006.

All expenditures have received Senior Financial Advisor or Comptroller approval from their respective Department, except where indicated.

Chapter 2. Government of Canada Early Learning and Child Care Programs and Services

Activities and Expenditures

Health Canada

Aboriginal Head Start On Reserve

Aboriginal Head Start On Reserve (AHSOR) is an early intervention program for First Nations children (age zero to six) living on reserve, and their families. It is intended to prepare these children for their school years by meeting their emotional, social, health, nutritional and psychological needs.

There were no major changes in the program's objectives, target population, mandate, delivery or design during 2004–2005 and 2005–2006, nor were there any changes reported with regard to the regulation of projects.

Website: www.hc-sc.gc.ca/fnih-spni/famil/develop/ahsor-papa_intro_e.html.

- *Availability*

The AHSOR program in 2004–2005 provided services to 9 415 children at 332 project sites serving 365 communities.

The British Columbia and Manitoba regions of AHSOR have implemented a Home Visiting/Outreach project. The Home Visiting/Outreach project has the following benefits:

- helps to close the 0–2 age gap for programming;
- provides program resources to children who cannot directly access Head Start centres or are on a Head Start waiting list; and

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- helps to link the wider family to the Head Start program.

- *Affordability*

There has been no change. All AHSOR programming is provided at no cost to the parent. In fact, it is against policy to charge for participation.

- *Quality*

The national principles and guidelines of AHSOR were described in the 2002–2003 Baseline Report, and there have been no changes. The caregiver-to-child ratios and the maximum group size for projects are determined by provincial or territorial licensing requirements.

Quality of service for AHSOR is addressed continuously through regional and community-based training opportunities. The communities and regions determine their own priorities for professional development.

Examples of other steps taken by AHSOR to improve quality of service during 2004–2005 include the following:

- In the BC region there was an increase in the number of sites with certified early childhood educators who have the expertise to be capable of tailoring their programs to meet the unique needs of the children and community.
- Parent focus groups were conducted to learn more about the barriers that affect parental involvement in AHSOR programs. The parents, grandparents, foster parents, and Elders who took part in the focus groups identified a number of ways to increase parental involvement, including the following:
 - Providing parents with reliable transportation;
 - helping parents develop new skills that will get them involved, through such means as offering training on how to organize parent collectives;
 - offering father-only meetings or other activities that encourage men to participate;
 - hosting parent lunches on a regular basis; and
 - starting a bi-monthly awareness or recognition program for parents.

These findings will help AHSOR to develop policies and resources that will encourage parents to join their children in program activities.

Aboriginal Head Start On Reserve (AHSOR)	
Expenditures	Regulated Spaces
2002–2003	For AHSOR programs, the measurement of "regulated spaces" is not an appropriate indicator as individual programs have a variety of means of setting and monitoring standards, which may or may not include regulation by provincial authorities. In addition, programs are described in terms of the number of children served, rather than the number of spaces.
2003–2004	
2004–2005	
2005–2006	
<p>Expenditures include grants and contributions; operations and management costs, and salaries. 2002–2003: Due to the late announcement of the Federal Strategy (October 2002), full annual funding of \$46.5 million could not be expended in this fiscal year. All available funding was allocated to meet regional health program needs, including support for those services First Nations have identified as priorities. 2003 to 2005: Full annual funding of \$46.5 million could not be expended in these fiscal years. All available funding was allocated to meet other regional health program needs, including those services that First Nations have identified as priorities.</p>	

Human Resources and Social Development Canada

First Nations and Inuit Child Care Initiative

The First Nations and Inuit Child Care Initiative (FNICCI) supports First Nations and Inuit communities in developing and implementing child care programs designed to address their local and regional needs. The objective of the initiative is to increase the supply of quality child care services in First Nations and Inuit communities.

There were no major changes in the program’s objectives, target population, mandate, delivery or design during 2005-2006. Licensing and monitoring procedures for the program were described in detail in the 2002-2003 Baseline Report, and no changes have been reported since that time.

Website: http://srv119.services.gc.ca/AHRDSInternet/general/public/ChildCare/ChildCare_e.asp.

- *Availability*

There was no change reported for 2005-2006. As in the previous year, FNICCI subsidized 7 500 child care spaces at 407 different sites. Most of the spaces are dedicated to children under six; however, children age seven to 12 are eligible for after-school care.

- *Affordability*

Information about fees, subsidies and access to spaces was outlined in detail in the 2002-2003 Baseline Report. In 2002-2003, the subsidy per space, which goes to the child care facilities, was increased from \$6,000 to \$6,500. This enhanced subsidy rate continued to apply to all 7 500 spaces in 2004-2005.

- *Quality*

There has been no change to the guiding principles for child care centres funded by FNICCI. The principles ensure that the centres provide quality, affordable and culturally appropriate care for children.

In 2005-2006, most FNICCI centres used their enhanced funding on infrastructure, supplies and human resources, resulting in improved quality of service. Some centres upgraded their buildings or properties, or made modifications to accommodate children with special needs. Others bought toys, furniture or vehicles. Some centres were able to hire new staff, increase salaries and/or provide training.

Also, FNICCI representatives joined in the discussions and activities led by the federal departments working towards a “single window” approach for Aboriginal early childhood development programs. These activities are part of the Federal Strategy on Early Childhood Development for First Nations and Other Aboriginal Children, which is described in Section 1, Chapter 6.

First Nations and Inuit Child Care Initiative		
Expenditures		Regulated spaces
2002–2003	\$50,140,000	7 000 spaces
2003–2004	\$50,140,000	7 500 spaces
2004–2005	\$50,140,000	7 500 spaces
2005–2006	\$57,140,000	7 500 spaces
Expenditures are budgetary allocations and include program and operating resources (including Employee Benefit Plan). Also included are infrastructure dollars. All amounts are for children under age 12, but are mostly for children under 6 years of age. Data about the number of children served is not available. 2002–2003: Funding was increased by \$9 million under the Federal Strategy on Early Childhood Development for First Nations and Other Aboriginal Children. 2005–2006: Funding was increased by \$7.0 million under the Enhanced Early Learning and Child Care for First Nations Children Living on Reserve and Working Towards the First Phase of a Single Window, to support joint planning, training, and capital.		

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Indian and Northern Affairs Canada

Child/Day-care Program-Alberta

The Government of Canada has a financial and administrative agreement with the Government of Alberta through which Canada directly funds more than 800 First Nations child care spaces on reserve. The purpose is to provide early childhood development programming and learning services that are comparable to the services offered by the provincial government to people living off reserve.

There were no changes reported for 2005-06 with regard to licensing requirements, program objectives, target population or mandate.

Website: <http://www.ainc-inac.gc.ca>.

- *Availability*

The overall figure for 2005-2006 was 812 spaces at 17 sites. A total of 1 157 children under the age of 12 shared the available child care spaces in 2005-2006.

- *Affordability*

No change in affordability was reported for 2004-2005 or 2005-2006.

- *Quality*

No changes were reported for 2004-2005 or 2005-2006 with regard to the quality of the Child/Day-care Program—Alberta.

Child/Day-care Program—Alberta		
Expenditures		Regulated spaces
2002–2003	\$2,665,000	812 spaces
2003–2004	\$2,502,620	762 spaces
2004–2005	\$3,418,135	812 spaces
2005–2006	\$4,058,657	812 spaces, 1 157 children

Expenditures are allocations and include grants and contributions only.
 Some of the children accessing the services are between the ages of 6 to 12.
 2003–2004: Expenditures decreased due to two day care centres not meeting provincial licensing standards. Day care centres are not funded unless provincial standards are met.
 2004–2005: Expenditures increased as the two day cares that were not licensed in 2003–2004 received their provincial licence for 2004–2005. Day care centres are not funded unless provincial standards are met. In addition, the 2004–2005 figure includes the provincial bill of approximately \$750,000 for First Nations children who are ordinarily resident on reserve, but are accessing day care services off reserve.
 2005–2006: Figure includes INAC expenditures of \$2,668,135 and an increased provincial bill of \$1,390,522 for which INAC reimburses the province for daycare subsidies for First Nations children who are ordinarily residents on-reserve, but are accessing daycare services off-reserve. Provincial bill also includes the cost of provincial licensing fees.

Child/Day-care Program—Ontario

The Government of Canada has a financial agreement with the Government of Ontario to support child care services on reserve. The purpose is to provide early childhood programming and learning services comparable to those offered by the provincial government to people living off reserve.

There were no changes reported for 2004–2005 or for 2005–2006 with regard to licensing, program objectives, target population or mandate.

Website: <http://www.ainc-inac.gc.ca>.

- *Availability*

In 2004–2005, 2 799 children received services at the 57 program sites.

Although the number of program sites remained constant at 57, these sites provided services to 52 First Nations in 2004–2005 compared to 51 First Nations in 2003–2004. In 2005–2006, 52 First Nations with 57 programs provided services for 2 951 children.

- *Affordability*

No change was reported for 2004–2005 or 2005–2006 with regard to the manner in which eligibility is determined for program subsidies.

- *Quality*

No changes were reported for 2004–2005 or 2005–2006 with regard to the quality of the Child/Day-care Program – Ontario.

Child/Day-care Program—Ontario		
Expenditures		Regulated spaces
2002–2003	\$14,291,000	3 018 children
2003–2004	\$15,367,292	2 797 children
2004–2005	\$15,517,348	2 799 children
2005–2006	\$15,582,150	2 951 children
Expenditures are allocations and include grants and contribution funding only. Data about the number of regulated spaces are not available. 2001–2002: Expenditures do not include the provincial share of expenditures.		

First Nation Child and Family Services Head Start—New Brunswick

The main objectives of this program are to maintain the strength of the family unit; assist children with physical, emotional, social and/or educational deprivation; and support and protect children from harmful environments.

The First Nation Child and Family Services Head Start—New Brunswick program operates at 15 different sites and offers centre or home-based care for children under six as well as services for parents.

There were no changes reported in 2004–2005 and 2005–2006 regarding the program’s objectives, target population, mandate, delivery, design or guiding principles. Since Head Start in New Brunswick is part of an integrated Child and Family Services program, no specific breakdown of Head Start data is available.

Website: <http://www.ainc-inac.gc.ca>.

- *Availability*

Entry to this program is determined by a risk assessment of the child. The program continued to operate at 15 sites during 2004–2005 and 2005–2006, but no information is available regarding the number of children involved in the program.

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- *Affordability*

As in previous years, there was no fee for program services in 2004–2005 and 2005–2006.

- *Quality*

Quality requirements for this program were described in the 2002–2003 Baseline Report, and no changes have been reported since then.

First Nation Child and Family Services Head Start—New Brunswick		
Expenditures		Regulated spaces
2002–2003	\$1,408,000	NA
2003–2004	\$1,408,000	NA
2004–2005	\$1,408,000	NA
2005–2006	\$1,408,000	NA

Expenditures are allocations and include contribution funding only.
Data about the number of regulated child care spaces is not available.
This funding is calculated using the registered on-reserve population 0 to 6 years of age. If a child becomes 7 years of age prior to completion of the case plan, his or her case is still included.

National Defence

Military Family Services Program

The objective of the Military Family Services Program (MFSP) is to promote and facilitate community-based family services that strengthen Canadian Forces families and communities. The program is delivered by 41 Canadian/Military Family Resource Centres (C/MFRCs) which are third-party, independent, not-for-profit organizations. C/MFRCs are located on bases, wings and units. These Centres provide a wide variety of programs for families, including information and referral, services for children and youth, and prevention and intervention services related to deployment, including emergency child care, respite child care and casual child care.

There were no changes reported in the program’s objectives, target population, mandate, delivery, design or licensing arrangements during 2005-2006.

Website: www.cfpsa.com/en/psp/DMFS/index.asp.

- *Availability*

As in previous years, the child care services provided depended on demand. It is estimated that the C/MFRCs provided services for approximately 8 000 children under age six during 2005-2006. Specific information on the number of children accessing emergency child care, respite child care and casual child care is not currently available.

- *Affordability*

The fee structure for programs is not available for 2005-2006.

- *Quality*

As a step towards increasing the quality of services and to strive to meet the very unique needs of CF families related to child care, DMFS in partnership with Director Quality of Life (DQOL) is engaged in research activities to determine the actual child care needs of CF families with a view to develop recommendations for a potential comprehensive child care services policy.

Military Family Services Program		
Expenditures		Regulated spaces
2002–2003	\$4,000,000 (estimate)	NA
2003–2004	\$4,000,000 (estimate)	8 000 children (estimate)
2004–2005	\$4,000,000 (estimate)	8 000 children (estimate)
2005–2006	\$4,000,000 (estimate)	8 000 children (estimate)

Expenditures include grants and contributions, operations and management costs, and salaries and are estimates for children from birth to age six.
 Data about the number of regulated child care spaces is not available.
 2003–2004: Number of children was revised in the 2004–2005 report to indicate individual participation.
 2004–2005: Number of children indicates individual participation.
 Note: Comptroller approval was not received for these expenditures.

Public Health Agency of Canada

Aboriginal Head Start in Urban and Northern Communities

Aboriginal Head Start in Urban and Northern Communities (AHSUNC) is a comprehensive early intervention program for First Nations, Inuit and Métis children and their families living in urban centres and northern communities. It is primarily a school readiness program that prepares young Aboriginal children for school by meeting their spiritual, emotional, intellectual and physical needs.

There were no major changes in the program’s objectives, target population, mandate, delivery or design during 2005–2006. The projects are required to follow provincial or territorial child care regulations.

Website: www.phac-aspc.gc.ca/dca-dea/programs-mes/ahs_main_e.html.

- *Availability*

The number of children enrolled in AHSUNC programs in 2005–2006 was approximately 4500. Participation was up from 2004–2005, as new sites were developed and additional spaces were created in some of the existing sites. AHSUNC reaches about 10% of eligible Aboriginal children, and most sites have long waiting lists.

- *Affordability*

There has been no change. As in previous years, all AHSUNC programs were provided at no cost to the parent.

- *Quality*

There have been no changes to the national principles and guidelines of AHSUNC, which were described in the 2002–2003 Baseline Report. Requirements for staff training and caregiver-to-child ratios vary according to provincial and territorial regulations.

Section II

The AHSUNC program continues to invest in training and other initiatives, both nationally and regionally, to improve the quality of services. For example, AHSUNC co-hosted *Growing Together Under One Sky*. This was a national joint training workshop in Winnipeg in November 2004, attended by more than 1200 frontline workers from federal Aboriginal early childhood development programs.

During 2005–2006, AHSUNC also engaged participating communities in ongoing consultations regarding enhancement of program quality. Other developments related to program quality included the following:

- In Saskatchewan, AHSUNC staged a workshop for project directors and staff on such topics as AIDS, working with families and Fetal Alcohol Spectrum Disorder, and provided information about boards and grants.
- AHSUNC projects in British Columbia carried out focus testing of a tool to improve the collection of data from parents whose children are graduating from the program.
- The initial data came in from the pilot project to measure the effects of an iron-rich diet on children in Nunavik, Québec. The iron-rich diet is composed of mostly traditional foods, such as caribou. The results are being evaluated to determine whether this approach can help prevent iron deficiencies. In the meantime, the community has shown a great deal of interest in seeing traditional practices adapted to today's realities.

Finally, the quality of AHSUNC programs is monitored regularly through national, regional and local evaluations. More than 200 AHS early childhood educators have been trained in child observation and evaluation, and about 20 community members were trained as community evaluators to carry out the Impact Evaluation tasks, thereby enhancing community participation and capacity building.

Aboriginal Head Start in Urban and Northern Communities		
Expenditures		Regulated spaces
2002–2003	\$25,821,117	For AHSUNC programs, the measurement of "regulated spaces" is not an appropriate indicator as individual programs have a variety of means of setting and monitoring standards, which may or may not include regulation by provincial authorities. In addition, programs are described in terms of the number of children served, rather than the number of spaces.
2003–2004	\$31,241,000	
2004–2005	\$31,466,853	
2005–2006	\$31,214,713	
<p>Data about the number of spaces is not available.</p> <p>2002–2003: Due to the late announcement (October 2002), full annual funding of \$35 million could not be fully allocated in the fiscal year. Actual expenditures for contributions were \$25,821,117. Expenditures for 2002–2003 have been revised from allocations to actuals in the 2003–2004 report.</p> <p>2003–2004: Expenditures include actual contributions (including regions), salaries and other operating costs for the national office only. The number of sites increased to 128 from December 2003 to March 2004, but most of the new sites did not enroll children until the fall of 2004.</p> <p>2004–2005: Expenditures include actual contributions, salaries and other operating expenses for the national office and regions with the exception of the Northern Secretariat. Northern Secretariat expenditures are not available by program. The participation rates for 2004–2005 are slightly lower because four sites experienced temporary closures. They will re-open under new sponsorship. In addition, there are a number of new sites to be launched in fall 2005. With these new developmental spaces, AHSUNC will host a total of 4500 child spaces.</p> <p>2005–2006: Expenditures include actual contributions, salaries and other operating costs for the national office and regions with the exception of the Northern Secretariat. Northern Secretariat expenditures are not available by program.</p> <p>Note: Comptroller approval was not received for these expenditures.</p>		

Early Childhood Development First Ministers' Meeting Communiqué, September 11, 2000

On September 11, 2000, the Government of Canada and provincial and territorial governments reached a historic agreement on early childhood development.

Beginning in April 2001, the Government of Canada will transfer \$2.2 billion over five years to provincial and territorial governments to support investments in early childhood development programs and services.

Following is the full text of the First Ministers' September 11, 2000, communiqué.

Introduction

First Ministers, with the exception of the Premier of Québec⁵, agree on the importance of supporting families and communities in their efforts to ensure the best possible future for their children. Every child should be valued and have the opportunities to develop his or her unique physical, emotional, intellectual, spiritual and creative potential.

First Ministers affirm their commitment to the well-being of children by setting out their vision of early childhood development as an investment in the future of Canada. Canada's future social vitality and economic prosperity depend on the opportunities that are provided to children today.

First Ministers recognize that parents and families play the primary role in supporting and nurturing children.

Communities, businesses, non-profit organizations, professional networks, associations, volunteers and governments also make key contributions to the well-being of children. Governments have shown leadership by taking steps to address key children's issues in their jurisdictions, individually and in partnership.

The early years of life are critical in the development and future well-being of the child, establishing the foundation for competence and coping skills that will affect learning, behaviour and health. Children thrive within families and communities that can meet their physical and developmental needs and can provide security, nurturing, respect and love. New evidence has shown that development from the prenatal period to age six is rapid and dramatic and shapes long-term outcomes.

Intervening early to promote child development during this critical period can have long-term benefits that can extend throughout children's lives. Governments and other partners currently provide a range of programs and services to effectively support early childhood development. The challenge is to build on existing services and supports, to make them more coordinated and widely available.

⁵ While sharing the same concerns on early childhood development, Québec does not adhere to the present Federal/Provincial/Territorial document because sections of it infringe on its constitutional jurisdiction on social matters. Québec intends to preserve its sole responsibility for developing, planning, managing and delivering early childhood development programs. Consequently, Québec expects to receive its share of any additional federal funding for early childhood development programs without new conditions.

First Ministers therefore agree to work together so that young children can fulfil their potential to be healthy, safe and secure, ready to learn, and socially engaged and responsible.

In support of this common goal, governments will improve and expand early childhood development programs and services over time. Governments will work with families and communities to help meet the needs of young children and their families. Governments will report regularly on their progress and will continue to build knowledge and disseminate information to parents, communities and service providers to help them to give children the best possible start in life.

Objectives

Focusing on children and their families, from the prenatal period to age six, the objectives of this early childhood development initiative are:

- to promote early childhood development so that, to their fullest potential, children will be physically and emotionally healthy, safe and secure, ready to learn, and socially engaged and responsible; and
- to help children reach their potential and to help families support their children within strong communities.

Four Key Areas for Action

To meet the objectives set out above, *First Ministers agree* on four key areas for action. Governments' efforts within this framework will focus on any or all of these areas. This will build on the priority that governments have placed on early childhood development and the investments that governments have already made.

1. Promote Healthy Pregnancy, Birth and Infancy

Prenatal, birth and infancy experiences have a profound effect on the health and well-being of infants and young children, and contribute to continuing good health. This priority addresses needs related to the prenatal, birth and infancy periods and includes supports for pregnant women, new parents, infants and care providers. Possible examples are prenatal programs and information, and infant screening programs.

2. Improve Parenting and Family Supports

Parents and families have the primary responsibility for the care of their children. This priority addresses the needs related to positive parenting and includes supports for parents and caregivers. Possible examples are family resource centres, parent information and home visiting.

3. Strengthen Early Childhood Development, Learning and Care

Quality early childhood development, learning and care have been shown to promote physical, language and motor skills; and social, emotional and cognitive development. This priority includes supports that promote healthy development, provide opportunities for interaction and play, help prepare children for school and respond to the diverse and changing needs of families. Possible examples include preschools, childcare and targeted developmental programs for young children.

4. Strengthen Community Supports

Communities make key contributions to the well-being of children through formal and informal networks. This priority includes supports to strengthen community capacity to meet the needs of children and families from a healthy community perspective. Possible examples include supports for community-based planning and service integration.

Governments recognize that effective approaches to supporting early childhood development are:

- focused on prevention and early intervention;
- intersectoral;
- integrated; and
- supportive of the child within the family and community context.

Early childhood development programs and services should be inclusive of:

- children with different abilities; and
- children living in different economic, cultural, linguistic and regional circumstances.

Working Together to Meet Children's Needs

Governments will work together in full respect of each other's responsibilities, recognizing that provinces and territories have the primary responsibility for early childhood development programs and services. Each government will determine its priorities within this framework.

Governments will work with the Aboriginal peoples of Canada to find practical solutions to address the developmental needs of Aboriginal children.

Governments will ensure effective mechanisms for Canadians to participate in developing early childhood development priorities and reviewing outcomes.

Funding

First Ministers agree that ensuring effective early childhood development is a long-term commitment to our children's future. *First Ministers agree* that investments for early childhood development should be incremental, predictable and sustained over the long term. *First Ministers are committed* to helping all sectors of society support children in their early years and to making incremental investments in this area.

First Ministers recognize that this initiative builds on the significant provincial/territorial investments already made in early childhood development and agree on the need to ensure flexibility to address local needs and priorities. This initiative also complements existing important federal investments for children and families.

Public Reporting

First Ministers believe in the importance of being accountable to Canadians for the early childhood development programs and services that they deliver. Clear public reporting will enhance accountability and will allow the public to track progress in improving the well-being of Canada's young children. Regular measuring of, and reporting on, early childhood development provides governments and others with a powerful tool to inform policy making and to ensure that actions are as focused and effective as possible.

Therefore, *First Ministers commit* their governments to:

- report annually to Canadians on their investments and their progress in enhancing programs and services in the four areas described above, beginning with establishing a baseline of current early childhood development expenditures and activities. Governments will begin reporting within one year and will strive to continue to improve the quality of reporting over time;
- develop a shared framework, including jointly agreed comparable indicators to permit each government to report on progress in improving and expanding early childhood development programs and services within the areas for action described above. The framework will be developed in a manner that recognizes the different starting points and pressures in each jurisdiction and is informed by their diverse priorities. Examples would include indicators of the availability and growth of programs and services related to pregnancy, birth and infancy; parenting and family supports; early childhood development, learning and care; and community supports. Governments will report on the results of this work by September 2002 and annually thereafter, beginning with the development of indicators in areas identified as priorities by jurisdictions, and expanding with the overall development of early childhood development programs and services; and
- make regular public reports on outcome indicators of child well-being using an agreed-upon set of common indicators to be developed by September 2002 related to the objectives established for early childhood development. This could include currently available indicators (such as children born at healthy birth weight and infant mortality) and newly developed indicators (such as a measure of the proportion of children who are ready to learn when they start school).

First Ministers agree that governments will consult third parties to assist, as appropriate, in developing indicators and assessing progress on early childhood development.

The purpose of performance measurement is for all governments to be accountable to their publics, not to each other. The amount of federal funding provided to any jurisdiction will not depend on achieving a given level of performance.

Knowledge, Information and Effective Practices

Research, knowledge and information are the foundations of evidence-based decision making and are critical to informed policy development. Dissemination of information and sharing of effective practices can create a more knowledgeable public on issues of child development and can promote the enhancement of early childhood development programs and services.

Governments agree to work together, where appropriate, on research and knowledge related to early childhood development, share information on effective practices that improve child outcomes and work together to disseminate the results of research.

Next Steps

First Ministers direct Ministers Responsible for Social Services and Health to begin implementation as soon as possible of the commitments and priorities outlined above.

Shared Framework for Reporting on Progress in Improving and Expanding Early Childhood Development Programs and Services

In order to help ensure consistency in the type of information that they provide to the public about their activities and expenditures under the federal/provincial/territorial Early Childhood Development (ECD) Agreement, governments have agreed on a shared framework for reporting. The shared framework provides a set of principles and guidelines for annual reporting by each government on their progress in improving and expanding the programs and services in which they are investing as part of the ECD Agreement. The full text of the shared framework, as agreed upon by governments, is provided below.

1. Introduction/Background

Public reporting is a key element of the Federal/Provincial/Territorial Early Childhood Development Initiative. The September 2000 First Ministers' Meeting Communiqué on Early Childhood Development⁶ states that:

"...First Ministers believe in the importance of being accountable to Canadians for the early childhood development services that they deliver. Clear public reporting will enhance accountability and will allow the public to track progress in improving the well-being of Canada's young children. Regular measuring of, and reporting on early childhood development provides governments and others with a powerful tool to inform policy-making and to ensure that actions are as focused and effective as possible.

Therefore, First Ministers commit their governments to:

- report annually to Canadians on their investments and their progress in enhancing programs and services in the four areas described above⁷ beginning with establishing a baseline of current early childhood development expenditures and activities. Governments will begin reporting within one year and will strive to continue to improve the quality of reporting over time;*
- develop a shared framework, including jointly agreed comparable indicators to permit each government to report on progress in improving and expanding early childhood development programs and services within the areas for action described above.⁷ The framework will be developed in a manner that recognizes the different starting points and pressures in each jurisdiction and is informed by their diverse priorities. Examples would include indicators of the availability and growth of programs and services related to pregnancy, birth and infancy; parenting and family supports; early childhood development, learning and care; and community supports. Governments will report on the results of this work by September 2002 and annually thereafter, beginning with the development of indicators in areas identified as priorities by jurisdictions, and expanding with the overall development programs and services..."*

⁶ The Government of Québec has stated that while sharing the same concerns on early childhood development, Québec does not adhere to the Federal/Provincial/Territorial Early Childhood Development Initiative because sections of it infringe on its constitutional jurisdiction on social matters. Québec intends to preserve its sole responsibility for developing, planning, managing and delivering early childhood development programs.

⁷ The four areas are: promote healthy pregnancy, infancy and birth; improve parenting and family supports; strengthen early childhood development, learning and care; and strengthen community supports.

2. Purpose

As noted in the communiqué, “the purpose of performance measurement is for all governments to be accountable to their publics, not to each other.”

The purpose of the shared framework is to provide a set of principles and guidelines, “including jointly agreed comparable indicators, to permit each government to report on progress in improving and expanding early childhood development programs and services” within the four areas for action identified by First Ministers.

In addition to their commitment to report on programs and services, governments also committed to report regularly on an agreed upon set of indicators of child well-being. However, this commitment is being addressed by governments as part of a separate process and therefore lies outside of the scope of this shared framework.

3. Underlying Principles/Considerations

Reporting by governments will be informed by the following statements included in the Early Childhood Development Communiqué:

- “The framework will be developed in a manner that recognizes the different starting points and pressures in each jurisdiction and is informed by their diverse priorities.”
- Governments “will strive to improve the quality of reporting over time.”
- “First Ministers agree that governments will consult third parties to assist, as appropriate, in developing indicators and assessing progress on early childhood development.”

In addition to specific direction from the Communiqué, provincial and territorial governments agree that:

- there is a significant diversity in the provision of early childhood development programs and services across the country and that there are varying data systems and capacities to report; and
- reports on progress in improving and expanding early childhood development programs and services will acknowledge the federal funding contribution to the province or territory in support of early childhood development.

4. Guidelines

a. Scope of Reporting Using the Shared Framework

Each government will report annually, using the shared framework, on the activities that they have selected as priorities for investment. Reports will indicate changes that have been implemented related to prior year investments. Reports will also indicate in which of the four areas for action governments have made investments under the Federal-Provincial-Territorial Early Childhood Development Initiative. The four areas are:

- promote healthy pregnancy, infancy, and birth;
- improve parenting and family supports;
- strengthen early childhood development, learning, and care; and
- strengthen community supports.

b. Types of Information to be Reported

i. Descriptive Information

Reports will contain the following *descriptive information* on programs and services that have been improved and/or expanded:

- program objectives;
- target population;
- program description;
- department(s) responsible; and
- delivery agent(s).

Descriptive information may also be provided on the following areas related to program development, improvement and/or integration, as appropriate:

- intersectoral linkages;
- consultation and community involvement;
- community capacity building;
- voluntary or private sector participation;
- program evaluation findings;
- program models;
- pilot project results;
- changes in regulatory environment; and
- capital and/or infrastructure investments.

ii. Program Indicators

As appropriate, governments may report on programs and services using additional indicators to those described below.

Expenditures

Governments will report on changes in *expenditures* on ECD programs and services relative to the prior fiscal year.

For programs and initiatives providing direct services to clients:

Availability

Governments will report on the *availability* of early childhood development programs and services funded under the Federal-Provincial-Territorial Early Childhood Development Initiative using one or more of the following indicators:

- number of clients served (i.e., number of children served, number of families served, and/or number of program “spaces” or equivalent);
- number of program sites.

Accessibility

Where the objective of an investment by governments is to improve *accessibility*, governments will report on one or more of the following indicators of accessibility:

- increase in the percentage of the target population served;
- change in the socio-demographic profile of the client population.

Affordability

Where the objective of an investment by governments is to improve *affordability*, governments will report on changes in the fee and/or subsidy structures of the relevant programs.

Quality

Where the objective of an investment by governments is to improve *quality*, governments will report on one or more indicators of quality, such as:

- improvement in the education/training of service providers;
- increases in wage rates;
- increases in provider-to-client ratios;
- increases in client satisfaction.

For other programs and initiatives (for example, research, public education, information and related activities) related to the four areas for action:

Governments will report on descriptive information and expenditures as indicated above.

c. Mechanisms and Timing

The public reporting requirements set out in this shared framework can be met through a number of vehicles including: stand-alone reports, new or existing public reports on children, and departmental reports and/or business plans.

Governments agree to inform other governments of the vehicle they will use to meet reporting requirements and to provide advance notice, wherever possible, to other governments regarding the approximate date of release for their respective early childhood development reports.

Governments will report annually on their investments in early childhood development and on their progress in enhancing programs and services in the four areas for action, beginning in September 2002.

5. Review of the Shared Framework

First Ministers have committed to “improve the quality of reporting over time.” After the release of the first set of reports based on the shared framework, officials may undertake a review of the shared framework and make recommendations to Ministers Responsible for Social Services and Health as required.

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Health Canada

Chapter 3: Parenting and Family Supports

Get Set for Life			
Expenditures		Delivery Agent	The activity reaches:
2000–2001	\$100,000	NA	NA
2001–2002	\$50,000		
2002–2003	NA		
2003–2004	NA		
2004–2005	NA		
2005–2006	NA		
Health Canada supported development of the Get Set for Life tools but is no longer financially involved in the campaign after 2001–2002.			

Safe Seasons Calendar			
Expenditures		Delivery Agent	The activity reaches
2000–2001	NA		
2001–2002	\$135,000		
2002–2003	NA		
2003–2004	NA		
2004–2005	NA		
2005–2006	NA		
Due to budgetary pressures, no calendars were developed after 2001–2002.			

Public Health Agency of Canada

Chapter 3: Parenting and Family Supports

Canada's Child Health Record			
Expenditures		Delivery Agent	The activity reaches
2000–2001	\$105,000	Health professionals, public and community health agencies and social service agencies	Health professionals, public and community health agencies and social service agencies
2001–2002	\$85,000		
2002–2003	NA		
2003–2004	NA		
2004–2005	NA		
2005–2006	NA		
Expenditures include operations and management costs only. 2000–2001: The Child Health Record was first published in 2000. 2001–2002: Health Canada funding only. In addition, Procter & Gamble—Pampers contributed approximately \$300,000 for printing and dissemination through hospital gift packs and a media event. 2002–2003: The record was distributed; however, it has not been reprinted or updated. 2004–2005: There were no plans to update or distribute the record.			

Social Marketing Campaign on Children's Health		
Expenditures	Delivery Agent	The activity reaches
2000–2001	NA	
2001–2002		
2002–2003		
2003–2004		
2004–2005		
2005–2006		
Expenditures include operations and management costs only. Due to changing priorities, a campaign on children's health was postponed and no campaign was held after 2001–2002.		

Partnership with Parents d'Aujourd'hui		
Expenditures	Delivery Agent	The activity reaches
2000–2001	NA	
2001–2002		
2002–2003		
2003–2004		
2004–2005		
2005–2006		
2002–2006: Due to changing priorities, social marketing campaigns with parents as the target audience were not carried out. Therefore, a partnership with Parents d'Aujourd'hui did not occur.		

Chapter 7: Research and Information

Mother-Net Pilot Project		
Expenditures	Delivery Agent	The activity reaches
2000–2001		
2001–2002		
2002–2003		
2003–2004		
2004–2005		
2005–2006		
2001–2002: Decrease from 2000–2001, but does not include salaries, which were included in the 2000–2001 expenditure figure. 2002–2003: Discontinued due to a shift in priorities at Health Canada.		

Multilateral Framework on Early Learning and Child Care, March 2003

On March 13, 2003, Federal, Provincial and Territorial Ministers Responsible for Social Services agreed on a framework for improving access to affordable, quality, provincially and territorially regulated early learning and child care programs and services.

Under this Multilateral Framework, the Government of Canada is providing \$900 million over five years to support provincial and territorial governments' investments in early learning and child care.

Following is the full text of the Multilateral Framework.

Introduction

In September 2000, First Ministers⁸ released a communiqué on Early Childhood Development (ECD) that recognized the critical importance of the early years of life in the development and future well-being of the child. Recognizing that families play the primary role in supporting and nurturing children, they committed to improve and expand early childhood development programs, building on existing investments.

Progress has been made under the Early Childhood Development initiative in each of the four key areas for action identified by First Ministers:

- promote healthy pregnancy, birth and infancy;
- improve parenting and family supports;
- strengthen early childhood development, learning and care; and
- strengthen community supports.

Governments remain committed to improving and expanding programs and services in any or all of these four key areas for action over time.

Building on this commitment, Federal, Provincial and Territorial Ministers Responsible for Social Services agree to make additional investments in the specific area of early learning and child care. Ministers recognize that quality early learning and child care programs play an important role in promoting the social, emotional, physical and cognitive development of young children.

This early learning and childcare framework represents another important step in the development of early childhood development programs and services. This initiative is consistent with, and builds upon, the commitments made by First Ministers in September 2000.

Objectives

The objective of this initiative is to further promote early childhood development and support the participation of parents in employment or training by improving access to affordable, quality early learning and child care programs and services.

⁸ While the Government of Québec supports the general principles of the Early Childhood Development initiative and the Early Learning and Child Care initiative, it did not participate in developing these initiatives because it intends to preserve its sole responsibility on social matters. However, Québec receives its share of federal funding and the Government of Québec is making major investments towards programs and services for families and children. All references to viewpoints shared by the federal, provincial and territorial governments in this document do not include the viewpoints of the Government of Québec.

Areas For Investment

To advance the objective set out above, Ministers agree to further invest in provincially/territorially regulated early learning and child care programs for children under six. In the context of this framework, regulated programs are defined as programs that meet quality standards that are established and monitored by provincial/territorial governments.

Early learning and child care programs and services funded through this initiative will primarily provide direct care and early learning for children in settings such as child care centres, family child care homes, preschools and nursery schools. Types of investments could include capital and operating funding, fee subsidies, wage enhancements, training, professional development and support, quality assurance, and parent information and referral. Programs and services that are part of the formal school system will not be included in this initiative.

Effective Approaches

In the settings described above, effective approaches to early learning and child care are based on the following principles:

Available and Accessible

Flexible and responsive early learning and child care options should be broadly available to promote early childhood development and to support parents to participate in employment or training. Examples of initiatives that support availability and accessibility could include increasing early learning and child care spaces, supporting extended and flexible hours of operation, and parent information and referral.

Affordable

Early learning and child care services should be affordable. Governments have established mechanisms to assist parents in meeting the costs of early learning and child care. Examples of initiatives that support affordability could include enhancing fee subsidies that take into account parents' ability to pay and operational funding.

Quality

Early learning and child care should be of high quality to support optimal child development. Examples of initiatives that support high-quality early learning and child care could include enhancements to training and support, child-caregiver ratios and group size, compensation, recruitment and retention, physical environment, health and safety, and learning environment.

Inclusive

Early learning and child care should be inclusive of, and responsive to, the needs of children with differing abilities; Aboriginal (i.e., Indian, Inuit and Métis) children; and children in various cultural and linguistic circumstances. Examples of initiatives that support inclusiveness could include special needs programming and supports, and culturally and linguistically appropriate resources and training.

Parental Choice

Early learning and child care services should provide the flexibility to respond to the varying needs and preferences of parents and children. Examples of initiatives that support parental choice could include innovative approaches to service provision in rural and remote communities, and flexible approaches that address a range of family and employment circumstances.

Working Together

Consistent with commitments made by First Ministers, governments will work together in full respect of each other's responsibilities, recognizing that provinces and territories have the primary responsibility for early learning and child care. Each government will determine its priorities within this initiative. Each government agrees to publicly recognize and explain the respective roles and contributions of governments to this initiative.

Governments will continue to work with the Aboriginal peoples of Canada to find practical solutions to address the developmental needs of Aboriginal children.

Governments will ensure effective mechanisms for Canadians to participate in developing early learning and child care priorities and reviewing outcomes.

Funding

First Ministers agreed that investments for early childhood development should be incremental, predictable and sustained over the long-term.

Federal, Provincial and Territorial Ministers Responsible for Social Services agree that support for early learning and child care is a critical investment in our children's future. Ministers agree that further investments in early learning and child care should also be incremental, predictable and sustained over the long-term.

Ministers recognize that this initiative builds on the significant provincial/territorial investments already made in early learning and child care and agree on the need for flexibility to address local needs and priorities. This initiative also complements important existing federal investments for children and families.

Public Reporting

Ministers believe in the importance of being accountable to Canadians for early learning and child care programs and services. Clear public reporting will enhance accountability and will allow the public to track progress in improving access to affordable, quality early learning and child care programs and services.

In the First Ministers' Communiqué on Early Childhood Development, governments committed to report annually to Canadians on investments and progress in the area of early childhood development. Consistent with that commitment, and with early childhood development reporting by jurisdictions, Ministers commit to report annually to Canadians on their progress in improving access to affordable, quality early learning and child care programs and services.

More specifically, Ministers will report annually to Canadians on all early learning and child care programs and services as defined in this Framework, beginning with a baseline report for 2002–2003. Reports will include:

- descriptive and expenditure information on all early learning and child care programs and services;
- indicators of availability, such as number of spaces in early learning and child care settings broken down by age of child and type of setting;
- indicators of affordability, such as number of children receiving subsidies, income and social eligibility for fee subsidies, and maximum subsidy by age of child; and
- indicators of quality, such as training requirements, child-caregiver ratios and group size, where available.

Governments commit to publicly release baseline information by the end of November 2003; annual reports will be released beginning in November 2004.

The purpose of performance measurement is for all governments to be accountable to their publics, not to each other. The amount of federal funding provided to any jurisdiction will not depend on achieving a given level of performance.

Governments will strive to continue to improve the quality of reporting over time.

Knowledge, Information and Effective Practices

Research, knowledge and information are the foundations of evidence-based decision making and are critical to informed policy development. Governments recognize the importance of evaluation in determining the effectiveness and outcomes of initiatives in early learning and child care, and agree to work together to develop an evaluation framework within one year of federal funding being received. Where appropriate, governments agree to pursue evaluations based on this framework, and agree to work together to share information on effective practices in early learning and child care, which may include evaluation findings.

Next Steps

Federal, Provincial and Territorial Ministers Responsible for Social Services will begin implementation as soon as possible of the commitments and priorities outlined in this framework.