



**DO WE
BELONG?**

**ARE WE
PROTECTED?**

Social environments

DO WE BELONG?

ARE WE PROTECTED?

Social environments

Belonging is a fundamental human need that is achieved by participating in lasting, stable, positive, interpersonal relationships. At its core, belonging reflects the belief that we are valued and cared for by others, across time, and even during periods of conflict.¹ A child's early relationships and attachments with caregivers shape their working models of self, the world, and the future close relationships they form into adulthood. The degree of connection a young person feels to siblings, caregivers, teachers, friends, extended family, community, and their culture directly impacts their overall well-being.²

The quality of the social environment, including how well a young person is protected from harm, is also critical to developing a sense of belonging. The UNCRC affirms that children have a fundamental right to be protected from violence, abuse, neglect, exploitation and discrimination (UNCRC Articles 2, 19, 23, 30, 32, 33, 34, 35, 36 and 37).³ Governments also have a duty to implement appropriate measures to protect children and youth, to support families to stay together, and to provide care and rehabilitation grounded in dignity when harm occurs (UNCRC Articles 9, 10, 20 and 39).³







Although most children and youth in Nova Scotia are well cared for and enjoy nurturing relationships, there are too many who are hurting and deserve greater protection from harm. Improving information about this aspect of well-being is important, but we know enough now to act.

AT A GLANCE





- Nova Scotia
- Canada

Dimension	Indicator		
Identity and basic social-emotional needs	Trust in others	Percentage of students in grades 6 to 10 that agreed or strongly agreed they could trust people around them	87.9%
		<i>Health Behaviour in School-aged Children survey, 2018/2019*</i>	86.9%
	Connection to self	Percentage of students in grades 6 to 10 that reported a high connection to self	66.9%
		<i>Health Behaviour in School-aged Children survey, 2018/2019*</i>	65.9%
	Connection to others	Percentage of students in grades 6 to 10 that reported a high connection to others	59.7%
		<i>Health Behaviour in School-aged Children survey, 2018/2019*</i>	56.5%
	Connection and a sense of belonging to the local community	Percentage of young people 12 to 17 years of age that experienced a sense of belonging to their local community	85.1%
	<i>Statistics Canada, Canadian Community Health survey, Annual Component, 2019 Table 13-10-0096-01</i>	86.5%	
	Acceptance by classmates	Percentage of students in grades 6 to 10 that agreed or strongly agreed that other students accepted them as they were	64.3%
	<i>Health Behaviour in School-aged Children survey, 2018/2019*</i>	63.9%	
	A sense of belonging at school	Percentage of students in grades 4 to 12 that feel they belong at their school	78%
	<i>Province of Nova Scotia, 2018/2019 Student Success Survey</i>	N/A	

* Indicates a custom data request from the data source indicated.

Dimension	Indicator		
Family and social relationships	High level of family support Percentage of students in grades 6 to 10 in the highest third of the family support scale <i>Health Behaviour in School-aged Children survey, 2018/2019*</i>	38.3%	
	High level of friend support Percentage of students in grades 6 to 10 that reported high friend support on a friend-support scale <i>Health Behaviour in School-aged Children survey, 2018/2019*</i>	41.1%	
	A friend to talk with Percentage of students in grades 4 to 12 that have at least one friend they can go to if they need to talk to someone <i>Province of Nova Scotia, 2018/2019 Student Success Survey</i>	94%	
	An adult to talk with Percentage of students in grades 4 to 12 that have at least one adult they can go to if they need to talk to someone <i>Province of Nova Scotia, 2018/2019 Student Success Survey</i>	84%	
	A supportive teacher Percentage of students in grades 4 to 12 that agreed or strongly agreed their teacher believes they can do well in school <i>Province of Nova Scotia, 2018/2019 Student Success Survey</i>	95%	
	An encouraging teacher Percentage of students in grades 4 to 12 that agreed or strongly agreed their teacher encourages them to be themselves <i>Province of Nova Scotia, 2018/2019 Student Success Survey</i>	85%	
	Public policies related to family and social services	Children and youth that received child protective services Substantiated cases of abuse or neglect that required child protective services from the Department of Community Services <i>Nova Scotia Department of Community Services, 2019</i>	3,686 N/A
	Children and youth in care Children and youth from birth to 24 years of age in the care of the Department of Community Services <i>Nova Scotia Department of Community Services, 2019</i>	1,622 N/A	

* Indicates a custom data request from the data source indicated.

Dimension	Indicator		
Violence and harm	Incidence of being bullied		
	Grades 7 to 9	Percentage of students that reported being bullied in the last 30 days	31.2%
	<i>Health Canada, 2018-2019 Canadian Student Tobacco, Alcohol and Drugs survey</i>	23.6%	
	Grades 10 to 12	Percentage of students that reported being bullied in the last 30 days	27.1%
	<i>Health Canada, 2018-2019 Canadian Student Tobacco, Alcohol and Drugs survey</i>	19.9%	
	Feelings of being unsafe or threatened in school	Percentage of students in grades 4 to 12 that report feeling unsafe or threatened at school in the last 30 days	19%
	<i>Province of Nova Scotia, 2018/2019 Student Success Survey</i>	N/A	
	Victims of family violence	Rate of children and youth aged 17 years and younger that experience violence by parents, siblings, and extended family reported to police	343 per 1,000,000
	<i>Statistics Canada, Canadian Centre for Justice and Community Safety Statistics, Incident-based Uniform Crime Reporting Survey, 2019 Table 2.4</i>	308 per 1,000,000	
	Victims of non-family violence	Rate of children and youth aged 17 years and younger that experience violence committed by non-family perpetrators	839 per 1,000,000
<i>Statistics Canada, Canadian Centre for Justice and Community Safety Statistics, Incident-based Uniform Crime Reporting Survey, 2019 Table 2.4</i>	655 per 1,000,000		
Victims of violence during dating relationship	Percentage of students in grades 9 and 10 that reported being victims of teen dating violence in last 12 months	21.9%	
<i>Health Behaviour in School-aged Children survey, 2018/2019*</i>	17%		

* Indicates a custom data request from the data source indicated.

DO CHILDREN AND YOUTH IN NOVA SCOTIA FEEL THEY BELONG?

In Nova Scotia, there is no systematic collection of data about children prior to school entry. As such, it is difficult to know the extent to which younger children feel they belong and feel connected. The *Health Behaviour in School-aged Children* survey gathers responses from children and youth in grades 6 to 10 on the quality of their relationships and connections.¹⁵ Additional information on the quality of child and youth relationships is found in the 2018-2019 *Nova Scotia Student Success Survey*.¹⁶

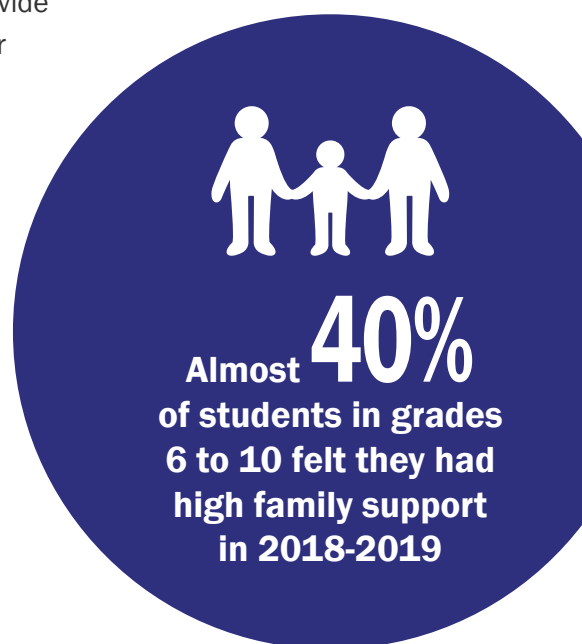
Connection with others often stems from a foundation of trust. A large number of Nova Scotian respondents in grades 6 to 10 agreed they can trust the people around them (87.9 percent).¹⁵ Many students also reported strong feelings of connectedness to others (59.7 percent) and themselves (66.9 percent) at rates similar to their Canadian peers (Others: 56.5 percent, Self: 65.9 percent). Boys in grades 6 to 8 and grades 9 to 10 were less likely than their peers to report a high connection to others.¹⁵

The perception of trust, as reported by Nova Scotian students, is influenced by affluence; children who reported lower family wealth were nearly twice as likely to say they are unable to trust others compared with those who report high family affluence.¹⁵

Home and family

The attachments young people form with parents or caregivers provide a critical foundation for the development and organization of their emotions. It is important to recognize that family units are diverse and may include one or more adults, multiple generations, or blended families, among other possibilities.

Attachment theory stresses the need for caregivers, key players in children's psychological and emotional health, to create a safe base for children to explore their environment and return for support if distressed.¹⁷ Obtaining consistent support and understanding helps children and youth develop the emotional regulation needed for future relationships. The family unit also influences a developing child's morals, values, and beliefs.



According to the 2018-2019 *Health Behaviour in School-aged Children survey*, the percentage of students in Nova Scotia who feel they have high family support is similar to other Canadian youth, 38.3 percent versus 37.3 percent.¹⁵ A greater proportion of boys in grades 6 to 10 reported high family support (81 to 86 percent) than girls (70 to 80 percent). The majority of young people in grades 6 to 10 surveyed in Nova Scotia reported they feel understood by their parents at rates comparable to their Canadian peers.¹⁵ Of note, Nova Scotian girls in grades 9 and 10 were least likely to feel understood by their parents (61 percent).¹⁵

Peers

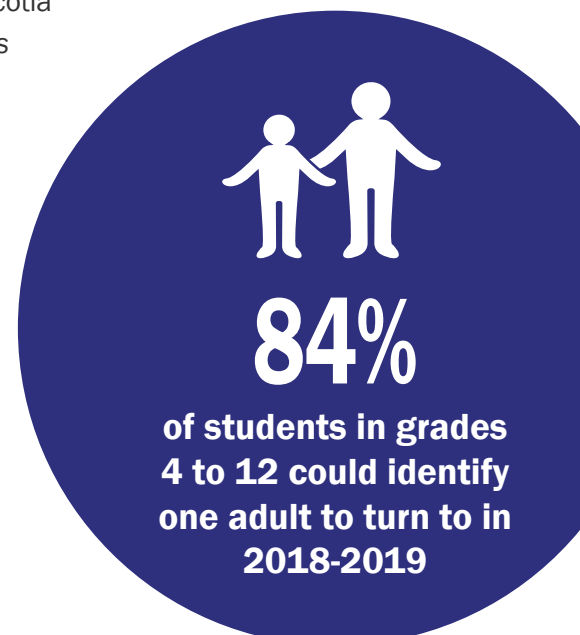
Peer relationships and friendships are also vital to nurturing a young person's sense of self. Friendship is particularly important for young people who may not find support at home. Encouragingly, 94 percent of Nova Scotian youth who responded to the 2018-2019 *Nova Scotia Student Success Survey* have a friend to talk to when in need.¹⁶


Results from the 2018-2019 *Health Behaviour in School-aged Children survey* suggest, however, that just 41.1 percent of Nova Scotian students in grades 6 to 10 feel high levels of friend support.¹⁵ Girls in grades 6 to 8 were most likely to report high levels of support from friends (50 percent), while boys in grades 9 to 10 were least likely to report high levels (27 percent).¹⁵ This feeling may be driven by acceptance, with just 64.3 percent of youth in grades 6 to 10 reporting they felt accepted by their classmates.¹⁵

Trusted adults and sense of community

When faced with difficult situations, proximity to a caring adult critically contributes to a child's sense of safety and can buffer the negative impacts of toxic stress.¹⁸ Eighty-four percent of grade 4 to 12 students in Nova Scotia who responded to the 2018-2019 *Nova Scotia Student Success Survey* could identify at least one adult to turn to if they are in need.¹⁶ While this represents most students in these grades, it is concerning that more than one in 10 of these young people cannot identify a supportive adult.

Children and youth spend many of their waking hours in school, and the relationship children forge with teachers can be central to their overall well-being. In the 2018-2019 *Nova Scotia Student Success Survey*, children and youth in grades 4 to 12 generally reported having a positive relationship with teachers, with 85 percent feeling their





teacher encouraged them to be themselves, and 95 percent feeling their teacher believed in their ability to do well.¹⁶ Based on this same survey, just 67 percent of children and youth felt their teachers would notice if something was bothering them and only 37 percent felt teachers would know what their home life was like.¹⁶ These troubling figures point to the need to support our province's teachers with the time and resources they require to serve as critical adults in the lives of children and youth in Nova Scotia.¹⁶

The percentage of young people aged 12 to 17 across Canada who experienced a sense of belonging to their local community has been stable since 2017.¹⁹ In 2019, 85.1 percent of Nova Scotian youth reported having a sense of belonging to their community, just below the national average (86.5 percent).¹⁹

PROTECTION FROM HARM

Harm arising from bullying, stressors in the home (such as parental substance misuse or incarceration), witnessing domestic violence, experiencing abuse, neglect, racism, or discrimination are sometimes collectively referred to as adverse childhood experiences (ACEs).⁴ When a child is exposed to these types of negative or traumatizing experiences in a repeated fashion and without the mitigating presence of a supportive adult, there can be a prolonged activation of the body's stress-response system that disrupts brain development and organ-system function. This is known as toxic stress.⁵

The toxic stress produced by ACEs has been linked to poorer physical health outcomes in adulthood including heart disease, liver disease, and cancer.⁶ In addition to impacts on physical health, ACEs have been linked to poorer mental health and social outcomes beginning in early childhood and extending into adulthood. These range from challenges with social development,⁷ behaviour,⁸ and school readiness⁹ to substance dependence and suicide attempts.¹⁰⁻¹² ACEs are cumulative: the greater number of traumatic events, the greater the risk of poorer health and well-being.¹⁰

Awareness about ACEs arose in large part due to a major longitudinal health study that began in 1995 as a joint initiative of Kaiser Permanente and the Centers for Disease Control and Prevention in the United States.⁶

The study explored 10 categories of childhood adversity that included physical, sexual, and emotional abuse; physical and emotional neglect; and five measures of household dysfunction such as domestic violence, parental mental illness, and/or substance abuse, an incarcerated

relative, and separation/divorce. The group found that such experiences in childhood were common; 61.7 percent of adults in the study reported at least one adverse childhood experience and 16.7 percent had experienced four or more.⁶

In Canada, trends are similar. Research carried out in Alberta found that almost 70 percent of participants in a study sample had experienced at least one type of adverse childhood experience, and almost one in five (18.1 percent) reported four or more.¹³ A 2018 study conducted in rural Nova Scotia found 73 percent of survey respondents reported one adverse childhood experience, and 31 percent reported four or more.¹⁴

Bullying and discrimination

The negative impacts of bullying on broader well-being in childhood and beyond are well documented globally.²⁰ The harms of bullying can range from physical to emotional and can profoundly impact a young person's sense of self and their feelings of belonging and safety.²⁰⁻²²

Based on data from the 2018-2019 *Canadian Student, Tobacco, Alcohol and Drugs Survey*, Nova Scotian students in grades 7 to 12 consistently reported being bullied at a rate higher than the Canadian average.²³ Those in grades 7 to 9 reported being bullied within the last month at a rate of 31.2 percent compared to 23.6 percent of their Canadian peers.²³ Those in grades 10 to 12 reported being bullied within the previous month at a rate of 27.1 percent compared to 19.9 percent nationally.²³ Both middle and high school students reported that non-verbal forms of bullying, (e.g., being ignored, being left out or excluded, being given dirty looks) were most common, followed by verbal attacks and cyberattacks.²³

In the 2018-2019 *Nova Scotia Student Success Survey*, on average, one out of every five Nova Scotian students in grades 4 to 12 said they felt unsafe or threatened at school over the previous 30 days.¹⁶ Among those who felt unsafe at school, half believed that their physical appearance contributed to their mistreatment.¹⁶ Other key reasons for feeling unsafe included how the student behaved with others (33 percent), their mental health (24 percent), their marks in school (21 percent), the way they speak (20 percent), and how much money their family has (19 percent).¹⁶



These high rates of bullying and discrimination are deeply concerning and must be addressed by ensuring children and youth feel safe in environments like schools where they spend a great deal of their time. Making sure support is available when bullying occurs is also essential.

Child maltreatment and trauma

Instances of physical and sexual violence against children and youth are substantially under-reported making it challenging to accurately estimate the number of children in need of protection or protective services in any jurisdiction. An estimated one in three Canadians identify as having experienced physical violence, sexual assault, or exposure to domestic abuse in childhood,²⁴ yet it is estimated that only 1 in 10 cases of child abuse are reported to authorities.²⁵

In Nova Scotia, the Department of Community Services and the Mi'kmaw Family and Children's Services are the two agencies responsible for child protection under the *Children and Family Services Act*. Between 2015 to 2019, there were over 70,000 referrals to the Department of Community Services.²⁶ Reasons for referral vary but include concerns of neglect or physical, emotional, or sexual abuse. An average of 4,139 cases per year were substantiated prompting a need for protection as specified in the legislation.²⁶

The number of substantiated cases by type of case (neglect, abuse, etc.) in Nova Scotia was not available for this data profile; however, across Canadian jurisdictions, neglect is consistently a top reason that children need formal protection by child welfare authorities.²⁸ Neglect is defined in Nova Scotia's *Children and Family Services Act* as "the chronic and serious failure to provide to the child (i) adequate food, clothing, or shelter, (ii) adequate supervision, (iii) affection, cognitive stimulation, or (iv) any other similar failure to provide."²⁹

While substantiated cases referred to child protective services are one indicator of the prevalence of violence and maltreatment experienced by children and youth, cases reported to police provide additional insight into the nature of this problem. In 2018-2019, Nova Scotian children and youth were victims of police-reported violence (including physical and sexual assault) by a family member at a rate of 343 per 100,000 people, higher than the Canadian rate of 308 per 100,000.³⁰ Similarly, police-reported non-family violence against children and youth was higher in Nova Scotia than across Canada, at 839 per 100,000 children and youth compared to 655 per 100,000 nationally.³⁰



We know that too many children and youth are facing the harms of child maltreatment, yet it must be acknowledged again that substantiated cases and those reported to police underrepresent the number of children and youth who are experiencing forms of cruelty, abuse, and neglect as many forms of maltreatment. These instances may go undiscovered, unreported, or can be challenging to substantiate.²⁷

Best practices in trauma and maltreatment service provision

To support the healing of survivors of maltreatment and trauma, best practices in service provision have been developed such as a collaborative model called Child and Youth Advocacy Centres (CYACs). This model is founded on bringing together the multi-departmental services involved in responding to concerns of child abuse to create a more streamlined, coordinated approach that is client-focused and trauma-informed.

In Nova Scotia, the SeaStar CYAC, based in Halifax, is the province's first small-scale Child and Youth Advocacy Centre.³¹ SeaStar primarily addresses cases of sexual and physical assault that are investigated by child welfare and/or police, providing coordinated access to medical care, mental health referrals, and victim support.³¹ SeaStar serves an average of 200 children and youth each year.³¹

Despite greater demand for access, underfunding has prevented the full development and expansion of this model across the province. Given the much larger number of children and youth experiencing harm and maltreatment, there is an urgent need to expand support services for survivors.

Children and youth in care

When a family is impacted by threats to safety, children and youth may be placed in alternative care under the direction of the Nova Scotia Department of Community Services (DCS) or Mi'kmaw Family and Child Services (MFCS). Placements may be temporary or permanent, court mandated, or voluntarily agreed to. Children and youth may be placed with a relative, with an unrelated caregiver, in a place of safety as defined by the *Children and Family Services Act*, or in a residential group home.²⁹ They may transition through several placements across

the continuum-of-care arrangements. Transitioning through multiple care environments may negatively impact the ability of children and youth to form secure attachments and achieve a sense of belonging. This is especially the case when young people are removed from their home community, potentially resulting in feelings of diminished cultural safety and connection.

Some children and youth return to their families when there is no longer substantive ongoing risk of harm. Young people also have the option of doing so when they age out of care, which occurs at different ages depending on the type of placement. Those who cannot be reunified with family may be adopted. In general, arrangements that result in reunification with family or those that result in permanence (an enduring, safe, stable relationship) have been associated with improved outcomes.³² Placements that favour kinship care – the placement of a child or youth in need of protection with an individual the child is biologically related to or has an existing relationship with – have been found to result in greater permanency, lower risk of the child re-entering care, and fewer placement breakdowns.^{33,34}

On average, 1,723 children and youth per year were in the care of the province of Nova Scotia between 2015 and 2019.²⁶ There is an overall trend toward fewer children and youth in care per year during this period, with a total of 1,622 children and youth in the care of the province in 2019. It is important to note that while there is a decreasing number of children aged 12 to 19 coming into care, the number of children aged 0 to 11 years in care has largely remained unchanged between 2015 to 2019.²⁶



EMERGING
ISSUE

TUITION-WAIVERS FOR FORMER YOUTH IN CARE

Recently, several universities and colleges in Nova Scotia instituted tuition-waiver and support programs for students who were former youth in care to increase access to higher education.³⁶ It will be important to track the impact of these initiatives to better understand the effects of implementing supports aimed at targeting key inequities faced by children and youth who have been in care.

Data from DCS also indicate that there was a steady decrease in the number of kinship-care placements by almost 50 percent (385 to 202) between 2015 and 2019.²⁶ Rates of reunification after being in care were not available for Nova Scotia but are an important indicator.

More information is needed to understand the factors contributing to the trends seen in the data. At present, there are no published evaluations assessing the well-being of children while in care, nor the outcomes of youth who transition from child welfare programs and services in Nova Scotia.

Understanding the long-term outcomes of children and youth in care is essential.

This information could be used to design effective programs and supports for children and youth with DCS and MFCS involvement, and to appropriately prioritize family unity and reunification in home communities. In other provinces where outcomes have been studied, youth exiting the care system have been found to face greater challenges with their health and education, and are at increased risk of experiencing homelessness or involvement with the criminal justice system.³⁵

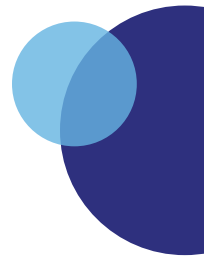
Intimate partner violence and human trafficking

Children and youth may face safety issues in their own intimate relationships and need the appropriate education, supports, and protection from adults for this type of harm as well. In Nova Scotia, over one in four girls in grades 9 to 10 (26 percent) and just under one in five boys (18 percent) reported being victimized in their dating relationships over the previous year.¹⁵ These rates are higher than the national average for girls (girls: 19 percent, boys: 18 percent).¹⁵ Experiencing dating violence in adolescence has been shown to increase risk of re-victimization in adulthood as well as negatively impacting health outcomes including poor mental health and substance use.³⁷

Commercial sexual exploitation, commonly known as trafficking, is also a devastating form of violence that impacts young people. It should alarm us all that Nova Scotia has the highest rate of human trafficking incidents in Canada, at a rate of 1.0 per 100,000 people between 2009 and 2018 compared to 0.5 incidents per 100,000 nationally.³⁸ The rate of incidents



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per 100,000 population in the census metropolitan area of Halifax was the highest nationally, at 2.1 per 100,000.³⁸ Nearly half (45 percent) of victims of police-reported human trafficking in Canada since 2009 were between 18 and 24 years of age, and roughly 3 in 10 victims were under the age of 18 (28 percent).³⁸ Data on the age composition of victims is not available at the provincial level, nor are data recorded on the longer-term outcomes these young people experience.

In February 2020, the government of Nova Scotia announced an annual investment of \$1.4 million dollars over five years to support initiatives related to human trafficking in the province.³⁹ This includes educational outreach initiatives, improved police and justice support, and partnerships with community groups.³⁹ As provincial investment in supports and programs continues, attention should be given to evaluating interventions and improving information about the scale of this issue and outcomes of survivors.

Resilience: Not a reason for inaction

Despite the prevalence of many harms and stressors in childhood, many children and youth are resilient even in the face of adversity. While bolstering resilience and supporting the strengths of children and youth is important for enhancing well-being, adults cannot view this as a justification for inaction to address factors that lead to toxic stress and adverse experiences.

THE BOTTOM LINE

Many Nova Scotian children can rely on the support of their families, peers, and broader community, but too many young people in Nova Scotia face threats to their personal belonging and safety.

Failing to protect and provide healing for those who experience adversity in childhood will have long-lasting consequences. Implementing supports and services that protect child rights requires a community effort and full systems approach. Attention must be paid to the structural and systemic factors that influence experiences of neglect, bullying, discrimination, and violence in childhood, such as racism and poverty.

SOURCES FOR THIS SECTION

1. Corrales T et al (2016). Childhood adversity, sense of belonging and psychosocial outcomes in emerging adulthood: A test of mediated pathways. *Children and Youth Services Review*, 63:110–119.
2. Harvard University Center on the Developing Child (n.d.). Three Early Childhood Development Principles to Improve Child Outcomes. Available from: <https://developingchild.harvard.edu/resources/three-early-childhood-development-principles-improve-child-family-outcomes/>. Accessed September 21, 2021.
3. United Nations (1990). Convention on the Rights of the Child: General Assembly Resolution 44/25 of 20.
4. Centers for Disease Control and Prevention (2019). Preventing Adverse Childhood Experiences: Leveraging the Best Available Evidence. Available from: <https://www.cdc.gov/violenceprevention/pdf/preventingACES.pdf>. Accessed June 4, 2021.
5. Harvard University Center on the Developing Child (2020). Toxic Stress. Available from: <https://developingchild.harvard.edu/science/key-concepts/toxic-stress/>. Accessed June 4, 2021.
6. Felitti VJ, et al (1998). Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults. *American Journal of Preventive Medicine*, 14:245–258.
7. Kerker BD, et al (2015). Adverse Childhood Experiences and Mental Health, Chronic Medical Conditions, and Development in Young Children. *Academic Pediatrics*, 15: 510–517.
8. Hunt TKA, Slack KS, Berger LM (2017). Adverse childhood experiences and behavioral problems in middle childhood. *Child Abuse & Neglect* 67: 391–402.
9. Jackson DB, Testa A, Vaughn MG (2021). Adverse Childhood Experiences and School Readiness Among Preschool-Aged Children. *Journal of Pediatrics*, 230: 191-197.e5.
10. Chapman DP, et al (2004). Adverse childhood experiences and the risk of depressive disorders in adulthood. *Journal of Affective Disorders*, 82: 217–225.
11. Hughes K, et al (2017). The effect of multiple adverse childhood experiences on health: a systematic review and meta-analysis. *The Lancet Public Health* 2:e356–e366.
12. Merrick MT, et al (2017). Unpacking the impact of adverse childhood experiences on adult mental health. *Child Abuse & Neglect* 69; 10–19.
13. Poole JC, Dobson KS, Pusch D (2018). Do adverse childhood experiences predict adult interpersonal difficulties? The role of emotion dysregulation. *Child Abuse & Neglect*, 80:123–133.
14. Ross N, et al (2020). Adverse childhood experiences: Assessing the impact on physical and psychosocial health in adulthood and the mitigating role of resilience. *Child Abuse & Neglect*, 103:104440.
15. Craig W, et al (2020). Health and Health-Related Behaviours among Young People: Nova Scotia Report.
16. Department of Education and Early Childhood Development and Communications Nova Scotia (2019). Student Success Survey. Available from: https://plans.ednet.ns.ca/sites/default/files/documents/2018-2019_StudentSuccessSurvey.pdf. Accessed October 8, 2021.
17. Cassidy J, Jones JD, Shaver PR (2013). Contributions of attachment theory and research: A framework for future research, translation, and policy. *Dev Psychopathol* 25:1415–1434.
18. Bellis MA, et al (2017). Does continuous trusted adult support in childhood impart life-course resilience against adverse childhood experiences - a retrospective study on adult health-harming behaviours and mental well-being. *BMC Psychiatry*, 17:110.
19. Statistics Canada (2020). Health Characteristics: Annual Estimates. Available from: <https://www150.statcan.gc.ca/t1/tbl1/en/cv.action?pid=1310009601>. Accessed November 10, 2021.
20. Armitage R (2021). Bullying in children: impact on child health. *BMJ Pediatrics Open*, 5:e000939.

21. Wu XY, Kirk SFL, Ohinmaa A, Veugelers PJ (2017). The importance of health behaviours in childhood for the development of internalizing disorders during adolescence. *BMC Psychology*, 5:38.
22. Kontak JCH, et al (2019). The relationship between bullying behaviours in childhood and physician-diagnosed internalizing disorders. *Can J Public Health*, 110:497–505.
23. Health Canada; PROPEL Centre for Population Health Impact (2020). 2018-2019 Canadian Student, Tobacco, Alcohol and Drugs Survey.
24. Afifi TO, et al (2014). Child abuse and mental disorders in Canada. *CMAJ*, 186:E324–E332.
25. Statistics Canada (2017). Section 1: Profile of Canadian adults who experienced childhood maltreatment. Available from: <https://www150.statcan.gc.ca/n1/pub/85-002-x/2017001/article/14698/01-eng.htm>. Accessed January 3, 2022.
26. Department of Community Services. (2019). DCS Data Request. Unpublished.
27. Government of Canada (2012). Child Maltreatment in Canada. Available from: <https://www.canada.ca/en/public-health/services/health-promotion/stop-family-violence/prevention-resource-centre/children/child-maltreatment-canada.html>. Accessed June 3, 2021.
28. Public Health Agency of Canada (2008). Canadian Incidence Study of Reported Child Abuse and Neglect. Available from: <https://cwrp.ca/sites/default/files/publications/en/CIS-2008-rprt-eng.pdf>. Accessed October 8, 2021.
29. Nova Scotia Legislature (1990). Children and Family Services Act of Nova Scotia. Available from: <https://nslegislature.ca/sites/default/files/legc/statutes/children%20and%20family%20services.pdf>. Accessed November 10, 2021.
30. Statistics Canada (2021). Table 2.4 Child and youth victims of police-reported family and non-family violence, by gender of victim and province or territory, 2018 to 2019. Available from: <https://www150.statcan.gc.ca/n1/pub/85-002-x/2021001/article/00001/tbl/tbl02.4-eng.htm>. Accessed January 4, 2022.
31. SeaStar Centre (n.d.). About SeaStar Child & Youth Advocacy Centre. Available from: <https://www.seastarcyac.ca/about/>. Accessed October 13, 2021.
32. Hjern A, Vinnerljung B, Brännström (2019). Outcomes in adulthood of adoption after long-term foster care: A sibling study. *Developmental Child Welfare*, 1(1):61-75.
33. Province of Nova Scotia (2018). Children in Care. Available from: https://nslegislature.ca/sites/default/files/pdfs/committees/cs/subm/cs_20180109.pdf. Accessed November 8, 2021.
34. Bell T, Romano E (2017). Permanency and Safety Among Children in Foster Family and Kinship Care: A Scoping Review. *Trauma, Violence, & Abuse*, 18:268–286.
35. Canadian Child Welfare Research Portal (n.d.). Exploring Youth Outcomes After Aging-Out of Care. Available from: <https://cwrp.ca/publications/exploring-youth-outcomes-after-aging-out-care>. Accessed November 8, 2021.
36. Willick F (2021). Free tuition for former kids in care ‘like a dream come true’ | CBC News. Available from: <https://www.cbc.ca/news/canada/nova-scotia/tuition-bursary-former-kids-youth-in-child-welfare-system-1.6179909>. Accessed November 8, 2021.
37. Exner-Cortens D, Eckenrode J, Rothman E (2013). Longitudinal Associations Between Teen Dating Violence Victimization and Adverse Health Outcomes. *Pediatrics*, 131:71–78.
38. Statistics Canada (2020). Trafficking in persons in Canada, 2018. Available from: <https://www150.statcan.gc.ca/n1/pub/85-002-x/2020001/article/00006-eng.htm>. Accessed October 8, 2021.
39. Province of Nova Scotia (2020). Provincial Approach to Address Human Trafficking, Sexual Exploitation. Available from: <https://novascotia.ca/news/release/?id=20200220001>. Accessed November 8, 2021.
40. YWCA Halifax (n.d.). Sexual Exploitation & Trafficking. Available from: <https://www.ywcahalifax.com/advocacy/sexual-exploitation-trafficking/>. Accessed November 8, 2021.