



SPOTLIGHT ON

THE WELL-BEING OF AFRICAN NOVA SCOTIAN CHILDREN AND YOUTH

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“The cumulative impact of anti-Black racism and discrimination faced by African Canadians in the enjoyment of their rights to education, health, housing, and employment, among other economic, social and cultural rights, has had serious consequences for their overall well-being.”

United Nations Working Group of Experts on People of African Descent

WHY WE NEED TO FOCUS OUR ATTENTION ON THIS POPULATION

African Nova Scotians are the largest racially visible group in Nova Scotia making up 2.4 percent of Nova Scotia’s total population.¹

Those born in the province constitute 80.7 percent of the racially visible Black population. The majority of this group are at least three generations Nova Scotian, while 6.7 percent were born in other provinces and territories.¹ Nova Scotia is generally trending toward an aging population. However, African Nova Scotian

communities are comparatively younger, with nearly half of individuals below 25 years of age.²

Unfortunately, there is no existing system to collect race-based data that would holistically reflect the status of well-being for African Nova Scotian children, youth, and their families. Available data suggest that this community is compromised by a lack of access to supports, services, and resources that are culturally relevant.^{2,3} More data are needed, and a commitment to collect these data is vital.



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ACKNOWLEDGING THE PAST

To understand well-being among African Nova Scotian children and their families, acknowledging historical and generational trauma—a direct result of colonialism, segregation, discrimination, and structural and systemic racism—is essential.

The trauma endured by the African Nova Scotian community can be traced back primarily to a period in the province’s history where people of African descent were either enslaved and brought to Nova Scotia through the Atlantic Slave Trade, or migrated to the province as Maroons, Black Loyalists, refugees, planters, and domestic workers.⁴⁻⁷

Today anti-Black racism is systemically embedded within Canadian institutions and underlies long-standing inequalities experienced by people of African descent, including un/underemployment, poverty, racial profiling, law enforcement violence, incarceration, immigration detention, deportation, exploitative migrant labour practices, disproportionate child removal, and low graduation rates.⁸

The story of Africville

In the late 1700s and early 1800s, people of African descent arriving in Nova Scotia in search of freedom or a better life faced discrimination

by white settlers and were forced to live on the least-hospitable land where, nonetheless, vibrant communities were born.⁹ Sadly, this sowed the seeds for ongoing trauma and continued discrimination, including social and structural racism.

The story that illustrates this best is that of Africville, an African Nova Scotian community located on the Bedford Basin, just outside of Halifax. In 1964, this community experienced forced relocation by the City of Halifax which sought to develop industry and infrastructure in the area.

Former residents of Africville, including Irvine Carvery, describe a community that provided a strong place of belonging. Carvery states, “You weren’t isolated at any time living in Africville. You always felt at home; the doors were open. That is one of the most important things that has stayed with me throughout my life.”

Africville provided residents access to the ocean for fishing and swimming, fields for blueberry picking and playing, and a church in the center of their community to unite them. Residents in Africville owned their land and homes and had a strong sense of community. Children had places to play, and families had places to gather and worship.



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Even though the residents of this community thrived and paid city taxes, the municipal government refused to provide many amenities offered to other residents of Halifax such as garbage removal, water, and sewage. The city also built a prison, an infectious diseases hospital, and a dump near the community. The city council of the time approved the forced relocation of the residents of Africville to public housing in Uniacke Square and Mulgrave Park, and Africville was destroyed to make way for infrastructure development.⁹

Research examining the impact of environmental racism has revealed that some rural African Nova Scotian communities have higher rates of cancer, kidney disorders, heart disease, and other conditions as a result of being located in close proximity to garbage dumping sites and other environmental hazards.¹⁰

The Nova Scotia Home for Colored Children

Governments have a legal and ethical obligation to protect all children from violence, abuse, and neglect regardless of the colour of their skin.¹¹ The Nova Scotia Home for Colored Children (later named the Akoma Family Centre) represents another dismal chapter of colonial and systemic racism in Nova Scotia.

In June 1921, the home was created to provide care for children of African descent who were not accepted or allowed in white-care institutions. Although seen as a place of safety for some, many children and youth suffered physical, sexual, and emotional abuse while living at the home. A recent restorative inquiry into the abuses suffered by some residents stressed the importance of educating everyone about this grave period in our history.¹² Both the inquiry members and premier publicly acknowledged the legacy of systemic racism and inequality that persists in Nova Scotia.

INCOME AND EMPLOYMENT

The history of enslavement, displacement, systemic oppression, and trauma inflicted upon communities of African descent continues to impact the well-being of African Nova Scotian communities. Children and families of African descent experience inequalities based on their race, community, income, education, and other social and structural determinants of health. Income is a core determinant of health and well-being for all children and families.

Due to historical anti-Black racism, colonization, sexism, and oppression, some members of African Nova Scotian communities face higher



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rates of poverty than the general population. In fact, 40 percent of Black children in Nova Scotia live in poverty compared to the provincial child poverty rate of 22.2 percent and the national child poverty rate of 17 percent.¹³ In Nova Scotia, census data indicate that 18.5 percent of women and men of African descent experience low income compared to 6.7 percent of the general population.¹⁴

In 2011, the unemployment rate for African Nova Scotians was 14.5 percent, higher than the rest of Nova Scotia (9.9 percent).¹⁴ Much work remains to be done to build a more inclusive

workforce that would lower the unemployment rate for African Nova Scotians to the provincial average. As outlined in a report from the Nova Scotia Commission on Building Our New Economy,¹⁵ increased employment could be achieved through an economic development strategy that focuses on opportunities for African Nova Scotian youth including education, training, apprenticeship, and mentorship. This strategy could also address system barriers; promote and support African Nova Scotians to become entrepreneurs; and focus on improving work environments.¹⁵

PASS THE MIC

“When I know that my children are hurt, it eats at my stomach. I feel my stress internally. When our kids hurt, we hurt. There are days when I went to work with a smile all the while thinking that one more thing might push me over the edge or what might happen to my child. ”

- African Canadian Parent





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EDUCATION

African Nova Scotian children and their families have experienced inequities within the school system for decades.¹⁶ It must not be forgotten that segregated schools existed in the province until the 1960s.¹⁷

The 1994 Black Learners Advisory Committee (BLAC) report identified several gaps for African Nova Scotian learners.¹⁸ Years later, evidence continues to demonstrate a disparity in learning outcomes fuelled by inequity.^{19,20}

A 2016 study assessing the use of individual program plans (IPPs) in Nova Scotia's education system found that while 5.4 percent of students overall are taught on an IPP, this rises to 7.9 percent of students of African descent.²⁰ An IPP is put in place when provincial learning outcomes may not be applicable or achievable, even with adaptations, for students. The student's program planning team develops an individual program plan that changes the prescribed outcomes and/or adds new outcomes for the student.

Students who are placed on an IPP throughout their public education find it challenging to access post-secondary education that could, in turn, increase income, create employment

opportunities, and enhance the work environment and conditions.²⁰

African Nova Scotian students do not feel integrated in a meaningful way in the public education system.¹⁶ They report feeling teachers neither sufficiently understand African Nova Scotian culture nor have relevant training in Black history, race relations, and cross-cultural understanding.^{16,18} As a result, teachers may not appreciate the difficulties and enormous challenges students face in getting an education or offer enough help to overcome the challenges.

PHYSICAL WELL-BEING AND ACCESS TO HEALTH CARE

Research has confirmed that long-term exposure to structural and systemic racism can drastically impact a person's health and increase their risk of type II diabetes, high blood pressure, heart disease, cancer, and other health-related conditions.^{21,22}

Black Canadians (African, Black, Caribbean) are 2.1 times more likely than white Canadians to have diabetes and 1.8 times more likely to experience circulatory diseases.²³ As well, 54.2 percent of white Canadians are moderately active compared to 40.8 percent



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of Black Canadians age 18 years and older.²⁴ In the United States between 2009-2012, the age-adjusted prevalence of hypertension for Black men was 44.9 percent compared to 32.9 percent for white men and 46.1 percent for Black women compared to 30.1 percent for white women.²⁵

Access to healthcare and the cultural safety of that care also contribute to physical well-being for many African Nova Scotians. Most healthcare facilities are in larger cities, whereas several African Nova Scotian communities are in rural areas with limited, restricted, or no access to public transportation. This structural barrier has a particularly challenging impact on families trying to access specialized care for their children, especially those living with disability.

Not only is there limited access to care, but there is a level of mistrust towards healthcare practitioners that is intergenerational and must be corrected to improve health outcomes. Lack of

representation among healthcare providers and a lack of cultural competency further contribute to this problem. A recognition of historical trauma and adverse childhood experiences is key to enhancing quality of care for people of African descent. A trauma-informed approach is critical. This provides an opportunity to develop and build trusting relationships from a patient-centered perspective in a space that allows people to feel safe physically, emotionally, psychologically, and culturally.

ALTERNATE CARE

Children and youth of African descent continue to be over-represented in child-welfare institutions. In March 2016, children of African descent constituted 2.3 percent of children in care and 8.3 percent identified as mixed-race (African Nova Scotian and other).²⁶ It is important to recognize that many of the families and children who engage with public systems may be children and/or grandchildren connected to and oppressed by these systems.



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MOVING FORWARD IN A SPIRIT OF JUSTICE AND REPARATION

In Nova Scotia, we must all work to improve the quality of life and well-being of children and youth who are of African descent. We must see them for everything they are and appreciate the resilience of the community. We must dispel the harmful stereotypes and myths we hear about people of African descent and move to a place of equity.

To do so, many Nova Scotians must acknowledge their privilege and educate themselves on the history and experiences of people of African descent. Government departments and organizations that work with children and youth of African descent must build trusting relationships with the community and acknowledge systemic, structural, and institutional racism that continues to impact the well-being of children and their families.¹² It is paramount that governments begin monitoring the status of well-being for children and youth in African Nova Scotian communities by developing a system for collecting appropriate race-based data that is informed by the communities themselves.



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