



SPOTLIGHT ON

THE WELL-BEING OF CHILDREN AND YOUTH LIVING WITH DISABILITY IN NOVA SCOTIA

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WHY WE NEED TO FOCUS OUR ATTENTION ON THIS POPULATION

There are significant barriers for children and youth living with disability when it comes to participating in activities that support their well-being. Such barriers may be related to a number of factors: individual (e.g., pain), sociocultural (e.g., stigma), environmental (e.g., the built environment), and systemic (e.g., inadequate or inaccessible facilities).¹⁻³ It is important to identify ways to track and evaluate indicators of well-being for all children and youth; identify equity gaps; and optimize participation in activities that promote well-being.

In Canada, approximately four percent of children under 15⁴ and 13 percent of youth ages 15 to 24 live with disability.⁵ In Nova Scotia, information on children under 15 is not available, but 21 percent of those aged 15 to 24 live with disability.⁵ Because a larger proportion of Nova Scotian youth live with disability, there is an even greater need to provide support. The goal is to help them feel respected, secure and safe, that they belong, that they can participate socially, academically and in play, be connected with their environment and feel and be healthy.⁶



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We must identify ways to achieve well-being for children and youth living with disability. That need is immediate.

WHAT WE KNOW

There are very limited data on the well-being of children and youth living with disability. The 2018-2019 *Nova Scotia Student Success Survey* included over 5,600 Nova Scotian children and youth living with learning disabilities and over 1,000 living with physical disabilities.¹⁰ The data from this survey indicate inequities are experienced in four key areas: their sense of belonging; feelings of security and safety; the

ability to participate socially, academically, and in play; and being active and healthy.¹⁰

Among the findings:

- Fewer children (grades 4 to 6) and youth (grades 7 to 12) living with learning or physical disability felt they had friend and teacher supports at school compared with their peers.
- Fewer felt they belonged at school and enjoyed learning.
- Fewer ate lunch at school, and fewer consumed fruits and vegetables.
- Fewer met the recommendations for physical activity.
- More felt unsafe or threatened at school.
- More felt socially excluded and had experienced physical or verbal abuse or threats.
- More missed school due to illness, injury, medical appointments, or not wanting to attend.

DEFINITION

Disability is most commonly defined narrowly as a long-lasting physical, mental, sensory, psychiatric, or intellectual impairment.⁷ The social and cultural models of disability, however, suggest that children and youth are not disabled by their biological impairments but rather by societal barriers that limit opportunities for inclusion, belonging, and a sense of well-being.^{8,9}

Recent evidence suggests that the COVID-19 pandemic and the related public health restrictions have further exacerbated barriers to well-being for children and youth living with disability. For example, many parents felt



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that their child’s ordinary daily activities (e.g., play, therapies) were hazardous during the pandemic.¹¹ In a Canadian study of 151 parents of children and youth living with disability, 17 and 24 percent reported a decline in their child’s physical or mental health, respectively, during the pandemic.¹² Parents also reported that their child’s screen time increased while physical activity decreased.¹² As well, there was reduced physiotherapy time and challenges with virtual delivery of therapy and other services, in addition to more unoccupied and unprogrammed time.¹³

These findings highlight continued disparities. We must find ways to address inequitable access to programs, services, and spaces that support well-being. Data collection efforts can support our understanding of how children and youth living with disability are achieving well-being and mitigate the adverse effects of the pandemic. Opportunities can, and must, be created to support these children and youth so they can achieve optimal well-being.⁶

PASS THE MIC

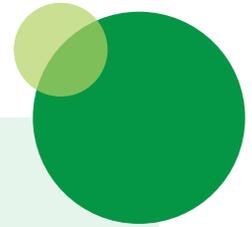
“Our son Eli was born at the IWK and lives with cerebral palsy. As his parents, our goal for Eli is that he is given the opportunity to reach his fullest potential while living a happy life. All children living with disability should have equal access to supports, programs, and services that optimize their unique needs and well-being.”

- Meredith & George Tasiopoulos, Parents of Eli (age 7)





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MAKING THINGS BETTER

While this spotlight highlights Canadian and Nova Scotian data on indicators of well-being among children and youth living with disability, much remains unknown, and there is considerable work to be done to reduce equity gaps. There is a need to:

1. **Collect provincial- and national-level data on the indicators of childhood well-being, particularly data that relates to children and youth who may experience marginalization, including those who live with disability.**
2. **Engage children and youth living with disability and their families in this work, to recognize that they have existing goals, resources, and competencies, and can contribute to their well-being.**
3. **Understand that there are children and youth with disability who are further disadvantaged. There is a need to recognize how disability, race, gender, sexuality, and socioeconomic status intersect.**
4. **Consider disparities exacerbated by the COVID-19 pandemic and recognize that the pathway to well-being may look different for children and youth with disability as we address this global health crisis.**
5. **Improve accessibility and inclusion in programs, services, and spaces that promote well-being, and understand the societal barriers that limit inclusion, belonging, and well-being.**

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