

Will bad times ever end for world's poorest children?

Canada's representative to the May UN General Assembly Special Session on Children is already cautioning Canadians not to expect too much from it. Given shifts in spending priorities and attitudes after the Sept. 11 attacks on the US, people have to be realistic about what can actually be achieved to improve children's health, says Senator Landon Pearson. "It's still worth trying," she added, "and if we didn't things would be much worse."

The goals set during a similar special session in 1990 never were met. Each year 3 million children die due to environmental hazards and another 11 million die year from preventable problems such as pneumonia, dehydration and measles. In addition, one-third of children are malnourished or undernourished, a problem that contributes to 60% of all childhood deaths.

This special session will set new goals

through a document, *A World Fit for Children* (see page 1155). However, Pearson says problems such as childhood poverty will get increasingly difficult to solve over the next 20 years as the world population surges and spending priorities shift. Still, says Pearson, the document represents the world's conscience.

But some children's advocates take the document's commitments more literally and are lobbying for a renewed commitment backed by money and leadership. "The last 10 years have been really hard on children," says Sandy Griffin, president of the Canadian Coalition for the Rights of Children, which has standing at next month's special session. Griffin says the key issue will be to convince the US to ratify the Convention on the Rights of the Child, which guarantees rights to good health care and a decent standard of living.

The World Health Organization (WHO) and UNICEF say the past "decade of underachievement" is primarily due to poverty. WHO is urging the West to increase its investment in child and adolescent health care in the developing world, where some 600 million children live on less than US\$1 a day.

Progress made in the last decade is primarily due to leadership, says UNICEF Executive Director Carol Bellamy. Malawi, for example, has guaranteed universal free primary education, while Venezuela has abolished fees at hospitals and health centres and ended enrolment fees for primary education. Some multinational initiatives have also been successful: 3 million fewer children now die each year due to better control of diarrheal diseases, and 90 million newborns are now protected by iodized salt. — *Barbara Sibbald, CMAJ*

PULSE

The doctor isn't in (2)

In the last issue of *CMAJ*, Pulse reported that 1.5 million Canadians had unmet health care needs in 1998/99 (*CMAJ* 2002;166[8]:1078). Now, preliminary data from the most recent Statistics Canada Canadian Community

Health Survey indicate that the proportion of Canadians aged 12 or older who experienced unmet health care needs in 2000/01 has almost doubled since 1998/99, rising to 12.5% from 6.3%.

In 2000/01, females were more

likely to report unmet needs than males (14% compared with 10.9%). Older Canadians (65 or older) were less likely to report them (8.1%) than those aged 12 to 34 and 35 to 64 (13.2%).

Treatment of physical problems was the most common type of unmet need in 2000/01 (71%), followed by care required due to an injury (10.2%) and treatment of emotional or mental problems (8.9%). These proportions are very similar to those from 1998/99.

Among those reporting unmet needs in 2000/01, 30.4% cited long waiting times as the reason, up from 22.9% in 1998/99. The proportion of needs unmet because the service is not available was unchanged (14.7% in 1998/99 and 14.3% in 2000/01), while reports of unmet needs due to certain personal circumstances (didn't bother, too busy, cost) decreased between 1998/99 and 2000/01. — *Shelley Martin, Senior Analyst, Research, Policy and Planning Directorate, CMAJ*

