

A Case for the Implementation of Community Social Paediatrics in New Brunswick

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Abstract

INTRODUCTION: Community Social Pediatric (CSP) models highlight the importance of both psychosocial and physical components in child development and health. This includes the social determinants of health (e.g., poverty), places in the centre, and the voice of the child.¹ This model unites the expertise of family, medicine, law and social sciences to identify and act effectively to reduce or eliminate the toxic stresses that affect the development of marginalized children.

OBJECTIVE: This review examined the outcomes of current CSP programs in other cities to make a case for its potential success in New Brunswick (NB).

METHODS: A thorough literature scan was conducted to investigate the outcomes of CSP programs. Both quantitative and qualitative studies were reviewed.

RESULTS: Multiple studies have outlined positive CSP outcomes. A Vancouver CSP program showed better outcomes through its ability to grant at-risk youth access to both health care and other social services². Factors impeding child development (i.e., poverty, lack of support services, and family discord) may be mediated by CSP practitioners encouraging optimal development (i.e., emotional well-being, early reading, appropriate discipline, and preschool participation)³. Quebec's Centers for Social Pediatrics indicate a positive impact on school dropout, mental health disorders, suicide, addiction and chronic diseases. These interventions with children and families improve the socio-emotional development of children, the parent-child relationship and the parents' feeling of social support. This model can positively mitigate the effects of childhood trauma and toxic stress.

CONCLUSIONS: Based on the success of CSP programs throughout Canada, we feel that CSP would be beneficial in the Saint John, NB area, and eventually province-wide. Previous research in this region has indicated that 51% of children receiving pediatrician referrals related to behaviour, attention and academic issues come from Saint John's two lowest income neighbourhoods⁵. New Brunswick Social Pediatrics (NBSP) is seeking to build a model of integrated, community-centered social medicine for children in vulnerable situations. NBSP focuses on the strengths of the child, the family and the community.

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