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Chair

Mr. Dean Allison

Standing Committee on Foreign Affairs and International Development

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• (1530)

[English]

The Chair (Mr. Dean Allison (Niagara West—Glanbrook, CPC)): Pursuant to Standing Order 108(2) we will continue our study on the protection of children and youth in developing countries.

The reason I want to get started on time is that we have one more witness who will be hooked up momentarily for video conference. We do have some votes that are going to be coming up, so I want to get the witnesses on record and then maybe one quick round before we go for votes. Then we can come back again to have another round.

We will start with Dr. Singer, who is the chief executive officer of Grand Challenges Canada.

Then we'll move to Save the Children Canada with Patricia Erb, who is the president and chief executive officer. She will join us via video conference from Toronto along with Will Postma, vice-president of global partnerships.

Hopefully, by the time we've started with our testimony, our third witness will get hooked back into video conference.

Dr. Singer, the floor is yours and you have 10 minutes for your opening testimony.

Dr. Peter Singer (Chief Executive Officer, Grand Challenges Canada): Thank you very much. I really appreciate the opportunity to be here.

I really want to make one simple point here today. Canada's approach to child protection should begin by protecting children's brains in the first thousand days of life, starting from just before conception through to two or three years of age. That's really the fundamental point that I want to make.

Let me start by asking a counterfactual question. If your goal was to make sure that poor countries stayed poor, how would you do that?

One of the best ways would be to fail to protect the growing brains of children in the first thousand days of life, as I say, beginning just before conception through to two or three years of age. During that time, new evidence is showing that the brain is growing very rapidly with up to 1,000 new neural connections being formed each second. If children's rapidly growing young brains are not protected during this critical time, the consequences can really last a lifetime.

For example, a study from Guatemala showed that children who received a more balanced nutritional supplement prior to three years of age earn 46% more as adults. A study from Jamaica showed that children who received stimulation in those early years had lower rates, by two-thirds, of violent crime when they were teenagers. A study from Romania showed that children raised in orphanages had more than double the rate of psychiatric disorders than children without such a history.

Globally it's estimated that at least 200 million children fail to reach their full potential because of lack of attention to the early years.

What are the risks that affect children's brains in the early years? You can really think about them as falling into three categories. The first is biological, and that would include nutrition, lack of immunization, exposure to toxins, and also pre-term or premature birth. Second is enrichment and stimulation, which would include lack of responsive parenting with babies. Examples of responsive parenting are reading to children, singing, playing, and also maternal depression can lead to a lack of responsive parenting. Finally, conflict, maltreatment, and violence is another big category.

Often one sees an interplay among these risks especially in conflict zones. A young child's rapidly growing brain in utero—we're also talking here about the protection of pregnant women—and in the early years, needs to be protected from all these risks and from the toxic stress they bring to child development.

I've come to believe that this challenge of child development is actually one of the grandest challenges in international development. At Grand Challenges Canada we've launched an initiative to tackle the challenge of child development and that initiative is called "saving brains".

Grand Challenges Canada is funded by the Government of Canada. It's dedicated to supporting bold ideas with big impact, so innovations in global health. We leverage additional resources from the not-for-profit, for-profit, and academic sectors to match greater than one-to-one the government funds.

We support innovators in low- and middle-income countries, and also in Canada. The bold ideas can be science and technology. They can be social innovations. They can be business innovations. We love to see these come together and integrate because we think that's important for sustainability and scale.

Zeroing down on the saving brains challenge, the challenge here is really to develop sustainable ways to promote and nurture healthy child and brain development in the first thousand days and to scale solutions so they can have a lasting impact on human capital in low resource settings.

Our vision is for you to actually imagine an exit strategy from poverty, a generation of children who become healthy, productive, and participating members of society. Saving brains has the potential to improve health education, increase income, and decrease violence.

The saving brains initiative is the largest and most diverse portfolio of innovations for early child development aimed at the developing world. We support 44 projects totalling \$28 million.

Let me just give you a few concrete examples. One is kangaroo mother care. An estimated 15 million babies are born too soon or premature every year. That's more than one in 10 babies. Around a million children die due to complications of pre-term birth, but many survivors face a lifetime of disability including learning disabilities, visual and hearing problems. About 90% of these pre-term births occur in the developing world.

Kangaroo mother care is simple, a baby is held close to the mother for a period of time after birth. It's a simple innovation. It provides nutrition, warmth, and bonding. We know that it saves lives and that it's superior also to incubator care for brain development.

We have supported innovators in Colombia and their collaborators in Quebec to look at the long-term impact of kangaroo mother care on children's cognitive development through to adulthood, including school achievement, post-secondary education, and entry into the workforce.

One of the more exciting early results has been that kangaroo care can actually inhibit much of the delay in brain development that typically is experienced by premature babies. Evidence suggests that it can also enable them to develop motor function comparable to their full-term counterparts.

The second example I'd like to give you is an intervention to enhance the mother-infant relationship. This is in South Africa, where we support the University of Stellenbosch in examining the long-term impact of improved mother-baby relationships on cognitive functioning, social functioning, and emotional functioning. The original study showed how the coaching of mothers improved the relationships in an impoverished settlement outside Cape Town. In the follow-up study that we're supporting, the kids are now 13 years old. The study is measuring cognitive development, school attainment, and emotional and behavioural functioning.

The third example I want to give you is from Pakistan, where there's an intervention that combines early nutrition with stimulation in a disadvantaged population in rural Pakistan. In this case, we know that 88 million young children worldwide drop out before completing primary school education. At Aga Khan University, working with colleagues at Stanford and Harvard, they have combined an early childhood stimulation and nutrition package. They're now measuring how these early infant and toddler interventions affect school readiness and enrolment at four years of age to see if this helps regulate their behaviour and attention so that the children succeed when they begin school.

Let me emphasize that we're not primarily talking about IQ here. We're talking about the ability of the child later to regulate themselves—the soft skills that lead to success in business, the regulation that leads to the avoidance of criminality, and of course cutting down on depression and non-communicable disease.

How does this fit into our more general approach in international development? Well, last week I had the honour to attend the high-level summit on maternal, neonatal, and child health convened by the Prime Minister and attended by global leaders. One clear message that came out of the summit was this. The same simple innovations in maternal health, in newborn care—I gave you the example of kangaroo care—in nutrition—I gave you the example of the nutrition program in Pakistan—and in immunization that save lives also save brains and help children reach their full potential. This is the double dividend of Canada's commitment to maternal, newborn, and child health.

Let me give you a couple of concrete examples of what I'm talking about. In our saving lives at birth portfolio, which we do with partners USAID, Gates foundation, Norway, and UK aid, we have a project that's distributing chlorhexidine in an innovative way. Chlorhexidine is a common component of mouthwash. It's being distributed through lady health workers to pregnant mothers in Nepal.

Here is the actual tube from Nepal that's being distributed. This little tube costs about 20¢ per tube. It deals with one of the main causes of newborn death—I'm sure my friend Patricia Erb, from Save the Children, will talk about their focus on newborns—which is infection that enters through the baby's umbilical cord. This is almost like a Polysporin that you put on the umbilical cord.

The point I want to make is that the focus on this simple, inexpensive newborn intervention—by the way, for every 200 of these tubes that you distribute, it's estimated that you save one newborn life—not only saves lives but likely also saves brains.

Let me give you a second example. The second example is from Cambodia. It's this fish. You might have seen this fish around in the newspapers in the last couple of weeks.

A young graduate student from the University of Guelph went to Cambodia and noticed the problem of iron deficiency anemia. This is a problem that affects two billion to three billion people in the world and causes billions of dollars of lost income. Children are listless. Women go into pregnancy with lower blood counts, so if they do hemorrhage around the time of birth, they're more likely to die.

• (1535)

We noticed the problem of iron deficiency anemia, and we wanted to do something about it. A young Canadian graduate student—the supervisor, by the way, was the president of the University of Guelph—started by putting an iron ingot into the cooking pots, but nobody wanted to use it because it was so ugly. He went back into Cambodian folklore, found a legend of this little fish, a lucky fish with a little smile on it, and manufactured these things in the form of the fish. Each one costs \$5 and lasts five years, and now this is the Cambodian equivalent of selling like hot cakes.

They have a social enterprise that they've started in Cambodia. Grand Challenges Canada supports them in part with a grant, but part of that is actually a loan, so it's bringing a type of business discipline to their social enterprise as well as tackling the problem of iron deficiency anemia. Again, this is an intervention that not only saves lives, but also saves brains. There's a double dividend here in terms of the life-saving potential of Canada's approach to maternal, neonatal, and child health.

In summary, I fully see the types of interventions you're looking at here: early forced marriage, human trafficking, the protection of children, and so on. These are extremely important areas. However, what I want to focus on in this presentation, to complement the other things you'll be hearing, is that what makes the most sense is to start a focus on child protection by protecting the brain in early childhood. It is where the child is the most vulnerable, where the return on investment will be the highest, and it enables all of those other investments. For example, if you're more ready to go to school, you're less likely to drop out of school and you'll do better in school.

I'm arguing that Canada's approach to child protection should start just before the time of conception, with adolescent girls, and follow through to protecting the child's brain in utero, protecting pregnant women, and protecting that child's brain in the first few years of life. There's emerging evidence that this is a critical moment to intervene. It's the same issue in conflict situations, where conflict, nutrition, stress, etc., all come together, essentially to create a lost generation during this critical period. This is the time that the brain is most vulnerable. This is the time that protecting it can have the greatest impact, and it is the best time to intervene so that children can reach their full potential.

I'd be glad later in the questions, or on another occasion, to talk about some of the other innovations we have, in terms of teenage girls and how we're protecting them, mental health issues, and so on.

I wanted to provide one focused message because I thought this was one thing you might not hear in such a focused way from others. The saving brains initiative, again, supported by the Government of Canada, is a flagship initiative internationally. It's now recognized internationally, with Canada as the leader. The point I want to make is that it doesn't defocus us, because the very same approaches we're taking in women's and children's health, save lives, save brains, and provide this double dividend.

Thank you very much. I look forward to the other presentations and to the discussion period.

• (1540)

The Chair: Thank you very much, Dr. Singer.

We're now going to turn to our first video conference, Save the Children, with Patricia Erb.

Why don't we turn it over to you, and then we'll move over to the next video presentation after that.

Ms. Patricia Erb (President and Chief Executive Officer, Save the Children Canada): Thank you.

We're honoured to appear today before the Standing Committee on Foreign Affairs and International Development to talk about the study on the protection of children and youth in developing countries.

Save the Children is the world's leading independent organization for children, working in 120 countries. We build our expertise through our work around the world, in partnership with local organizations and with government.

Save the Children believes that child protection is vital to ensuring the equal rights of girls and boys. The simple fact is that if children are exploited, abused, or neglected, it's unlikely they will be healthy, educated, or empowered. Child protection is, therefore, a minimum requirement to meeting our political and ethical responsibilities to girls and boys. But protection should not be an end in itself. Our goal should be to enable children to become healthy, educated, and empowered citizens, engaged politically, socially, and economically, and actors and young leaders.

To achieve this goal, we understand that protection should integrate the three following critical approaches: one, investing in the participation of children and understanding how the potential of each child can be leveraged and maximized; two, investing in the protection and prevention of violence, focusing on the root causes that lead to exploitation, abuse, and neglect of children; and three, integrating our response into a systems approach to child protection.

Underpinning these approaches.... It is clear that an understanding of gender inequality and opportunities is necessary. We recognize that boys and girls face different child protection risks and challenges. As well, we can only ensure no harm comes to children by addressing gender discrimination explicitly while promoting and enabling gender equality. We can end discrimination, and we can advance our vision of a world where every child attains his or her equal right to survival, protection, development, and participation.

• (1545)

Mr. Will Postma (Vice President of Global Partnerships, Save the Children Canada): Save the Children's vision of protection is a fulfillment of every child's equal right to be safe from harm, violence, abuse, exploitation, and neglect, allowing them to survive and thrive as well as have opportunities to learn, participate, play, and develop into empowered citizens.

This means we take into consideration both the vulnerabilities experienced by boys and girls to the abuse, the neglect, the exploitation they might face, and their tremendous potential, and that of their families and communities, through meaningful participation and the building of resilience.

In order to help every child achieve his full potential, Save the Children believes it is critical to give proper weight to child participation. This means listening to the voices of girls and boys and facilitating spaces where they can seek information, build their own understanding, and meaningfully take part in decisions that affect their lives.

Children's participation is a right, protected by the UN Convention on the Rights of the Child, signed also by the Government of Canada. But it's also a very powerful means to achieve the protection of girls and boys and to support them and build their resilience. For example, Save The Children's response to child trafficking in West Africa offers an approach of the strength of listening to children and implementing a systems and prevention approach. This is a program supported by the Government of Canada over many years.

For years the migration of boys and girls in West Africa was understood as trafficking, ignoring that one of the main drivers for these migrations was the decision of children themselves to leave the home. Their reasons for wanting to leave vary, including not having opportunities in their home village, being abused by their own families, or looking for an adventure in a culture that values migration as an experience for personal growth and development.

The change of perspective from trafficking to children who are on the move is an achievement from working with the national and regional movement of working children and youth. Today the African Movement of Working Children and Youth is still critical. It's a critical partner that implements activities to secure a safe path for girls and boys on the move.

Engaging children in meaningful participation allows us to understand more accurately the root causes of the violence they face, to build on their own strengths, and to respond to violence, taking into consideration the different challenges of boys and girls and the nuances of their social, economic, and cultural context.

We at Save the Children call on the Government of Canada to ensure that meaningful participation of girls and boys is integrated into its work on child protection and that programs are planned and executed in partnership with civil society organizations that are best placed to encourage this participation. Child protection programs should include sufficient time and funds to ensure that participation is meaningful.

Ms. Patricia Erb: We also call on the Government of Canada to ensure that its leadership on child protection takes a holistic approach that addresses the root causes of violence against children and engages whole communities in working to end the violence in a sustainable way.

We also call on the Government of Canada to adopt an integrated systems approach to child protection that recognizes the critical importance of partnerships with girls and boys, families, communities, the private sector, local organizations, and local and national

governments in identifying and addressing the root causes of violence.

Mr. Will Postma: We recognize at Save the Children that the Government of Canada has long been a leader in the area of children's rights, child protection, and child participation. We welcome the government's renewed engagement on this issue, as demonstrated by the recent creation of both a dedicated child protection unit, and a dedicated prevention of child, early, and forced marriage unit.

Save the Children Canada has led in the formation of an international child protection network across Canada, a coalition of Canadian NGOs that formed in January 2013 to share knowledge and experience on child protection programming and to engage the government and the public on this critical issue.

We recommend that Canada maintain its global leadership on the issue of early and forced child marriage at the United Nations, and that Canada establish dedicated long-term funding that addresses the root cause of early and forced child marriage through education, gender equality, and child protection. By doing so the Government of Canada will continue to reinforce global efforts to improve maternal, newborn, and child health.

Canada's leadership on this issue, which was ably demonstrated at last week's summit on Saving Every Woman Every Child, can be further strengthened by incorporating child protection and gender equality principles. In all of Canada's international development work it's important to ensure that children are being protected from violence. We encourage a compliance with child safeguarding standards to help create a culture where violence against children is not tolerated and is acted against accordingly.

We recommend that the Government of Canada adopts and implements best practices and child safeguarding standards and sees that they are consistently applied to all DFATD officials, contractors, volunteers, and funding partners.

Globally, tens of millions of children are affected by conflict every year. Children affected by conflicts and disasters experience devastating impact on their social and emotional well-being and physical security, especially girls; and children subjected to violence are also more likely to perpetuate violence as adults.

Child protection, unfortunately, is one of the lowest-funded sectors in humanitarian response, second only to education in emergencies. We call on the Government of Canada to ensure that adequate funding is available for the protection of children in emergency responses and to strengthen the capacities of its staff and partners to implement the minimum standards on child protection.

Finally, economic development has the potential to provide long-term benefits and improve the standard of living in impoverished communities. The benefits don't always reach families or children living in poverty, and without attention to children's rights and protection, business operations can also have unintended negative consequences, including an increase in the worst forms of child labour: unsafe working conditions, violence, and sexual exploitation.

The Children's Rights and Business Principles was launched in 2012 by Save the Children, with UNICEF and the UN Global Compact, in a response to a call from the UN for companies in the private sector to better address the rights of children. They are intended to guide and encourage businesses to respect and support children's rights as part of their activities in the workplace, marketplace, and community.

Through its engagement with the private sector, the Government of Canada should work to see that all partners adhere to the Children's Rights and Business Principles.

• (1550)

Ms. Patricia Erb: To conclude, we are grateful to the Government of Canada for its continued interest and support to make this world a better place for children. To better protect children, we encourage you to ensure that children can participate in decisions that affect their lives, that the root causes of violence are taken into account to prevent violence before it happens, and that we work collectively—government, civil society, and children—through a systems approach to respond to violence wherever it happens.

Children have a right to live in a safe environment, to thrive, to be loved, and only like this will they turn into healthy, educated, empowered citizens who will bring peace and prosperity to the world.

We thank you for your attention, and we're happy to answer your questions.

The Chair: Thank you very much, Ms. Erb and Mr. Postma.

I believe there are going to be bells shortly, but I want to have unanimous consent, Mr. Garneau, Mr. Dewar, and Mr. Anderson, that we could hear the presentation. The next one will be all the way through, all right?

Some hon. members: Agreed.

The Chair: So that's all right. If the bells are late, then we'll start with a round of questioning. We'll see what we can do, but I'll come back to the committee just to double-check.

Joining us by video conference from Washington, D.C., from the Restavek Freedom Foundation, we have Christine Buchholz, who's the vice-president.

Welcome.

I'm going to turn the floor over to you for your 10-minute opening remarks.

Ms. Christine Buchholz (Vice President, Restavek Freedom Foundation): Thank you so much, Mr. Chairman and members of the Standing Committee on Foreign Affairs and International Development.

I am humbled to have this opportunity to speak to you on behalf of the Restavek Freedom Foundation. Our mission is simple. It's to bring an end to the system of "restavek", which is the French term "to stay with" and is commonly used as the word for child slave in Haiti.

In my opinion, Haiti is one of the most beautiful places in the world. It has gorgeous beaches, no different from other Caribbean islands, yet Haiti is one of the most troubled places in the world. You may have images, as I do, of what most of us saw after the 2010 earthquake that devastated Port-au-Prince, such as tent communities and slums like Cité Soleil, a microcosm of all the ills of Haitian society: endemic unemployment, illiteracy, non-existent public services, rampant crime, and armed violence.

Where in all of Haiti one in 10 children may be in restavek, according to a study conducted by the Pan American Development Foundation, in 2009, 44% of the children in Cité Soleil are considered restavek. In the 2013, the Walk Free Foundation's global slavery index ranked Haiti number two in terms of the highest prevalence of modern-day slavery in the world.

In a country where 80% of its population lives in poverty, it's not hard to explain how a child enters into restavek. A child born into a rural community may have 8 or 10 siblings. Parents think that their child might have a better chance of being fed and going to school living with another family, so they might send their child away from a rural town like Port-Salut to a less poor family in Port-au-Prince.

But the urban family has problems of their own. The woman of the house struggles with the demands of cooking and cleaning and raising her children with very little support. Without running water and electricity, the daily tasks of washing one's clothes, going to market, going to the well, and cooking are time-consuming and physically taxing. So an arrangement is made and a child is brought from the rural area into an urban area and put to work, often physically beaten and verbally abused, rarely allowed to attend school, and becomes a child of restavek.

Slavery has been a part of the fabric of Haiti in its history and its culture since it became a French colony in 1697. In 1804, under the leadership of Toussaint Louverture, the slaves overthrew the colonists. Plantations were burned, slaves were freed, the colonists were expelled, and a new nation was formed. Haiti is the only country in the world to be formed by a slaves' rebellion, a source of great national pride; however, as the slaves earned their freedom, they faced many challenges. Struggles for power through coups, occupations, and infighting plagued Haiti.

So, despite its gorgeous landscape and beautiful people, today Haiti's poverty and lack of infrastructure and services have left many families in need of cheap or free labour. Even though Haiti was founded on the abolition of one kind of slavery, another form persists, restavek.

There have been some efforts to protect children. For example, in 1985, the Government of Haiti passed child labour laws and said children younger than 12 cannot be employed as domestic workers; employers shall provide them with decent accommodations, clothing, a healthy diet, recreational time, and register them in conventional schools. Like Canada, Haiti also signed onto the UN General Assembly's Convention on the Rights of the Child. Haiti ratified it in 1994. Of course, there are some 52 articles covering children's civil, social, and cultural rights. For example, children have the right not to be separated from their parents, the right to free primary education, and the right to protection from all forms of exploitation and abuse.

I want to tell you about one of the girls in our program named Nadia. She was in our child advocacy program, and in the fall of 2011 we learned that she had returned to her home village from Port-au-Prince. When our child advocates followed up with her, they learned that she had died soon after telling her parents what had happened to her, so our child advocates went to her home village.

In the eight years since we formed Restavek Freedom Foundation, this is one of our most tragic stories. Nadia was not only in restavek, but she was raped while living with her host family. The perpetrator and her host mother tried to force an abortion. She was physically beaten and bled to death. When she began to bleed, they promptly put her on a bus to her home village. She rode an additional two hours on a motorcycle to find her family, and was in their care for one day before she died. When our child advocates found her family, they were devastated, but they never considered reporting the incident. They didn't know who cared and who could do anything about it.

● (1555)

We worked with the family, with the help of lawyers, to press charges. In a completely unprecedented manner, the perpetrator was actually arrested. We had such hope that the tide might be turning in Haiti, but then the court case got botched and the perpetrator was set free.

We believe that there is so much wrong with this story: the poverty that caused Nadia's family to give her away; the abuse and rape while she was in restavek; the injustice that this perpetrator went free; and ultimately the untimely loss of a young girl's life. It broke all our hearts, yet, though there are laws in place, no rule of law regarding child labour or rape was enforced in her case.

I understand that Canada has progressive human trafficking legislation that addresses not only prevention, protection, and prosecution, but also partnership. Obviously, non-governmental organizations like ours would love to have the Canadian government partner with us to bring an end to child slavery in Haiti.

As a non-governmental actor working on behalf of children in restavek, we have a front row seat to see the beautiful things that are happening there. Restavek Freedom has over 700 children in our care through our child advocacy program. These are children who are in restavek and who, without our intervention, would not have had the opportunity to go to school, yet 72% of them are passing their national grade level exams.

We see attitudes towards restavek changing in Haiti. In 2001, *Time Magazine* quoted President Aristide, who expressed support for addressing the restavek issue and said that "this first requires an intense education policy, because it is so ingrained in Haiti that too many people don't even know they are breaking the law." Today we have several programs that are working towards changing this attitude.

We've been airing a serial radio drama using the Sabido methodology of education entertainment to address restavek child protection and family planning. Thus far, we have a listenership of one million Haitians.

We have been running the Songs for Freedom music competition, engaging youth across the country to write original songs of freedom about restavek and perform them in regional competitions. These regional finalists have been speaking out on radio and television and have become ambassadors for our work. To date, over 20,000 Haitians have attended our regional competitions, and we have our national finals scheduled for August of 2014.

In partnership with the U.S. Department of State, we have hosted a series of Compassion and Courage conferences addressing the restavek issue and child protection with community leaders—largely religious leaders—reaching over 3,000 Haitian leaders.

We would love for the Canadian government to partner with us to continue to shift these attitudes and bring an end to child slavery in Haiti. We would love the Government of Canada to partner with us to encourage Haitian leaders.

Just last week, the Minister of Social Affairs and Labor, in collaboration with UNICEF, the ILO, and 29 national and international organizations, including the Restavek Freedom Foundation, launched a new study focused on children in restavek. The minister said that "it was necessary to collect accurate data on the number and situation of child domestic workers, with a view to provide sustainable solutions." We are thrilled about this opportunity and would love to have support to continue these efforts.

Finally, we'd love the Canadian government to partner with us to pressure Haitian leaders. Being number two in the world in terms of the highest prevalence of modern-day slavery is an unenviable position. We'd specifically like pressure on the Haitian government to adopt comprehensive legislation on human trafficking and to enforce legislation.

According to the U.S. Department of State "Trafficking In Persons Report" from 2013, Haiti used its laws against rape, prostitution, and other offences to pursue investigations against traffickers and those who exploit victims. However, there were no reports that these investigations led to any convictions. Additionally, the Brigade for the Protection of Minors recorded 94 cases of child trafficking and arrested and transferred 15 adults to state prosecutors, but none of these led to the prosecution stage.

We at Restavek Freedom believe that child slavery can be ended in Haiti in our lifetime. Though there is still much work to be done, there are many glimmers of hope, and we hope that we have an opportunity to partner with the Canadian government so that we don't have to tell Nadia's story any longer.

We thank you so much for this opportunity to provide a lens into the lives of the most vulnerable children in Haiti.

• (1600)

The Chair: Thank you very much, Ms. Buchholz. We appreciate that.

We have about 15 minutes left before the votes. I'm going to suspend the meeting, if it's okay with my guests here, my witnesses. We'll be back as quick as we can. As soon as we have quorum, we'll start with our first questioner, Madame Laverdière, and if it's okay, we'll go right to 5:30 for questioning. We'll take care of committee business on Wednesday.

Mr. Garneau, is that okay?

• (1605)

Mr. Marc Garneau (Westmount—Ville-Marie, Lib.): That's fine.

The Chair: Mr. Dewar?

Mr. Paul Dewar (Ottawa Centre, NDP): That's fine.

The Chair: With that, the meeting is suspended.

• (1605)

_____ (Pause) _____

• (1645)

The Chair: Welcome back.

We have Madame Laverdière here, so we'll get started. We also have Mr. Garneau.

Madame Laverdière, you have seven minutes.

[Translation]

Ms. Hélène Laverdière (Laurier—Sainte-Marie, NDP): Thank you very much, Mr. Chair.

I would like to thank all of the witnesses for their very interesting comments and statements. Because we may have a shortened question period, I will be brief.

First of all, I would like to say to Mr. Singer that we share the goal of protecting children's brains.

[English]

It's not only surviving but thriving, as we agree.

[Translation]

I was very interested by your comments. You said that could help reduce violence. I think that our friends from Save the Children Canada also said that we should tackle the root causes of problems.

You mentioned that children that have been better fed and better treated were more likely to go to primary school, secondary school and even university.

[English]

It's a two-way street.

[Translation]

Often, there are no educational resources.

Would you agree that the next essential step would be to help countries have a functional and adequate educational system?

[English]

The Chair: Dr. Singer.

Dr. Peter Singer: Thank you very much for your question, Madame Laverdière.

Obviously, there's a continuum of things that starts with maternal neonatal survival, that goes through to early child development, that goes to education. It should be seen as a continuum.

It is fair to say that different countries might pick different areas on that continuum. But to the point of my presentation, I want to emphasize that when educationalists start to get into this, they move earlier and earlier to the issue of school readiness.

If you don't pay attention to the survive and thrive in the early years, the first thousand days, you're essentially going up the down escalator, even in school. You'll have more behavioural problems. You'll have more difficulty learning, so you really need to lay the fundamentals in the maternal neonatal child health space.

Many of the same interventions, the simple innovations that lead to survival, also lead to thrival. Yes, for sure, children need all those things to thrive. But the one that maybe we need to pay a little bit more attention to is the first thousand days. It's very gratifying actually, the focus on maternal neonatal child health because many of those same innovations, as I say, that save lives also save brains.

• (1650)

[Translation]

Ms. Hélène Laverdière: Thank you very much.

I will now turn to the representatives from Save the Children Canada.

Thank you for your presentation.

You spoke at length about your approach to child protection and about a system involving the community. I imagine that organizations that are more focused on children should play an important role.

I would like you to comment on that subject.

[English]

Ms. Patricia Erb: Yes, it was brief because of the short time. In a systemic approach, we understand protection work in four pillars.

On the one side we have to have the systems that are established in government through policies. You have a regulatory mode that helps to protect children. You create regulations and laws to ensure that certain things will happen and that certain things won't happen. That's one pillar.

The second pillar includes the services and systems that have to also exist within a country. This is with government heavily involved, and NGOs are also involved in those processes. The services can go from health and education to the protection services that are needed. Those also have to be set up.

A third pillar is working with the children themselves because they're a barrier against abuse. If they're strong, there are many things that can't happen. You have to have that piece.

Then, of course, the communal strengthening, so that families and religious authorities, depending on the issue that you're working on, are also involved with protection.

These four pillars are essential. You cannot get a good system that is sustainable without any of those pieces. Each of them take a lot of work. Sometimes you have different agencies working on different pillars or sometimes you have some that do the full work.

We're involved in all these pieces.

[Translation]

Ms. H  l  ne Laverdi  re: Thank you very much.

I know that you are doing a lot of work on issues of psychosocial development and that you are studying the question of play and education. Could you tell us briefly about your work in this area?

[English]

Ms. Patricia Erb: In connection to the question you posed to Pete, education is also within the services, and it's almost a preferred place where protection takes place. The school needs to be that safe environment. When conflict arises, there's a lot of use of school to bring normalcy back to children. The same is true in emergencies as well as in other abuse situations.

Education is one of the services most used for protection. The earlier you get that functioning, as Peter said, the more useful it is. Establishing systems that work from early on is very important.

Therefore, we spend a lot of time on training educators. Education is not just about learning certain skills but is also about those moments of play. We create a lot of child-friendly spaces, let's say, in emergency situations or in camps. Right now in Syria those are extremely important moments where protection can be achieved through education and play.

• (1655)

The Chair: Thank you very much. That's all the time we have for the first round.

We're going to move over to Ms. Brown, for seven minutes, please.

Ms. Lois Brown (Newmarket—Aurora, CPC): Thank you very much, Mr. Chair.

It's very good to have you here with us, Dr. Singer. We spoke last week at the MNCH conference.

Patricia, I also had a great chance to chat with you there, and it was great to have your interventions and participation in that.

I have fundamentally two questions, but I hope all of you can speak to them.

Maybe on the first one, Dr. Singer, I would like you to talk a little bit more about the other innovations to which you referred. I had the chance to see many of those last week, and they were tremendous innovations for saving and protecting children. It goes along with our integrated approach on vaccines and immunization and good nutrition.

There is another issue, and, Ms. Buchholz, this comes out of your comment that there needs to be accurate data on child domestic labourers. The whole issue of appropriate data is one of the fundamental things we need to have on civic registration so that we know who it is we want to protect.

I wonder if there is conversation among you as well as information for the committee on those two issues.

Dr. Peter Singer: Great. Thank you very much. I appreciate the opportunity.

Truly, one of the learnings was that the concrete examples of simple innovations that are low cost, and that have a big impact, really did resonate with the participants at the conference, and I think they resonated with Canadians.

My favourite scene happened when we were asked to show some of these innovations that are supported by Canada to the secretary-general and to the head of WHO. There were four of them that we took. My favourite picture shows this windup fetal heart monitor, which is like a windup radio. You don't need batteries. You can use it to monitor the state of the fetus during delivery. Dr. Chan, the director-general of WHO, took this out of the hand of the innovator and was sticking it against Ban Ki-moon's heart. There is a wonderful picture, that I tweeted, with Ban Ki-moon laughing and Dr. Chan poking him with this fetal heart monitor.

That's an example of one; it's an innovator at SickKids who is testing that electronic fetal heart monitor.

One of the other ones we had there was the Odon device, which is like a little balloon that goes over the head of the baby to help deliver the baby in the case of a delayed labour. This is a very interesting innovation. It was developed by an Argentinian car mechanic. You might have seen the story on the front page of *The New York Times*. He was looking at a YouTube video about how to take a wine cork out of a wine bottle. They did it with a balloon. He woke up at night and he said, "Oh, I have an app for that."

We're very privileged to support it along with our partners; the Gates foundation, USAID, Norway, and the U.K. We supported a proof of concept through WHO and the proof of concept worked. Now, the large Fortune 500 company, Becton Dickinson, which has developed affordable innovations before, such as safety syringes, and put them in the developing world, has picked this up, has invested significantly more funds, and is carrying it forward.

It's a good example of sustainable innovation and public and private finance working together to get these innovations into the field.

In summary, I think I'll pause here to make sure we have enough time, but some examples of innovations, which was your question, include chlorhexidine, the lucky iron fish, the Odon device, and the fetal heart monitor. One of the favourites was iron-fortified tea. The person who did fortified salt is doing a proof of concept, through the saving lives at birth initiative, to try and put iron into tea.

There were a dozen of them. I won't mention them all, but those are four or five. They were very much the focus of everybody. Picture that photograph of Dr. Chan poking the secretary-general with the fetal heart monitor and you'll see the extent to which it was able to engage people. These are simple, affordable innovations with very good impact.

I think that is what is engaging Canadians. It is what engaged the participants at that wonderful summit that we both attended. It really showed Canada's leadership in women and children's health and in innovation.

• (1700)

Ms. Lois Brown: Thank you.

Ms. Buchholz, could you talk a little bit about the registration initiatives and what needs to be done there?

Ms. Christine Buchholz: What do you mean by registration initiatives, specifically?

Ms. Lois Brown: Well, I think one of the problems that we have globally is that there are many children who are born and who we have no information about. We have children who exist in many countries.... We really don't know the numbers or whether or not they're in school.

Can you talk about those initiatives? You talked about it specifically with registration, or the need for accurate data, with child domestic labourers in Haiti. Who needs to collect that data? What do we need to do? We can't manage what we don't know.

Ms. Christine Buchholz: Right. I think I can address that from a couple of different angles.

I previously mentioned that we have 72% of the children in our program passing national grade level exams. We have child advocates who have followed up with all of these children, ensured that they have birth certificates, and obtained the birth certificates in the situations where they don't have them. There are some national registry programs in Haiti. We needed that registration in order for the children to participate in the national level exams.

The study, that I mentioned, is a collaboration with UNICEF and ILO. For 10 months, they are going to be following 16,000 families. The last study, that I know of, that measured the prevalence of children in restavek, by community, was a Pan American Development Foundation study from 2009.

In terms of other forms of measuring impact, that's something that we are working on and not only with our programs. One of the attractive features of this serial radio drama program that we are doing in partnership with Population Media Center based in Vermont, in the U.S.... They have done a great job. Before they roll out programming in Latin America, or in Africa, they do a baseline study and measure attitudes toward issues. After they've run the programming, they check in with institutions that would be

affected by this type of programming. They measure the shifts in attitude and the access to services that are then available on those topics.

The Chair: Thank you. That's all the time we have.

We're going to move to complete the first round to Mr. Garneau, for seven minutes, please.

Mr. Marc Garneau: Thank you, Mr. Chair.

First of all, thank you to all four of you for being here and speaking about the work that you do, and informing us. Thank you for doing that work.

My questions are to seek a bit more clarification. I'll start with Ms. Buchholz.

When you talked about restavek, in the case of Haiti it sounded as though you were telling me that legislation is in place in Haiti to protect against child slavery and trafficking, but it's not enforced. It doesn't seem to be respected. Did I understand that correctly?

Ms. Christine Buchholz: Partially.

There is no comprehensive human trafficking legislation, so there is nothing that addresses all forms of trafficking specifically. However, there are some child labour laws in place, and those are not enforced.

Mr. Marc Garneau: Okay, thank you.

Ms. Erb, you talked about the protection of children from violence. I think we can all relate to the need to do that.

You spoke at a fairly general level, and I'd like to better understand the work of Save the Children. I need a specific example, if you will. Choose any developing country where you work, and give me an example of how your work, your interface with the local population, is an example of how you're helping to reduce the incidence of violence.

Ms. Patricia Erb: I will choose two very quick examples.

One is in areas of emergency. When emergencies happen, children have specific protection needs. For example, with the Syrian conflict, the war, children arrive in the neighbouring countries. They are in camps or in communities that are receiving them, and their normal life has left. That new situation makes for many potential possibilities of violence, even in the case of girls' early marriage. It is something that parents maybe see as a good thing, so it happens more than it would happen normally.

Save the Children spends time doing registration of children in those situations. As Lois said before, what you don't know, what you don't see, you can't fix. It's very important to have the numbers and then create the programs through child-friendly spaces or through schools that protect. We have a lot of that type of work.

In the case, for example, of children who are involved in the sex trade, in Latin America, I'm thinking of a very strong example where Save the Children is working at the system level. There are programs for those particular girls and some boys who have gone into the sex trade, who we are working to try to get into more protective situations. We're also working with a community trying to.... There are studies, for example, on who the users are. If we can create a culture that has no tolerance for this, we can also ensure that we have a more preventive and systemic way of working at it.

So those would be two examples.

• (1705)

Mr. Marc Garneau: Thank you.

Dr. Singer, you talked about saving brains. I'm a big subscriber to those first thousand days as well. Your focus was on things such as nutrition and getting vaccinated and nurturing. I couldn't help but think that some of that would apply in Canada as well, but we're talking about the developing world.

This is perhaps related a little to my colleague's question. You didn't talk about the cognitive side. Is it simply because there's enough of a challenge on the nutrition and the vaccine side? Or is that also something that is done? I know it's a lot in terms of an additional component, but I'd like to hear your thoughts on that.

Dr. Peter Singer: Thank you.

I think the best way to think about it is that you have risk factors and interventions, and then you have outcomes and results. There are many risk factors and interventions, but I like to boil it down into three categories: first, the biological stuff, which is nutrition, immunization, toxins, etc.; second, the cognitive stimulation, actually singing, playing, and reading to children, and also treating maternal depression, so the parent interacts with the child; and third, the conflict, abuse, and neglect.

Those are the three categories of the interventions and risk factors. I think we have to stay agnostic, because you'll get different risk factors in different jurisdictions. Being well nourished doesn't help, if you're a child soldier. One of the real niches of the saving brains initiative is that we are really the only global program that's agnostic to risk factors.

On the other side, you have the results. There you have the cognitive measure you referred to, which is mostly the child's ability to regulate herself, because it's a frontal lobe phenomenon. It's not purely intelligence, and that's why any of those risk factors, when you deal with them or when you protect a child's brain during that critical period, from the key risk factors that are operating, lead to better social soft skills in business, more self-regulation, which prevents criminality, and the evidence also shows that those risk factors lead to depression and non-communicable disease.

I think the fantastic thing, though, is that the very same simple innovations and interventions in those risk factors, that save lives during that critical period—that's the focus of Canada's leadership—also save brains. That's why I talk about it as the double dividend. We really simply need to account for that huge benefit. I think the effect of those risk factors is in the tens to hundreds of billions of dollars, actually, on the world economy. We simply don't have an

accounting for it yet, but we're working on that at Grand Challenges Canada.

• (1710)

The Chair: Thank you very much.

That ends our first round, and we'll start a second round for five minutes each. I'll start with Ms. Grewal, please, for five minutes.

Mrs. Nina Grewal (Fleetwood—Port Kells, CPC): Thank you, Mr. Chair.

My question goes to Dr. Singer.

Dr. Singer, one of the many problems facing young girls in developing countries is the threat of child marriages. They often result in early pregnancies with health complications, so in your opinion what is the most detrimental aspect of child marriage to a young girl's health, and what is the best way to intervene?

Dr. Peter Singer: That's a fantastic question, and here's another area where Canada has stepped forward, introducing the UN resolution on early and forced child marriage.

The most detrimental effect on a young girl is that she dies, and this is a tragedy. This is about young children being forced into marriage, becoming pregnant early, and having babies at such an early age that the body is not ready for it, simply the size of the pelvis. For example, the labour gets obstructed, there's no access to Caesarean section, and the girl and the baby die. To my way of thinking, there's no greater deprivation of human rights than the right to life.

To answer your question, then, that is the worst outcome of early, forced, child marriage, and it creates a cycle that really leads to the root cause of many of the maternal and some of the child deaths in the developing world. I heard some evidence that a significant minority of the maternal deaths can actually be attributed to young pregnancies, many of which are related to child marriage.

I think that was your first question. You had a second one.

Mrs. Nina Grewal: Yes, the second one.... Unfortunately, sexual exploitation of young girls is a problem in many developing countries, with trafficking and genital mutilation rampant throughout these countries. What solutions would you propose to help prevent these issues in young girls' lives?

Dr. Peter Singer: Obviously, one needs to move toward innovative solutions here. Just to take a concrete example, I'd like to point out that many of the innovations here are social innovations.

There's a group working in West Africa—initially on female genital mutilation, more recently on child development, and I think also on child marriage—called Tostan. They've come to realize that there are deeply rooted cultural issues here about all of the things we talked about. They engage community leaders. They get them to publicly renounce these practices and just change the local cultural norms. That itself is a form of social innovation, to take that particular approach.

Canada can actually stimulate ideas like that—I just used that concrete example—see which ones work best, and scale them. I also know that this is an area, again, where Save the Children, which is such a fantastic group, has a lot of experience. I'm sure our colleagues from Save the Children will have some great ideas about solutions as well.

I just want to highlight the role of innovation, the simple innovations, and we're blessed in Canada to have a group of 70 organizations working together right from the innovation and idea generation end through to the implementation and programming end. Save the Children would be a fantastic example and that's a real asset that we have.

If I may, I'd like to invite Patricia to also comment on the second part of your question because it's such a fantastic group and we work so closely together.

Mr. Will Postma: Maybe I'll just respond on behalf of Patricia. I'm right here with her—thanks, Peter and everyone.

Some of the best innovations are just working with local facilitators and local partners. We've seen this in, say, Burkina Faso, where we work with networks of bus drivers or truck drivers to spot children who may be at risk of trafficking outside of their countries and far from their communities.

In Somalia, in a recent project supported by the Government of Canada on early and forced child marriage, it was really critical to work with religious leaders, Islamic leaders, and as Peter was saying, have them publicly take stands against early and forced child marriage. That way we can work with them, and then when our project comes to an end, they will still be there to denounce this practice. But not just denounce it but also help girls find other choices that are going to be good for them.

Many of our innovations on the social side connect to the economic side, so that girls, as they grow up, also have economic choices. They learn market skills, they learn budgeting skills that will give them other choices, and they can discuss those with their families in the evenings, and come back to class the next day and learn more.

Some of these key innovations are right there in the community. Save the Children, in our work, has really learned to work with them and value how important those innovations are for the long term.

•(1715)

The Chair: Thank you. That's all the time we have.

Madame Laverdière, you have five minutes.

[*Translation*]

Ms. Hélène Laverdière: Thank you very much, Mr. Chair.

Dr. Singer, you spoke about social innovation. As a sociologist, I always find this interesting. It reminds me of a story that happened in Senegal. We trained women who had been performing female genital mutilation so that they could become midwives. It was a way of giving those women a new profession. And it worked very well.

Thank you for the example that you gave.

[*English*]

For Save the Children, I'd like to have your views as well. We all know we're going toward the post-MDG; we're developing the post-MDG agenda. I'd like to know what you would like to see in the post-2015 agenda regarding children, and particularly, children in situations of conflict and/or violence against children, as well as children and girls' rights.

I know it's a very broad question, but if you would like to comment.

Ms. Patricia Erb: Yes, many organizations are happy with some of the achievements that we have had up to now with the MDG goals, particularly with maternal-infant results, but as we now position ourselves for the post-MDG, some issues are starting to become more important. One of them is the issue of poverty and the “hardest to reach”. So, on education or health, we've improved the numbers, but now the numbers that we have to improve fall in areas that are much harder to reach, so it has to be a more focused, and sometimes different, kind of approach because we won't be able to reach and change those numbers with the same methodologies that we're achieving right now. What we did maybe was good with a mainstream methodology, but now it might be more indigenous people, or it might be those who are, exactly as you said, affected by conflict, those who are suffering emergencies, who are not getting the benefits.

For us, the post-MDG agenda sees the issue of poverty and the issue of “hard to reach” as much more important ones for us to be able to achieve with the new numbers that we all are committing to achieve.

Ms. Hélène Laverdière: Thank you.

During your presentation—and I'm just jumping from one issue to the other, but there is just so much to discuss—you talked about migration and trafficking in West Africa, and what some people saw as trafficking is now more described as migration. I think it's all a matter of understanding the context in which things happen, and sometimes when we look at it from here in Canada we don't always understand the context. Can you comment on that? Is it often your experience that you come with some views on some things, but once you see the context, that view may change?

The Chair: You have about a minute to do that, Mr. Postma.

Mr. Will Postma: Okay, I'll go very quickly.

It's only in the past 10 or 15 years that we've had a clear picture of migration. Many young people, many children, up to the age of 18, yes, they have moved to other cities partly for learning and partly for work reasons. We've understood that, assuming children can still stay safe and protected and be supported, maybe that aspect of migration is part of the reality of how children grow up in, say, Burkina Faso, or other countries of West Africa.

So we really understood with our partners, with working children movements, the importance that migration may have. But also trafficking is still a very real danger in that there are still too many individuals who will lure children who are away from their families, their natural safety net of support, say, and encourage them to go to Côte d'Ivoire or to Ghana, to work on cocoa plantations, and to receive a bicycle or some steady source of income, and that often does not materialize. That's the kind of migration that is trafficking, which we do not want to see and we use every effort to prevent.

A key way is using local translation of laws that are already in place, and sharing those out in one of the many local languages so that people understand laws in their context, and it's not just written in French at a national level.

• (1720)

The Chair: Thank you very much.

We're going to finish up with Mr. Anderson today. You have five minutes, please.

Mr. David Anderson (Cypress Hills—Grasslands, CPC): I'd just like to follow up on that with just one more step. I'm just wondering, we heard earlier about how important it is to have data on appropriate domestic child labourers. When you're talking about migration, about young people moving—and I guess I would ask both Save the Children and Ms. Buchholz—at what age do you feel children should be allowed to work on a regular basis? Should they be the age of majority?

In their situations, in the place where you are, what is that age that you would feel comfortable with saying, yes, young people can be working regularly?

Ms. Christine Buchholz: I can address part of that question. In Haiti, the child labour laws allow children who are 15 and over to work. We see a lot of children who are 10, 11, 12—younger than 15—and we know that families are very poor and they want a way to earn wages. However, the children that we're talking about are working, but not paid wages for their efforts.

Mr. David Anderson: We'll come back to that in a minute. I'm just interested in what Save the Children would say here as well.

Ms. Patricia Erb: Countries have all defined individually what the minimum age is, and that varies. It's very typical for the age to be 14. But there are some countries that have stepped down to 12. The issue is that there are children who are below that age who are working.

The problem with not being recognized, and being almost illegal, is that they then work in less protected conditions. If you don't recognize that they can exist, that they do exist, you can't protect them in any way. So we spend a lot of time trying to understand the

situation of each child here. We have children for example working in the agriculture sector. They work with their families. They work with their families maybe with a company, and some of it is small, some of it might be moderate or acceptable, and some might be very exploitative conditions.

We think, in Save the Children, that it's very important to understand exactly the context that we're speaking about, because we have been part of global campaigns that have banned work for children and what we did is something we don't want to do. We pushed them to go to more hidden and worse forms, and we will not do that again.

So we will look at the situation carefully, and ensure that those children have options they can move to. If they're working because they need to and nobody is going to give them the money, you have to look at their situation and try to see how you get them to school, how you get them to play, but maybe also protect them at some types of work.

So it's a complex issue.

Mr. David Anderson: I have just a couple of questions specific to Haiti. You mentioned that there were child labour laws in Haiti, but it seems to me that you were saying that you need more enforcement rather than more legislation. Is that an appropriate way of wording that?

Secondly, I'm just wondering, are you comfortable that the human trafficking laws that have been put in place are adequate, but they just need enforcement as well?

• (1725)

Ms. Christine Buchholz: Sure.

In terms of child labour laws, we would like to see those enforced; that is correct. There is no human trafficking legislation and we'd like to see that drafted, passed, and enforced. I think it's a challenge of institutions that are ill-equipped. We have called on the Brigade for the Protection of Minors. They have taken down our reports, taken in the children, but there aren't places to put some of these children.

Our child advocates working in the field identified a need for children who are being severely abused while in restavek, and as a result we ended up creating a transitional home for 12 girls. We're housing them. We're providing them an education, offering them therapy, and providing them vocational training opportunities, but we are only one of a handful of places where children can go. There isn't enough infrastructure to support the government institutions that also need to do more.

Mr. David Anderson: Just to ask one question, when we were doing our study on Syria, one of the things that we approached was the issue of sexual violence, and people were very reluctant to speak about that. I'm just wondering, can you give us an idea, in terms of the restavek issue, of what percentage of young people would be abused because of labour issues? What percentage are put in sexual abuse situations? What percentage would be trafficked into the sex trade? Do you have any kinds of figures like that?

The Chair: That's all the time we have—

Ms. Christine Buchholz: I'm afraid I don't have specifics.

The Chair: I'll ask you to respond, but that's all the time that David has. Go ahead, answer the question. That would be great.

Ms. Christine Buchholz: Our focus has been strictly on the labour issue. We do know that girls in our program have been sexually abused, but we don't have a percentage, per se.

The Chair: Okay. Thank you. Do we have any final questions from our MPs at all? We have about five minutes left, and that completes it. Is there one question that people have? You guys have one question? Okay, so go ahead Romeo.

Mr. Romeo Saganash (Abitibi—Baie-James—Nunavik—Eeyou, NDP): Thank you, to all, for very informative presentations.

I concur with a lot of the answers that were given here. I want to touch on an aspect that we talked about today, which is the solutions that have to be child-oriented, the participation of children in the decisions that affect them directly, the child being at the centre of interventions, and so on.

I think that's an important matter, and I'd like any of you four to answer a question. How do we achieve that objective? How do we implement those kinds of concepts in order to implement some of the minimum standards that we're talking about here?

Thank you.

The Chair: Who would like to answer that?

Dr. Singer.

Dr. Peter Singer: I'll take a quick whack at that.

I used a lot of examples of technologies. One of the things we've learned at Grand Challenges Canada is that you have to integrate technological, social, and business innovation. As a concrete example, one of the innovations we have is called "no sugar for me". It's a program in east Africa that engages young women and girls and helps empower them so they're not susceptible to this phenomenon of sugar daddies, which is essentially transactional sex from older men for little bits of money.

There's a concrete example of an innovation, a social innovation, that's engaging children, in this case, young girls, to help empower them and let them avoid.... I think those ideas of engaging children, the social innovation aspects of an integrated technological, business, and social approach, are extremely important.

I can give you several other examples, but I won't in light of the time.

The Chair: Thank you.

Nina, you have one final quick question.

Mrs. Nina Grewal: My questions are for Save the Children Canada.

How does Save the Children Canada operate within the cultural norms in communities? What restrictions do you face from country to country, and based on their cultural differences, how does this affect potential solutions to problems?

Mr. Will Postma: Thanks for that question.

I think culture and context are really important. The best way to understand that culture and context is taking the time to work with local partners.

I was in Ethiopia about 10 days ago and worked with a community there. They were taking the time to listen to the voices of children and to work with local government leaders. It's making sure there's enough time, not just to be together but to solicit input on, say, a learning curriculum, to solicit input as to how to best facilitate very tough topics around planning, marketing, or budgeting. How can we best understand from them how we can best help them learn?

It's taking that time to do a very good job, and that would bring in understandings around culture and context. It would really give voice to young people, and for them it helps them understand the program as being their own program.

That's just one example.

• (1730)

The Chair: Thank you very much.

To our witnesses, thanks for your flexibility today as we worked around votes.

Thank you very much, to Grand Challenges Canada, Dr. Singer; and to Save the Children Canada, Patricia Erb and Will Postma; and joining us from Washington, we had Christine Buchholz, from Restavek Freedom Foundation.

Thanks, and with that, the meeting is adjourned.

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