The national target for childhood immunization coverage is 95%, achieved through a range of provincial and territorial immunization programs. The lack of coordination between programs makes it difficult to achieve these target rates. Indigenous children experience high mobility, barriers to accessing health care services, and jurisdictional disputes between federal responsibility for health and provincial health systems, all of which may negatively impact immunization rates and systems. Lower immunization rates are also a product of a history of distrust resulting from immunization experiments performed on Indigenous children in residential schools, as revealed by the Truth and Reconciliation Commission of Canada. Addressing issues of health care access, provider education and providing culturally safe services could serve to improve immunization rates.

### Up-to-Date Immunization Record

- **7%** of Indigenous children, 6 years and younger, in Toronto have never received any immunization, compared to the **1.5%** of children aged 2, 7 and 17 years in Canada (2015 CNICS)¹
- **33%** of Indigenous parents indicated no healthcare provider had discussed their child’s immunization with them in the past year.

### Barriers

- Getting an appointment with a provider
- Not wanting to immunize their child for cultural reasons
- Finding time in their schedule to attend the appointment

### Policy Implications

- Implement TRC Call to Action 23: We call upon all levels of government to provide healthcare professionals with cultural competency training, including awareness of past immunization experiments conducted on Indigenous children.
- City of Toronto, provincial and federal policy makers work in partnership with urban Indigenous peoples and organizations to:
  - Address barriers facing Indigenous parents, families and communities in the access of immunizations.
  - Coordinate immunization screening schedules and tracking systems for Indigenous children across Canada to address mobility and other barriers in accessing timely immunization.
  - Develop coordinated immunization catch up programs for Indigenous children to address mobility and other barriers in accessing timely immunization.
  - Ensure education and health promotion materials regarding immunization are culturally relevant, including Indigenous languages when appropriate.
  - Develop and implement alternative pathways to promote and deliver immunization to Indigenous children that build on existing Indigenous community primary care providers (perinatal workers, nurses, midwives, and physicians) and school programs.

### Definitions

- Indigenous adults: persons 15 years or older self-identifying as Indigenous, such as First Nations, Métis, Inuit or other Indigenous Nations, living or using services in the City of Toronto; Trans/Other: includes Trans, Other and you do no have a category that applies to me; Trans: Transgender, Transsexual, or Gender Queer.

### Sources

1. UN General Assembly (2007); 2. Smylie et al. (2016); 3. Truth and Reconciliation Canada (2015)
### Child Immunization Reference

<table>
<thead>
<tr>
<th>Survey Question</th>
<th>RDS Prevalence Estimate (95% Confidence Interval)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has your child ever received any immunizations?</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>92.6% (85.6, 99.5)</td>
</tr>
<tr>
<td>No</td>
<td>7.4% (0.5, 14.4)</td>
</tr>
<tr>
<td>Within the past year, did any health care provider discuss your child’s immunizations with you?</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>67.4% (53.3, 81.6)</td>
</tr>
<tr>
<td>No</td>
<td>32.6% (18.4, 46.7)</td>
</tr>
</tbody>
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