

WMA DECLARATION OF OTTAWA ON CHILD HEALTH

Adopted by the 50th World Medical Assembly, Ottawa, Canada, October 1998
and amended by the 60th WMA General Assembly, New Delhi, India, October 2009

PREAMBLE

Science has now proven that to reach their potential, children need to grow up in a place where they can thrive - spiritually, emotionally, mentally, physically and intellectually¹. That place must have four fundamental elements:

- a safe and secure environment;
- the opportunity for optimal growth and development;
- health services when needed; and
- monitoring & research for evidence-based continual improvement into the future².

Physicians know that the future of our world depends on our children: their education, their employability, their productivity, their innovation, and their love and care for one another and for this planet. Early childhood experiences strongly influence future development including basic learning, school success, economic participation, social citizenry, and health³. In most situations, parents and caregivers alone cannot provide strong nurturing environments without help from local, regional, national and international organizations¹. Physicians therefore join with parents, and with world leaders to advocate for healthy children.

The principles of this Declaration apply to all children in the world from birth to 18 years of age, regardless of race, age, ethnicity, nationality, political affiliation, creed, language, gender, disease or disability, physical ability, mental ability, sexual orientation, cultural history, life experience or the social standing of the child or her/his parents or legal guardian. In all countries of the world, regardless of resources, meeting these principles should be a priority for parents, communities and governments. The United Nations Convention on the Rights of Children (1989) sets out the wider rights of all children and young people, but those rights cannot exist without health.

GENERAL PRINCIPLES

1. A place with a safe and secure environment includes:
 - a. Clean water, air and soil;
 - b. Protection from injury, exploitation, discrimination and from traditional practices prejudicial to the health of the child, and

- c. Healthy families, homes and communities
2. A place where a child can have good health and development offers:
 - a. Prenatal and maternal care for the best possible health at birth
 - b. Nutrition for proper growth, development and long-term health
 - c. Early learning opportunities and high quality care at home and in the community
 - d. Opportunities and encouragement for physical activity
 - e. Affordable & accessible high quality primary & secondary education
3. A full range of health resources available to all means:
 - a. The best interests of the child shall be the primary consideration in the provision of health care;
 - b. Those caring for children shall have the special training and skills necessary to enable them to respond appropriately to the medical, physical, emotional and developmental needs of children & their families
 - c. Basic health care including health promotion, recommended immunization, drugs & dental health
 - d. Mental health care and prompt referral to intervention when problems identified
 - e. Priority access to drugs for life- or limb-threatening conditions for all mothers and children
 - f. Hospitalization only if the care and treatment required cannot be provided at home, in the community or on an outpatient basis
 - g. Access to specialty diagnostic and treatment services when needed
 - h. Rehabilitation services and supports within community
 - i. Pain management and care and prevention (or minimization) of suffering
 - j. Informed consent is necessary before initiating any diagnostic, therapeutic, rehabilitative, or research procedure on a child. In the majority of cases, the consent shall be obtained from the parent(s) or legal guardian, or in some cases, by extended family, although the wishes of a competent child should be taken into account before consent is given.
4. Research⁴ & monitoring for continual improvement includes:
 - a. All infants will be officially registered within one month of birth
 - b. All children will be treated with dignity and respect
 - c. Quality care is ensured through on-going monitoring of services, including collection of data, and evaluation of outcomes
 - d. Children will share in the benefits from scientific research relevant to their needs
 - e. The privacy of a child patient will be respected

RESCINDED

¹ Irwin LG, Siddiqi A, Hertzman C. “Early Child Development: A Powerful Equalizer. Final Report”. World Health Organization Commission on the Social Determinants of Health June 2007

² WHO Commission on Social Determinants of Health (Closing the Gap in a Generation) 2008

³ Canadian Charter for Child and Youth Health

⁴ Proposed WMA statement on ethical principles for medical research on child subjects

* Please refer the [background document](#) for specific principles.