

Children First

Cluster Evaluation

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Early Childhood Development Team

CHILDREN FIRST CLUSTER EVALUATION

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CHILDREN FIRST IMPLEMENTATION EVALUATION

1.0 EXECUTIVE SUMMARY

1.1 Purpose

The Children First Cluster Evaluation was commissioned by the Provincial Early Childhood Development Team of the Ministry of Children and Family Development (MCFD). The project had the following goals:

- A cluster evaluation of the 45 Children First sites around the province;
- Development of a framework for integrating the findings;
- Draft and final reports.

1.2 Findings of the Cluster Evaluation

The Cluster Evaluation looked at how the initiatives are responding to the goals of the initiative by examining activity related to the expected core activities that flow from the goals. These core activities are: Working Together, Spreading the Word, Research, Planning, Advocacy, Allocation and Evaluation.

Working Together

1. Clearly, the Children First initiatives and other entities involved with or connected to the provision of ECD programs and services are working together. All Children First initiatives involve a steering committee, and it is evident that there is broad cross sectoral participation in these. In all 1,142 people were counted as active participants. All steering committees have representation from Health, MCFD, community groups and school districts.
2. 100% of reporting initiatives indicated that they are working in partnership with Success By 6 ®. In some instances it is impossible to separate out the work of Children First, Success By 6 ® and Understanding the Early Years.
3. The Annual Reports indicate that the coalitions are on a growth curve with the older, more established initiatives having more connections to the business community and municipal structures and the younger coalitions working to reach out to more community partners.
4. It is evident that the work of reaching out to non traditional partners is having some effect and that it must be ongoing. The data collected could be used as a baseline for future measurement of the involvement of the various constituencies targeted by Children First.

5. While there are some very good examples of initiatives working together with Aboriginal communities and multicultural populations; providing them with leadership opportunities and involving them in ways other than as recipients of service, this is an area where growth could be expected.
6. Some initiatives have developed ways in which to meaningfully involve the child care sector and others are struggling to do so. Continued efforts by Children First initiatives to engage the child care sector may lead to creative ideas about how to integrate child care with other services at the local level.
7. Efforts are being made to involve parents, marginalized groups and business and the community at large and these efforts should be sustained. Research on how to involve these stakeholders demonstrates that long term commitment and investment is required. The principles for recruiting and sustaining the involvement of any of the target groups are the same and depend upon truly understanding and believing that their involvement is necessary, providing them with meaningful opportunities for involvement and valuing and recognizing their contributions.

Spreading The Word

1. The Annual Reports collectively represent a rich mix of efforts to raise awareness of the importance of the early years and to involve communities in the initiative. Many of these activities involve partnerships within the community.
2. Some references to a need for either regional or provincially managed awareness raising were made in survey responses and/or in Annual Reports. If the different ECD initiatives could agree to one "brand", a certain amount of centralized awareness raising would make sense. This should not supplant community based efforts to create awareness and mobilize even more community members in developing local ownership of Children First.

Research

1. Most importantly, the majority of initiatives appear to be using their research for planning purposes. In addition, as a result of their research work and across the spectrum of research activities:
 - An average of 39% of initiatives reported that they have shifted resources to reach vulnerable families;
 - An average of 29% of initiatives have found new funding;
 - An average of 41% report that services have become more integrated;
 - An average of 19% reported that some or all services have been relocated.
2. Detailed assessment of how services are becoming more integrated would likely be useful at some point in the future. In the meantime, this review demonstrates that significant research has been done and that the results are being used for planning and other purposes.

Planning

1. Strategic Planning:

- 25 plans were examined. 17 of these were identified as strategic plans, 2 as action plans, 3 as work plans and 3 as logic models;
- At the provincial level, Children First clearly spells out its overall goals, and it is reasonable to expect that the individual initiatives would include or incorporate these goals in some fashion. In fact, the majority of these plans include strategies and/or activities that relate directly to the Children First goals as outlined in the CF Guidelines and therefore to the core Children First activities as well:
 - 20 of the plans have strategies related to development of integrated, community based models for services to young children and their families;
 - 22 have strategies related to building relationships with all relevant providers and sectors;
 - 20 have strategies related to utilizing current research;
 - 21 have strategies related to involving communities, service providers, researchers and MCFD staff;
 - 22 have strategies related to strengthening family capacity.
- A variety of planning methods are in use and in most instances it is difficult to see how one step flows from a previous step. Acceptance of the common meaning of planning terms (strategic issues, strategic direction, goals, objectives, action plans, strategic plans, community plans, etc.) would likely lead to improvements in planning processes, as well as an ability to take a more coherent look at the overall system;
- If initiatives could agree to use and document common steps in the strategic planning process, including documentation of who participated, it would help to demonstrate that the plans are rational and that they do indeed flow from the grass roots in communities;
- Whether or not strategic plans are used to create logic models, they should be used as “high level” plans and translated to some sort of operational or action plans and communications plans;
- Priorities should be clearly identified at the community table and in the strategic plans so that when funding opportunities arise, there is no doubt as to where money should be allocated. This is particularly important in initiatives where allocation responsibilities are handed off to a subcommittee or higher level group;
- With the disparity of funding around the province, some initiatives may not have the resources with which to gain expertise in the area of strategic/ operational planning and service integration. Technical support and adequate funding will resolve this.

- ### 2. Planning to Reach Vulnerable Families.
- Six Annual Reports showed evidence of planning and activity aimed at reaching out to vulnerable families. A survey of coordinators asked about strategies that had been successful in reaching this group. Fifteen respondents identified strategies that were successful including outreach to places where vulnerable families can be found, addressing transportation issues, and partnering with agencies that are in close contact with target groups. These strategies are worth taking note of. It is encouraging to see the efforts that are being made around the province to reach these families and hoped that the successes will be shared and built upon over time.

Advocacy

1. It was difficult to separate out advocacy from public awareness in the review of the CF Annual Reports, so for the most part, advocacy efforts are included in the "Spreading the Word" section of this report (Section 4.0).
2. In the Annual Reports, initiatives made mention of making presentations to Members of Parliament, MLA's, Town Councils, Parks and Recreation Commissions, Health Authorities, etc. Further, advocacy related to early childhood priorities is undoubtedly taking place in structured ways, such as through First Call, and more informally at provincial meetings and wherever stakeholders have access to those with decision making authority.
3. The role of Children First initiatives in advocacy is unclear and some discussion of this at various levels would likely prove useful.

Allocation

1. The findings show that initiatives are working together with locally based MCFD staff to identify and fund community priorities and that many initiatives have democratic decision making principles included in their Terms of Reference.
2. While it appears that many good decisions are being made relative to funding priorities identified in community plans, some initiatives continue to use competitive bidding processes for awarding new contracts for services. Additionally, some steering committees have handed off decision (related to funding) to committees that are viewed as not being in a conflict of interest in a bidding process, in that they will not be recipients of contracts. While this review did not clarify the extent to which competitive bidding is taking place at the local level, it does suggest caution around avoiding the replication of mechanistic methods of allocation.
3. Three initiatives have allocated the majority of their funds for service delivery. This may have caused some confusion in that some other initiatives expect that at some point their own community development funds will be transferred to service delivery.
4. An attempt was made to create a roll-up of how Children First funds are being expended, and this proved to be largely unfeasible.

Evaluation

1. Evaluation is taking place and it appears that capacity is being developed in this area using different methods and tools. 96% of initiatives that have completed an evaluation indicated that evaluation results have been used for improvement.
2. Clearly the development of an evaluation system for Children First should be a priority and should build on the work already done in communities and by the Provincial Advisor (PA). For this to happen, three things will have to be established:
 - Agreement at all levels of Children First (local, regional and provincial) upon a shared set of outcomes and indicators and the use of a common logic model;

- Financial and professional support. Programs that have moved ahead in evaluation work allocate at least 10% of their budgets to evaluation support;
 - The development of a system for capturing, synthesizing and reporting outputs and outcomes.
3. Finally, 29% of initiatives reported that their coalition had evaluated their collaborative processes. Given the nature of the initiative, some form of ongoing evaluation of collaborative efforts should be taking place.

1.3 Recommendations

The following recommendations are made as a result of the review and synthesis of information provided through project documentation, research related to the Children First model and the direct input of Children First Coordinators, CSMs, regional ECD Consultants, the Provincial ECD Team, HELP and Success By 6® .

1.3.1 To the Provincial ECD Team, and Provincial Advisor

1. Provide information and support to Children First initiatives in the areas of raising capacity/commitment to involving Aboriginal people, the business community, multi cultural communities and vulnerable children and families.
2. Create budget/financial reporting templates.
3. Work with the stakeholders to either clarify the different roles that Success By 6® and Children First play, or to consolidate the initiatives.
4. Plan for some future assessment of how well services are being integrated at the provincial, regional and local levels.
5. Work with initiatives to determine what awareness raising/communication tools could be produced/shared at a provincial or regional level and would raise the profile of Children First province wide without supplanting community driven efforts to raise awareness.
6. Provide initiatives with guidelines and technical support related to strategic planning, evaluation, community development, social marketing, information management and interpretation of research data.

1.3.2 To the MCFD Regions

1. Work with the Provincial ECD Team and PA to clarify provincial and regional roles related to above noted the recommendations.
2. Work with Children First and other ECD programs in the regions to raise capacity/commitment to involving Aboriginal people, multi cultural communities, vulnerable families and the business community.

1.3.3 To the Children First Initiatives:

1. Continue the work to engage parents, non traditional partners, vulnerable families, Aboriginal people and the multicultural community in planning, implementation and evaluation.
2. Continue to work to engage the child care sector and to advocate for integration of ECD/ECE services.
3. Work with the PA to reach agreement on the use of common planning and evaluation tools – work towards an integrated reporting system that has the potential to have an impact on provincial planning.
4. Regularly evaluate your collaborative processes.
5. Work together to reach agreement on Children First's advocacy role at the community, regional and provincial levels.
6. Continue to work towards building trust and expertise that will lead to the elimination of competitive bidding and full integration of services at the local level. This will take patience and time.

1.4 Conclusion

The progress of the Children First initiative is remarkable. From the perspective of this review, its greatest strengths are its relative freedom to self-organize and its ability to create and share new information. Freedom to self-organize allows living systems to create new order in concert with their environment. The creation of information is what keeps systems alive and allows them to change and grow and undoubtedly, vast amounts of information are being generated and shared amongst the diverse players who have been mobilized through this initiative.

A clear sense of identity is the foundation of a successful self-organizing system, and it seems that this initiative has that identity: "Children First".

Certainly there are organizational and structural issues that need attention, but the system has a solid foundation to build upon. Patience and continual attention to what matters by all stakeholders will be key to the ongoing development of the initiative. The process of transformation – which is ongoing in the Children First system - can be likened to swinging on a trapeze. At some point we see the new trapeze coming towards us, but we are afraid to let go of the old trapeze to move to the new one, because of that "nothing" place in between. But it is in that in between place (transition), where we've let go of the old way and haven't quite grasped the new ways, that we learn and grow (Parry, 1997). This is a promising place from which to address the future. Today the different CF initiatives are at different stages of development. Some are holding on to the old trapeze, some are taking their time in the in-between space and some have grasped the new one.

2.0 METHODOLOGY

This cluster evaluation focused on progress made towards achieving the broad goals of Children First and took a participatory approach; gathering, analyzing, synthesizing and reporting information from the various groups of people who are involved in the implementation of the initiative.

The independent consultant reviewed documentation provided by the Provincial ECD Team related to the start up of Children First including a series Status Reports, to gain an understanding of Children First, and how it had been implemented.

The Provincial Advisor provided Annual Reports received from the initiatives in 2005 and 2006 (27 Annual Reports for 2005, and 40 Annual Reports for 2006). The consultant requested Children First Coordinators to provide strategic plans, Terms of Reference, budget breakdowns (showing amount of Children First Funding allocated to staffing, community development and service provision) and lists of steering committee membership and their affiliations. In all, 25 community plans, 26 Terms of Reference 39 membership lists, and budget breakdowns for 27 initiatives were submitted, along with other documents considered relevant by Children First coordinators. The data in the Annual Reports, community plans, Terms of Reference membership lists and budget breakdowns were categorized and compared, and a significant amount of communication with Coordinators took place for the purposes of clarification.

Subsequent to an initial review of the Annual Reports, the consultant recommended gathering more information and prepared an online survey with a view to enhancing the information related to how initiatives were addressing the core functions of Children First. Responses were submitted by 39 of the 42 initiatives contacted and the resulting information was categorized and synthesized.

The findings from the Annual Reports, online surveys, communications with the various stakeholders and research related to the goals of the implementation evaluation were integrated into this report.

2.1 Limitations

1. For the most part, the findings of this project are based upon reports from stakeholders. No attempt was made to assess the quality of these reports.
2. The Children First Annual reporting system asks respondents to submit "examples" of their activities, so the full range and scope of activity may be under reported. An attempt to mitigate this was made through administration of the online survey.

3.0 Background

Spearheaded by cross sectoral, community based steering committees, Children First takes a community development approach to integrating services for children aged 0-6 and their families. Children First began in December with MCFD funding three communities to support the process of learning what it would take to bring the different parts of the ECD system together to develop an effective system of supports for all children from preconception to school entry. In 2002/2003, the program was expanded to one capacity building "Learning Initiative" in each region of the province. More recently, the reallocation of Children First funds within some of the MCFD regions led to the creation of new initiatives. Children First initiatives are now active in 45 communities (Appendix A) - 18 in the Interior Region, 3 in the Vancouver Coastal Region, 12 in the Fraser Region, 3 in the Northern Region and 9 in the Vancouver Island Region.

The overall goals of Children First are:

- **Increased community capacity** – communities come together, partnerships develop and communities learn how to work together collaboratively to enhance opportunities for children and families;
- **Increased effectiveness and efficiency** - in coming together, community partners learn how to work more effectively and efficiently with their collective resources to enhance opportunities for children and families;
- **Engaging "hard to reach" families** - in an effort to increase access to services for 'hard to reach' families, undertake a range of activities to ensure that all families access necessary supports and services;
- **Increased opportunities for early identification and screening** – explore new opportunities and approaches for early identification, including preconception, universal newborn and toddler screening and using strength –based approaches;
- **Improving outcomes for children and families** - communities focus on ECD in ways that make a significant difference for children, families, service providers and the community at large.

In 2005, core functions were identified with a view to creating consistency in how Children First was described, to broaden the understanding of the goals and to support and guide the development of new initiatives. These components connect directly to the goals of Children First and are now described as the "core activities" of Children First initiatives. They are: Working Together, Spreading the Word, Planning, Research, Advocacy, Allocation and Evaluation.

This cluster evaluation details the core activities of Children First and demonstrates how the initiatives are responding to them.

4.0 WORKING TOGETHER

This core activity of the Children First initiative is expected to involve the following:

- The development, or enhancement, of a coalition of service providers and community members interested in healthy early childhood development. This group will have broad inter-sectoral representation. One of the roles of this group will be to act as the steering committee to the initiative;
- The engagement, by the steering committee, of an individual to coordinate all the activities of the initiative;
- The participation of the Aboriginal, and, as appropriate, other multi-cultural, communities;
- The constant broadening of the coalition. Community partnerships need to extend to all sectors of a community, whether or not they have traditionally been involved in ECD service delivery. (e.g. business, faith community).

These activities relate to the Children First goals of “Increased Community Capacity”; “Increased Effectiveness and Efficiency”; and “Improving Outcomes for Children and Families”.

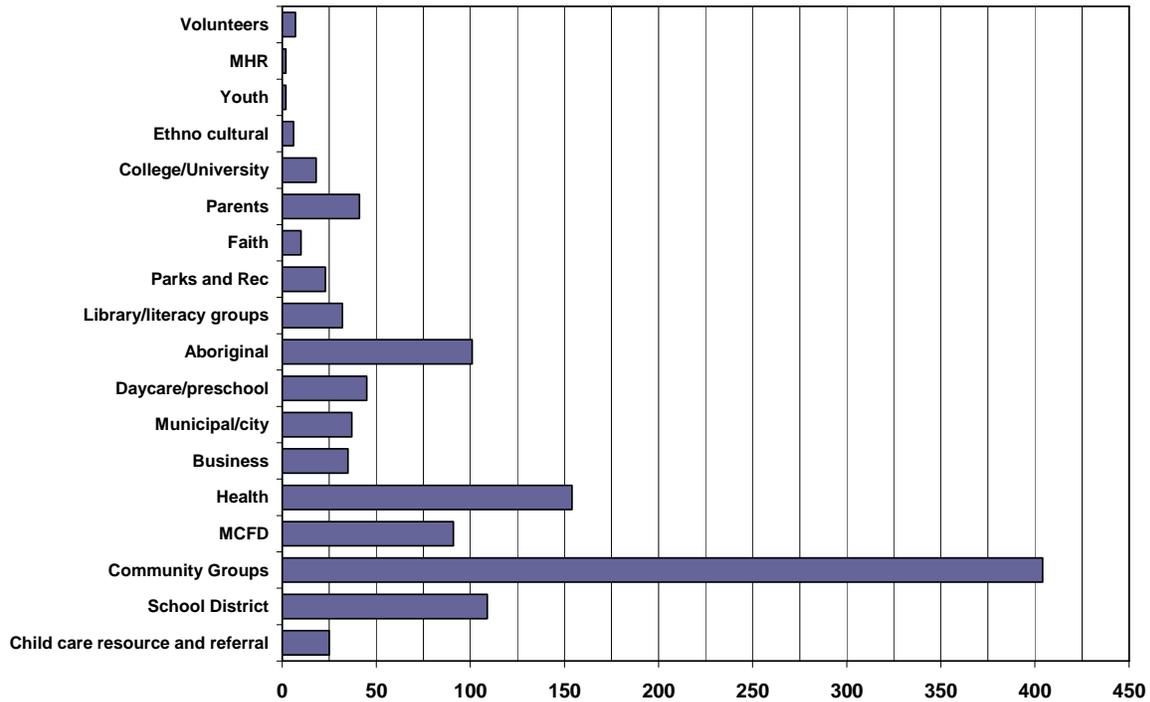
The findings in this section relate to the levels of participation in steering committees, including overall participation, and the participation of parents, Aboriginal people, the business community, the multicultural community and daycare and preschool providers.

4.1 Findings Related to the Level of Participation in Steering Committees

Thirty-six initiatives submitted membership lists for their steering committees. Where information was available, individuals in subcommittees that were directly related to the steering committees were included in a count of participants from different sectors. In some instances, information submitted did not provide actual numbers – e.g. “representatives from the Health Region”, in which case an entry of “1” was made to the count, and so the actual number of individuals is somewhat higher than represented here.

- All Children First initiatives involve a steering committee and it is evident that there is broad cross sectoral participation in these;
- In all 1,142 people were counted as active participants. The following chart demonstrates the mix of individuals participating in Children First initiative steering committees.

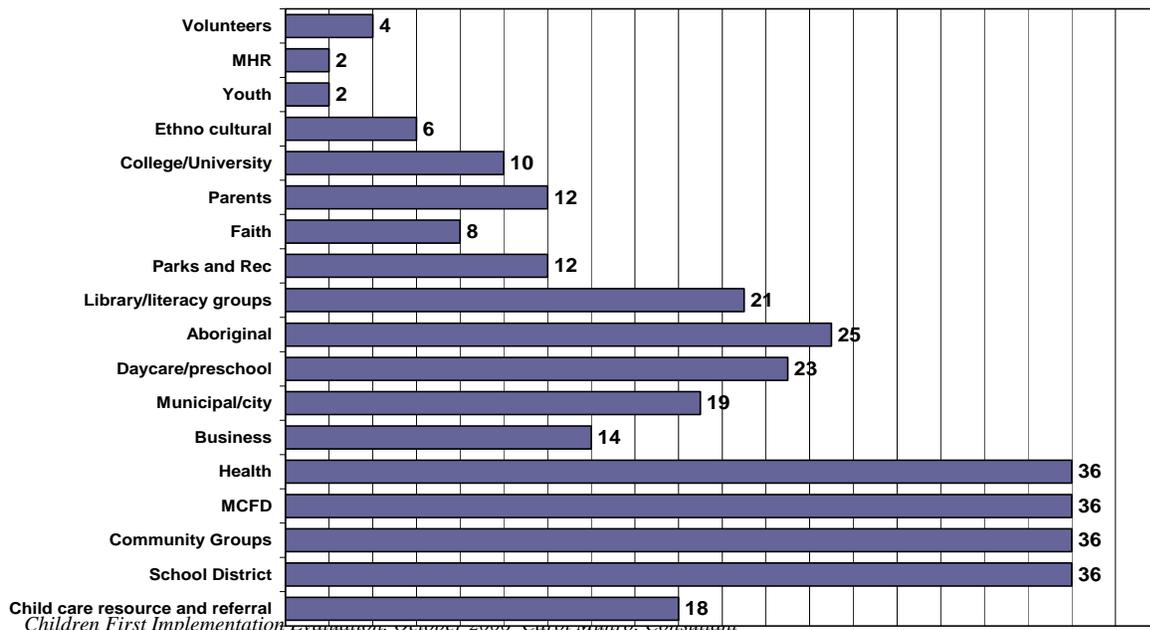
**Individual Participants in Children First Initiatives
(36 Initiatives reporting)**



The foregoing data should be interpreted with caution – i.e. some regions have significant numbers of individuals from Health or Aboriginal agencies involved in their steering committees, while others have only one or two.

A second look at the data considered the number of coalitions that had representation from different sectors, and this finding may be more significant. This data shows that all initiatives have representation from Health, MCFD, community groups and school districts.

**Participation in Children First Initiatives
(35 Initiatives reporting)**



The Annual Reports indicate that the coalitions are growing over time with the older, more established initiatives having more connections with the business community and municipal structures and the younger coalitions working to reach out to more community partners.

It is evident that the work of reaching out to non traditional partners must be ongoing. More involvement of parents and community volunteers could serve to lessen the load on community agencies and perhaps reduce the potential for “turf” issues. The data illustrated above could be used as a baseline for future measurement of cross sectoral and community involvement.

4.2 Findings Related to Partnerships with Other ECD Initiatives

In the coordinators survey, respondents were asked if they were working in partnership with other ECD initiatives:

- 100% of respondents (N=37) indicated that they were working in partnership with Success By 6®;
- 22% of initiatives indicated that they were working in partnership with the Understanding the Early Years Initiative;
- 49% of respondents indicated that they were working in partnership with other ECD initiatives such as those spearheaded by Health Authorities, HELP, MCFD, CAPC, Ready Set Learn, School Districts, Building Blocks, Nobody’s Perfect, Mother Goose, Infant Development, CPNP, POPS, Literacy Now, Healthy Communities and First Call;

In many instances it is impossible to separate the work of Success By 6® , Children First and Understanding the Early Years. In some communities, Success By 6® has supported the creation of ECD initiatives. Duplication of effort was not a subject of this review, however the initiatives do appear to using a collaborative approach and doing the best they can to integrate the different funding streams.

4.3 Findings Related to Parent Participation

A review of membership lists of 36 initiatives showed that 42 parents were involved in 12 steering committees or sub committees. Some of these parents were also service providers. One initiative listed service providers and flagged those who were also parents – a good reminder that there may be more parents of young children involved than are realized.

Of course a large percentage of activities related to “Spreading the Word” involve parents, and this will be detailed in that section of the report. Further, as will be seen in the “Research” section of this report, substantial efforts have been made to engage parents in providing information related to availability, accessibility and gaps in services and this input has impacted planning and implementation functions.

Some examples of other creative parent participation strategies detailed in the Annual Reports include:

- “The Peer Mentors are a group of parents that are receiving training and are involved in community development and peer support work. They are active and involved in Early Years initiatives and issues and have a very strong voice in service delivery issues and design. They understand many of the issues and complexities of service delivery as they are service users. They volunteer with Success By 6® and earn tuition credits and child care support towards furthering their education. They are amazing!”;
- “With support from Success By 6® funds, the ECD Committee has endorsed the position of a community facilitator position that will develop and support an ECD Parent Advisory Committee”;
- “Children First recommended funding to train three parents as Parent Connectors to engage families, inform them about community supports and help them overcome barriers that might prevent them from accessing programs. Funding for this three year project has been provided by Success By 6® .”;
- “Neighbourhood Champions projects have brought ECD to the forefront in several communities. In one neighbourhood, the Neighbourhood Champion project has revitalized the Community Association.”

“On November 20th (National Child Day) we held a drawing contest to find out what was important to the children in our community. We received 197 submissions from children aged 3-12 years. The children were from Preschools, Child Care Centers, Headstart programs, and Elementary Schools.

The Swimming Pool was the number one favourite, followed by parks and spending time with Mom and Dad. The data was presented to Town Council and Make Children First worked with the community’s Affordable Recreation Committee to use the research. As a result we supported the Regional pool in offering grants to families with young children for swim lessons or swim passes.”

CF Coordinator

4.4 Findings Related to Participation of Aboriginal People

Membership lists submitted by 36 initiatives indicated that there are 101 Aboriginal people involved in 24 Steering Committees and/or sub committees.

In a review of 32 Annual Reports:

- 12 initiatives did not describe the level of Aboriginal involvement;
- 10 initiatives reported some challenges associated with gaining Aboriginal involvement;
- 9 initiatives reported that they are working to develop relationships.

A few coalitions reported on successful efforts to involve Aboriginal people in planning. Some examples:

- “The initiative and the School District are both working collaboratively with the Aboriginal community. This community is represented by the Métis Association and All Nations Aboriginal Council. The School District and the Aboriginal community will be signing their first Aboriginal Enhancement Agreement June 21, 2006. The Aboriginal community has been very involved in a Strengths Needs assessment and the development of the Enhancement agreement process. There have been two focus groups with the Aboriginal

community to discuss issues as they relate to early childhood development. Working with the Aboriginal community to develop a more structured plan for Aboriginal Early Childhood Development will be a goal for 2006-2007."

- "The Make Children First Initiative involves local First Nations communities in all stages of the planning and implementation of the Initiative. The Community Facilitator travels to outlying First Nations communities on a regular basis to engage service provider participation in the Coalition, to share information and resources about ECD and ECE issues, to promote programs, to attend meetings, visit health clinics, Head Start programs and schools, and to facilitate training opportunities."
- "The Aboriginal community participates in the initiative through involvement in ECD Community tables in all three areas (of the initiative) and all three Success By 6® Community Councils, as well as through Children First Coordinator participation in Aboriginal Council meetings and forums. There has been partnership with Aboriginal groups to hold children's health fairs and public forums. The Provincial Success By 6® Aboriginal Engagement Coordinator is supporting the Coordinators with developing strategies for dialogue and relationship building with our Aboriginal communities. A new Aboriginal Infant Development Working Group is being established."

To explore this issue more fully, respondents to the CF coordinators survey were asked to provide information on strategies that had been successful in involving the Aboriginal population. Seven coordinators described attitudes such as patience, persistence and a real desire to be inclusive, and ongoing contact with individuals and outreach to band headquarters as strategies that build trust and respect.

Additionally, some specific strategies mentioned by coordinators as having made a difference are:

- Providing cross-cultural learning opportunities and sensitivity training for service providers;
- Including Aboriginal traditions and practices in meetings, forums and events;
- Holding coalition meetings on Reserves;
- Working together to create a service Hub;
- Training Aboriginal people to deliver services locally;
- Hiring Aboriginal community development workers;
- Providing alternative ways to be involved: teleconferencing, rotating meetings in communities, providing funding for transportation and child care;
- Partnering with the Aboriginal Health Authority;
- Holding Fairs on Reserves;
- Developing and maintaining relationships with the Aboriginal Infant Development program;
- Creating Aboriginal subcommittees;
- Providing funding for projects;
- Assisting the Aboriginal group with access to other funding and providing letters of support;
- Sharing in-kind resources.

"Become an ally with Aboriginal People in addressing racism in your community. Learn about the history of colonization and the effects on aboriginal and non-aboriginal. Celebrate diversity. Follow Aboriginal leadership. Respect Aboriginal tradition and include in community events, meetings (e.g. Chiefs welcome to the territory)".

CF Coordinator

4.5 Findings Related to Participation of the Business Community

Twenty-five initiatives provided details of involvement of business and other non traditional partners in Children First activities. These are attached to this report as Appendix B, and include such areas of involvement as business and community groups sponsoring projects, municipal involvement in projects, and attendance by the business community at events.

4.6 Findings Related to Participation of Multi Cultural Communities

Seven initiatives provided some detail of their efforts to engage multi cultural communities. These included providing funding for a Temple Health Fair, translation of awareness raising materials, locating services for immigrant families in the hub, engaging Punjabi speaking community development workers, a subcommittee for Indo Canadian families, working with members of an Indo Canadian temple, outreach through a South Asian task group, administering the Nipissing screening tool in a variety of languages, and collaboration with a Multicultural Action Committee. Two survey respondents indicated that they had not attempted to engage this population, because it was very small in their communities.

4.7 Findings Related to Participation of Daycare/Preschool Providers

23 of 35 initiatives indicated that daycare/preschool providers were involved in their activities and 18 indicated that representatives from the Child Care Resource and Referral program were involved with steering committees.

In the Annual Reports, 12 initiatives provided some detail of their involvement with the daycare/preschool sector and it appears that some initiatives have been very successful in engaging this group, while others are still struggling to do so.

To find out more about what works well, the coordinator's survey asked respondents to outline strategies that were working in their initiatives. Reportedly successful strategies include:

- Forming sub committees devoted to childcare issues;
- Providing professional development opportunities, and building consultation into these;
- Working with local ECEBC Chapters;
- Holding meetings at times when childcare providers are able to attend;
- Surveys;
- E mail;
- Remaining aware of ECE issues;
- Providing subsidies and incentives;
- Contracting with an ECE provider to take the lead in a community project;
- Childcare appreciation events.

“Childcare issues, including space, staffing and funding have been a significant priority. We have worked collaboratively – planning, funding applications, staffing support and public awareness. As a result, a new daycare and preschool spaces are opening, staff have been recruited and child care centres are being placed in neighbourhoods where they are most needed. The school district has taken a leading role in providing space in many of its elementary schools.”
(Children First Coordinator)

4.8 Discussion

The involvement of Aboriginal people may be complicated by the diversity of Aboriginal communities within the province, emerging Aboriginal authorities and possibly some role confusion. The BC Early Childhood Development Action Plan identifies "*Aboriginal communities have the capacity to deliver coordinated culturally relevant ECD services*" as one of the desired outcomes. Aboriginal communities face at least the same level of challenges as does Children First in delivering coordinated, culturally relevant ECD services, and perhaps the role of Children First initiatives in facilitating this is unclear. What is clear is the CF objective of building capacity and developing systems of support for *all* children within specific geographic areas. In her 2005 Provincial Status Report, the PA suggested that "young children and families in Aboriginal communities were not benefiting enough from the initiative and that future strategies must be developed to address this inequity." A review of a number of documents produced by Aboriginal agencies and groups make three things very clear:

1. Services for Aboriginal people must be guided by Aboriginal priorities and values.
2. Full recognition of the strong diversity within First Nations communities is critical.
3. Wherever possible, Aboriginal communities should be involved in planning, operating and evaluating services.

A small population of immigrants and refugees in any given community might be subject to more isolation than in large urban centers. 98% of respondents to the coordinator's survey indicated that their initiatives had either reviewed the socioeconomic characteristics of their communities or were in the process of doing so and 93% indicated that they were using this information for planning. It could therefore be expected that planning to engage multicultural populations is taking place.

In research for this project, the statewide initiatives examined all had early childhood education as a key component. Examples include:

- Pilot projects in Colorado where initiatives began with a mandate to create a seamless child care and preschool system - As projects proceeded, it became apparent that to impact children during their pre-kindergarten years a more comprehensive approach was required which included areas such as family support and education, mental health and health care. The Colorado projects took the opposite approach to BC, beginning with a mandate to create a seamless child care and preschool system;
- Smart Start (N. Carolina) where legislation mandates that at least 70% of the partnership's funding be spent on child care or child care related services (at least 30% of this funding must be spent on child care subsidies). The remaining 30% must address other issues affecting children 0-5 such as family support and health care. Within these broad guidelines, partnerships make their own programmatic decisions.

Perhaps more can be learned from these models and through further research of BC initiatives that are beginning to integrate child care planning into community ECD plans.

As part of this review, a search was made for specific examples that might shed more light on strategies to involve the whole community. In “Bringing the Community Into the Process” a Smart Start evaluation study closely examined parent and business involvement in 24 local partnerships, and documented some rich findings. A synopsis of these findings is attached as Appendix C The evaluation concluded that although parents, business people and Smart Start Executive Directors strongly agreed that community involvement in the initiative was essential, meaningful community participation remained a challenge for the partnerships.

Researchers in this evaluation detailed 8 promising practices that parents and business people identified as instrumental in supporting their engagement and contributing to their satisfaction. In summary these included:

1. Making a strong commitment to community involvement through a conscious effort to facilitate and support it.
2. Increasing the number and diversity of community representatives. Through strength in numbers parents feel more confident and supported.
3. Recruitment of key community leaders as well as teaching low income parents skills and supporting them in leadership positions.
4. Offering a wide range of roles to parent and business participants; participant choice is more likely to ensure that they find interesting and satisfying roles.
5. Attend to the logistics as well as the relationships. Partners must be able to attend meetings and developing interpersonal relationships is key.
6. Establishing reciprocal relationships. Find out what parents and business people hope to gain; recognize their participation publicly, provide training, offering forums/information.
7. Define community participation broadly. Parents and business people can also work on committees, serve on parent advisory groups, attend forums and provide input through surveys and focus groups. The researchers cautioned that some options, such as parent advisory groups may continue to keep constituents isolated from each other and hinder consensus building.
8. Sustaining and building upon initial organizing efforts. During the planning and organizing stages, partnerships often establish mechanisms for gaining involvement. Both time and money must be devoted to ongoing outreach.

An international working group composed of delegates from six participating nations set out to identify and share the best examples of resident engagement in results-based work in their respective countries. As a result of their work, the working group has developed an international toolkit in which four principles related to resident engagement are identified:

- Resident engagement must be grounded in equality and justice and include the rich diversity that exists in each community;

- Resident engagement must be based on the respect for the wisdom, life experience and knowledge of the community;
- Resident engagement must build on the capacity for residents, families and communities to drive the agenda;
- Resident engagement must be based on shared decision-making; responsibility leads to better results at the community level (Center for the Study of Social Policy, 2004).

Some of the challenges in seeking full community involvement in CF may be due to the relative newness of the initiative. However it is important that the considerable efforts of the Children First initiatives in this area are sustained and supported. Although every community in the province is unique and what works in one community may not work in another, it may be that opportunities for initiatives that are more successful to dialogue with initiatives that are struggling would be useful, perhaps at a provincial meeting.

Research on how to involve parents, business and people who are marginalized demonstrates that long term commitment and investment is required. The principles for recruiting and sustaining the involvement of any of the target groups in this initiative are the same and depend upon truly believing that their involvement is necessary, providing them with meaningful opportunities for involvement and valuing and recognizing their contributions.

The formation of cross sectoral partnerships is integral to this work and as this section of report shows, diverse partnerships have been formed around the province. It is clear that investment in local decision making and capacity building is not a short term endeavor, nor can it succeed on a shoestring. The formation of cross sectoral partnerships at the community level is not a phase of systems change that will be "over", allowing the ECD system to go back to simply providing a menu of services. The work of community based partners should involve an ongoing cycle of planning, implementation and evaluation. Support by government at all levels for people in communities to respond to changing needs must be an ongoing and, in the short term at least, an incremental commitment.

4.9 Summary

Children First initiatives and other entities involved with or connected to the provision of ECD programs and services are working together. Some issues related to partnerships will emerge in other sections of this report.

It appears that there are a number of strategies that are enabling initiatives to work together with Aboriginal people and that capacity is growing over time. These strategies should be sustained and built upon, province wide.

While there are some very good examples of initiatives working together with parents to provide them with leadership opportunities, this is an area where growth could be expected. Parents are not specifically mentioned in the guidelines for this core activity and because they are the major stakeholders in the initiative, perhaps they should be.

The level of involvement of the business community (and other non traditional partners) is growing. It will take time and resources to develop capacity in this area and it may be that confusion between the roles of different ECD initiatives is impeding progress in some areas.

The Annual Reports did not provide enough detail of efforts to engage multicultural communities to create an overall picture. However in her 2005 report, the PA said that efforts to engage multicultural communities were becoming increasingly effective. This is an area that will require the ongoing attention of initiatives around the province.

It is clear that many Children First initiatives are working hard to involve the child care sector and that some of this work is beginning to bear fruit. In her 2005 report, the PA identified the challenges and barriers to developing a child care strategy that is integrated with the broader community planning being done by Children First initiatives. She pointed out that child care and early childhood development are inextricably linked and recommended that resources be made available to communities to specifically focus on child care planning and community development. This review supports the PA's recommendations.

Since the inception of Children First, a remarkable amount of work has been done to either enhance existing partnerships or form new ones. This work will need to be ongoing.

5.0 SPREADING THE WORD

5.1 Findings

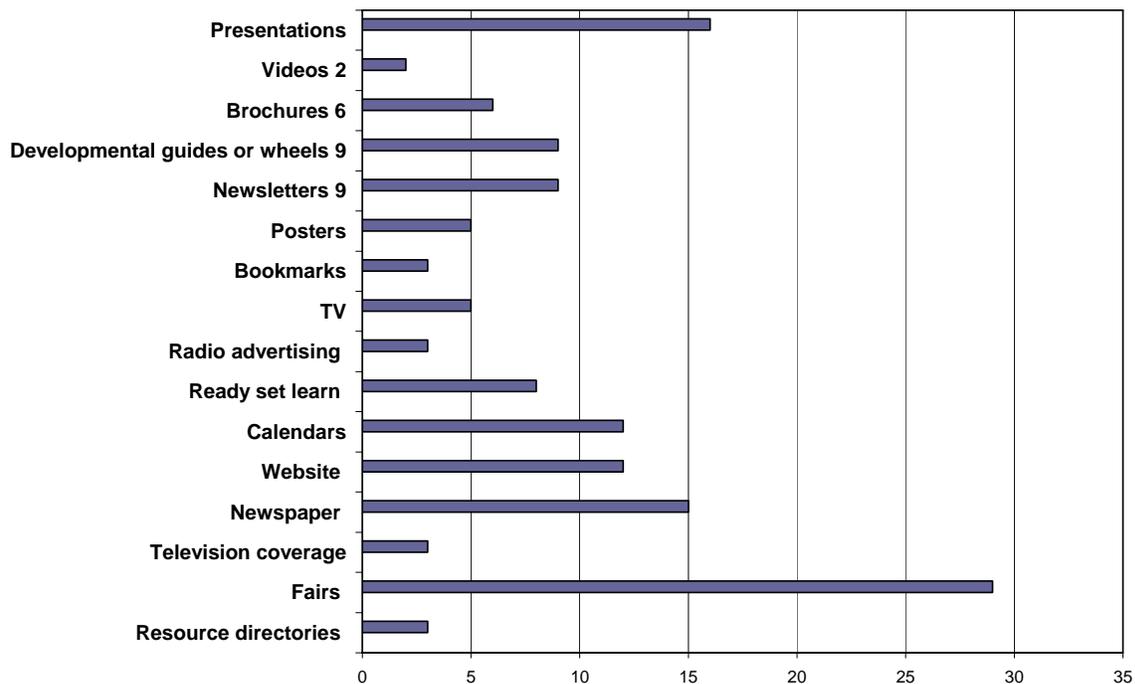
This core activity of the Children First initiative is expected to involve the following:

- Public awareness activities designed to increase the understanding of the importance of the early years;
- Community engagement and mobilization. A range of activities to involve community members in the support of young children and families;
- The development of a mechanism(s) for making information about the ECD services and supports in the community widely available. (e.g. brochures, websites).

These activities relate to all the objectives of Children First.

Information on this activity was gathered from the Children First Annual Reports. In these reports initiatives were asked to provide *examples* of their public awareness activities and community engagement and mobilization activity. What follows is a selective description of reported activities.

Awareness Raising Activity



Initiatives produced an imaginative variety of collaborative approaches in seeking to accomplish the three major goals described above, creating opportunities and drawing audiences which are well beyond traditional single purpose events. The observations in this section are based on a review of reported activities; training is discussed separately. More details culled from Annual Reports are contained in Appendix D. The following chart portrays the incidence of various types of activities reported at the local level.

Sixteen initiatives reported on presentations they had made to parents and other groups including: Parks and Recreation Commissions, Members of Parliament, Town Councils and administrators, Foster Parent groups, preschool providers, the Sikh community, MLA's, School Boards and administrators, Ministerial Associations, multicultural groups, Rotary, Kiwanis, Social Planning Committees, Chambers of Commerce, Kindergarten teachers, Punjabi community, Credit Unions and other business groups, Aboriginal service providers, Health Authorities, MCFD staff, RCMP, Fire Department, community groups.

The following activities moved beyond traditional efforts at raising awareness:

- A presentation to local government regarding "family friendly" amendments to the Official Community Plan; this type of formal linkage to community leadership was not widely seen;
- A seminar, "Seeing Our City Through the Eyes of a Child", which enabled the initiative to engage many new and non-traditional partners, such as realtors, planners, business people and lawyers.

Examining activities by initiative, from the perspective of partnerships and other cross sectoral activities, it is clear that the initiatives have been creative and intensive in devising ways to work with others to raise awareness:

- Most notably, partnerships or alliances were developed to deliver ambitious programs which impact community awareness well beyond the capacity of any single agency or initiative;
- Based on reports of actual events and collaboration, well organized systematic joint delivery of awareness related forums and events has real potential;
- A number of larger partnerships have creative, collaborative approaches to funding, to enable the awareness raising efforts;
- Reported partners include Public Health Nursing (in major and minor roles), School Districts, local government, community leaders and civic groups;
- Local business groups and arts institutions appear to have given strong backing to the initiatives and the related activities and events;

A number of initiatives documented their success with major events, forums and festivals. Others developed more narrowly focused programs, such as outreach and preconception awareness, but these occasions were also designed to draw parents into higher awareness of challenges they face, and services where various types of support is available

Training

Reported training activities were aimed at various groups. Most frequently reported was training or workshops for service providers alone, a mix of providers and parents, School District personnel, facilitators and others involved in special or pilot projects, caregivers and the community at large. Training, special forums, and joint initiatives were sometimes made possible by imaginative funding efforts. In one instance, highly engaged parents themselves organized a cross sectoral

workshop, inviting service providers to join in as a means of increasing knowledge about services in the community.

Some training events confined their focus to specific topics. For example, there were workshops on Infant Attachment, two-day diversity training, and bridging the gap between early learning and K readiness. Others aimed at broader issues, such as daycare, or bringing together parents, caregivers and service providers to focus on enhancing overall skills and expertise in supporting children. The apparent sustainability of a number of the joint activities reported is especially encouraging. Reports of training activities are contained in Appendix E.

5.2 Summary

The Annual Reports collectively represent a rich mix of efforts to spread the word about the importance of the early years. Many of these activities involve partnerships within the community.

The synergy achieved by these alliances is evident, and there exists the potential for many more partnerships. Progress in building such relationships will depend in part on the energy and focus of the players, rather than simple implementation of concepts used elsewhere in the system. Individual community initiatives can more readily succeed when they are able to attract community partners who are larger and more established than the initiatives themselves. Partnering is a common sense approach to overcoming inherent limitations attributable to size, funding, isolation and scarcity of human resources.

Some references to either regional or provincially managed awareness raising were made either in the survey or in Annual Reports. If different ECD initiatives could agree to one "brand" a certain amount of this would make sense. However this should not supplant community based efforts to involve more of the community in Children First.

6.0 RESEARCH

This core activity is expected to involve:

Community research activities designed to guide the planning of supports and services. Research information collected by the initiatives includes:

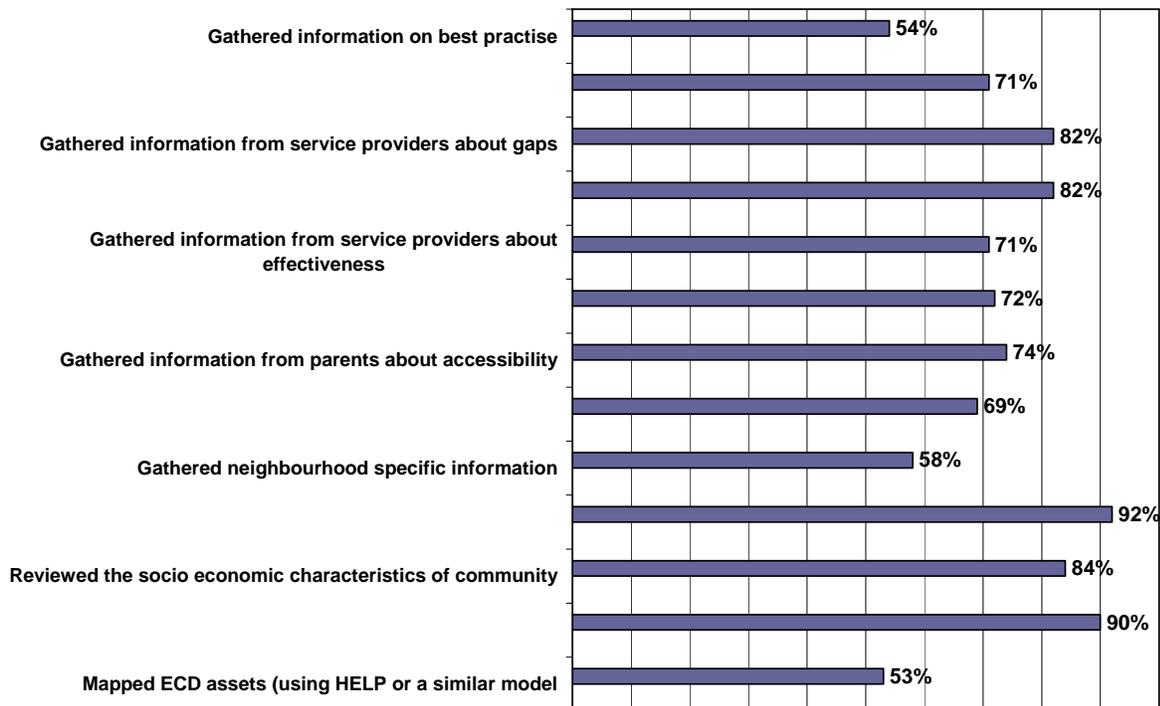
- A review of existing ECD assets and services;
- Socio-economic characteristics of the community;
- Information (EDI) on school readiness;
- Information from parents and service providers on the accessibility and effectiveness of existing services; and
- An overview of early childhood development “promising practices”.

These activities relate to the Children First goals of “Increased Community Capacity”; “Increased Effectiveness and Efficiency”; “Engaging ‘Hard to Reach’ Families”; and “Improving Outcomes for Children and Families”.

6.1 Findings Related to Research Conducted By Children First Initiatives

In the survey of coordinators, information was gathered from the coordinators about the level of research in a number of categories (N=39).

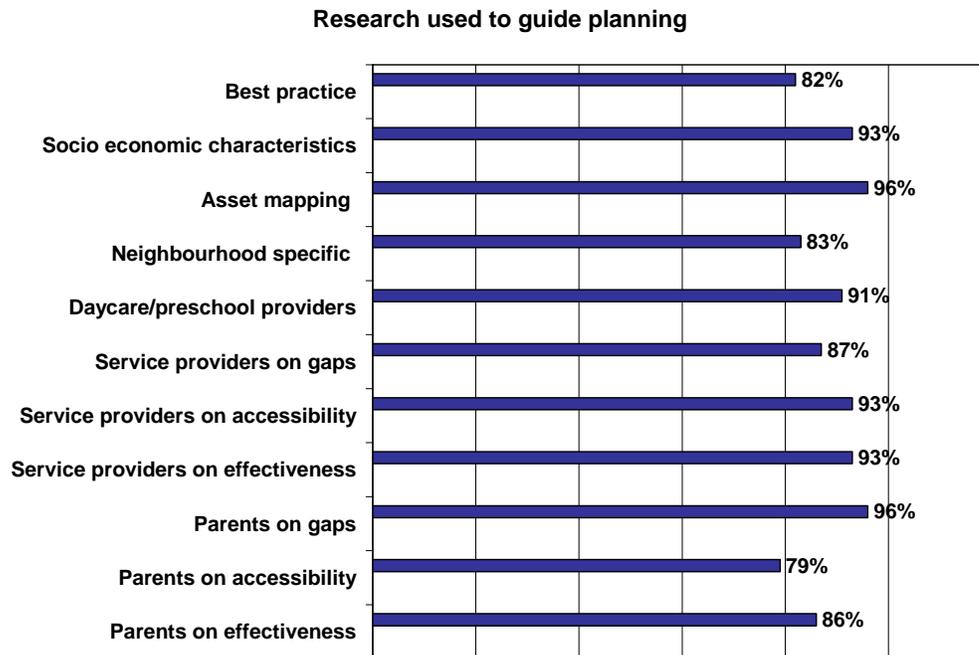
Community Based Research Activity



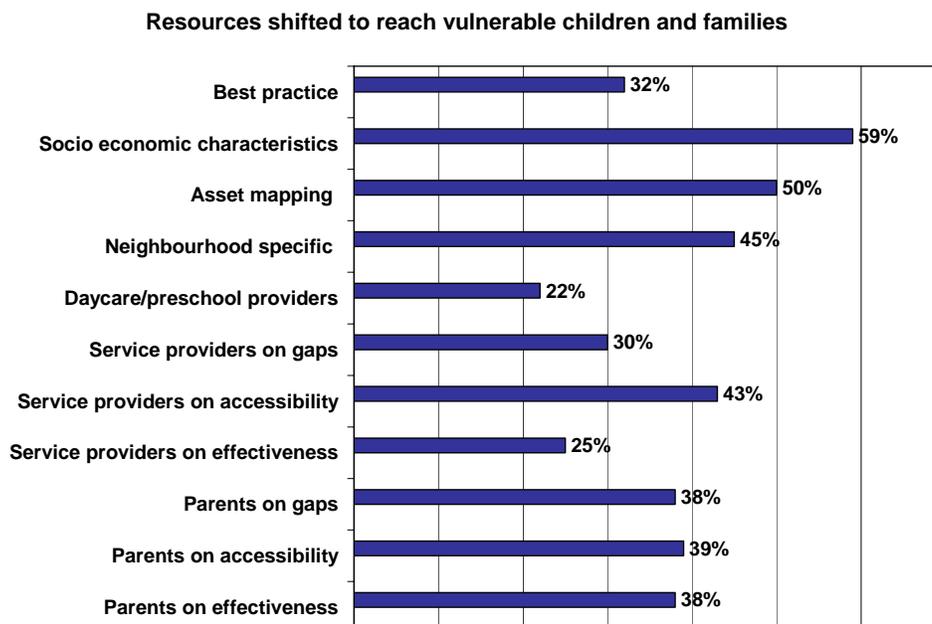
6.2 Findings Related to How the Research is Being Used

The following charts indicate the coordinator's responses to how the research is being used (N=29)

- 6.2.1 It appears that all areas of research are proving useful and it is encouraging to see that asset mapping, socio economic characteristics and research with parents are highly valued in the planning processes. This finding may be of interest to initiatives that are considering engaging in formalized asset mapping:

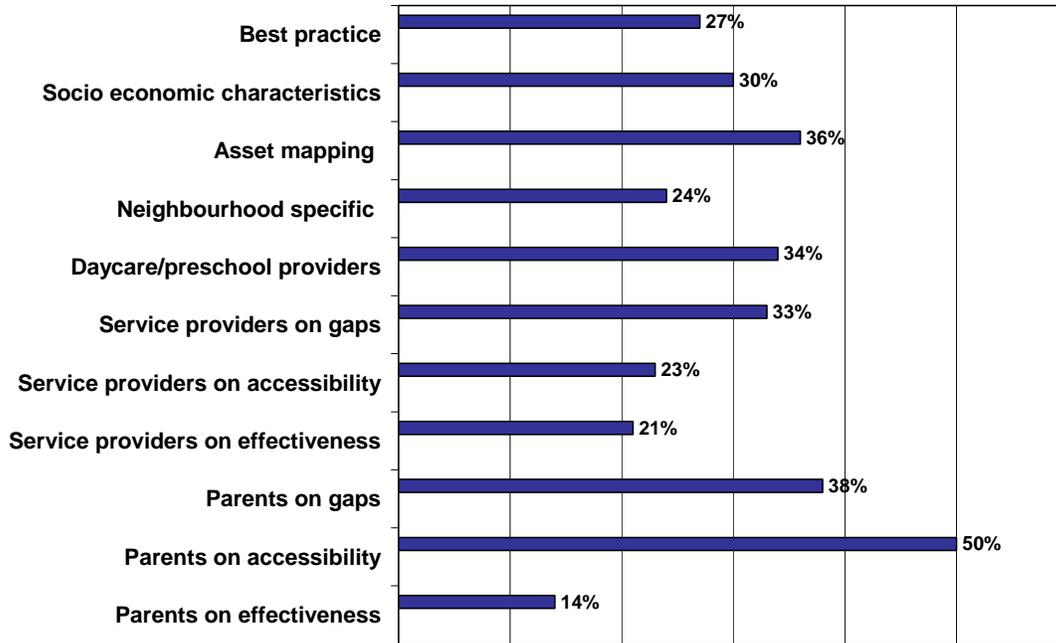


- 6.2.2 As could be expected, research on socio economic characteristics, asset mapping and neighbourhood specific research appears to be having the biggest impact on any shift of resources to reach vulnerable children and families:



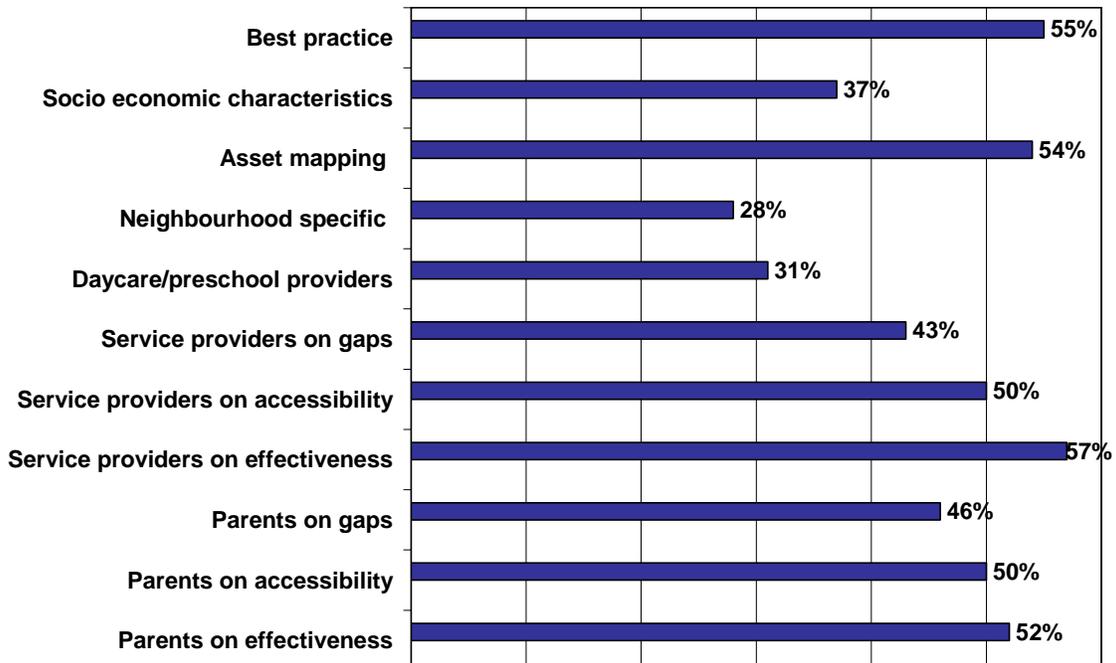
6.2.3 Positively, it appears that research with parents may be influencing efforts to identify and access new sources of funding:

New sources of funding found



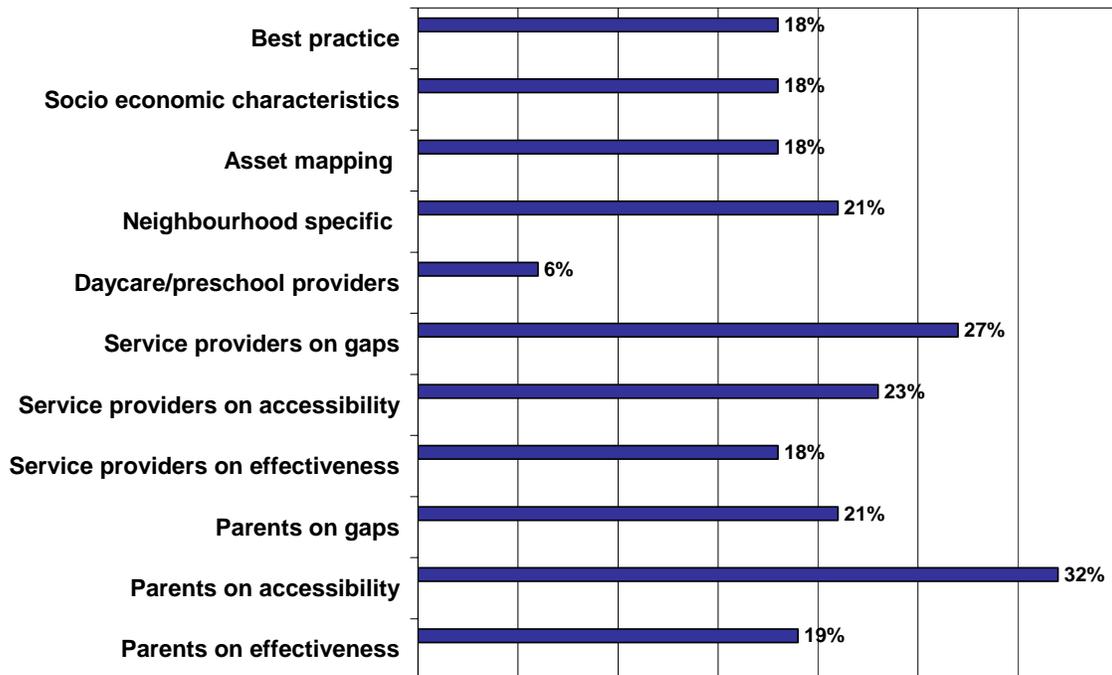
6.2.4 Research with service providers, best practice research and asset mapping appear to be providing the most useful functions here. More research would need to take place to determine the level of service integration taking place, but at the very least this data gives some indication that within these initiatives, people are working together to achieve better integration:

Services have become more integrated



6.2.5 Some services have been relocated as a result of research. Reportedly, information from parents related to issues of accessibility has been the most important factor, followed by information from service providers and neighbourhood specific research. The numbers may or may not be statistically significant; however this data could provide a baseline for future comparisons:

Some or all services have been relocated



6.2.6 How the Early Development Instrument (EDI) is Being Used

The EDI Impact Study - BC School Districts: Embracing Young Children and Their Families (Mort, J. 2004) researched participant’s views on the value they place on the EDI process, and documented projects that were underway as a result of EDI outcomes.

Research participants included Superintendents in 41 school districts. The researcher concluded that “...in general, school districts have begun to embrace a new role and responsibility by examining developmental indicator data at school entry, by planning interventions in response to the data, and by partnering with other agencies to serve the needs of young children and their families. While a number of school districts had already begun to move in this direction, the EDI process and the resulting numerical data provided to school districts have played a significant role in establishing the need and the confidence to move forward.”

33 school districts participated in a follow up survey *Does EDI make a Difference?* (Mort, J.2006). , 100% of respondents indicated that the EDI data was valued and used for projects such as literacy play centres, speech language services, to determine program and professional development needs, for presentations to community, to justify additional funds, to support aboriginal services, for school district long term planning, to support other data sources, to initiate new discussions and new partners, and to formulate new school goals.

In the coordinators survey, 92% of initiatives indicated that they had reviewed the results of local EDI studies, and the remainder were in the process of doing so. With school district representation at every Children First table one could extrapolate that this is an area where school districts and CF initiatives are working together to make use of these research findings.

6.3 Summary

Most importantly, the majority of CF initiatives appear to be using their research for planning purposes. In addition, as a result of their research work and across the spectrum of research activities:

- An average of 39% of initiatives reported that they have shifted resources to reach vulnerable families;
- An average of 29% of initiatives have found new funding;
- An average of 41% report that services have become more integrated;
- An average of 19% reported that some or all services have been relocated.

Future efforts to track how research is impacting change using similar (or better) methods could serve to show change over time.

7.0 PLANNING

This core activity of a Children First initiative is expected to involve the following:

- The development of a strategic plan for the initiative, articulating goals, objectives, activities and intended outcomes;
- The joint creation (with all other coalition members) of a community ECD plan – identifying local needs and priorities for young children and their families along with strategies to address those priorities;
- The development of innovative ways to use and/or link existing ECD resources and services more effectively and efficiently;
- A focused review and plan to enhance early identification and screening activities in the community;
- Strategies to engage “hard to reach” families in the community, including the identification and response to the barriers that limit access to services.

These activities relate to all the Children First goals: “Increased Community Capacity”; “Increased Effectiveness and Efficiency”; “Engaging ‘Hard to Reach’ Families”; and “Improving Outcomes for Children and Families”; and “Increased Opportunities for Early Identification and Screening”.

7.1 Findings Related to Strategic Planning

In order to assess both (a) how many initiatives had developed strategic plans, and (b) the planning processes used, Children First initiative coordinators were requested to provide copies of their strategic plans:

- 17 initiatives submitted what were identified as strategic plans;
- 2 initiatives submitted what were identified as Action Plans;
- 3 initiatives submitted was were identified as Work plans;
- 3 initiatives submitted logic models;
- 6 initiatives indicated that they are presently working on the development of a strategic plan;
- 2 initiatives indicated that they have not yet embarked on strategic planning.

The following are commonly used steps in creating strategic plans:

1. Initiating and agreeing upon a strategic planning process.
2. Clarifying organizational mission and mandates.

3. Assessing the external environment - threats and opportunities.
4. Assessing the internal environment - strengths and weaknesses.
5. Identifying the strategic issues facing an organization.
6. Formulating strategies to manage the issues.
7. Establishing an effective organizational vision for the future.

The 25 plans were examined for the foregoing steps. Where initiatives had included logic models, plans were examined for the commonly used categories in logic models: Inputs; Outputs; Outcomes; Activities; Success Indicators; Measurement administration/tools.

Of the 25 plans examined (Charted in Appendix F):

- 9 documented an organizational mandate;
- 10 documented vision and values or guiding principles;
- 3 assessed threats and opportunities;
- 4 assessed strengths and weaknesses;
- 10 identified strategic issues;
- 12 identified strategies to manage the issues;
- 9 identified an organizational vision for the future.

In addition, 6 of these plans identified partners and resources, 3 detailed timeframes, 11 detailed outcomes and 9 detailed activities.

Three of the plans were in logic model format, and 7 included logic models along with strategic or action plans. None of the logic models included all the commonly used elements as described above. Some used other elements such as goals, strategies, objectives, timelines, targets and who was responsible for the various activities.

In most instances the variety of methods employed in individual plans make it impossible to assess whether or not the plans were developed in a logical way. It is also not possible to assess if any plan is the "right" plan for a particular community and this was not an objective of this review.

It should be noted that:

- While a number of plans did not articulate Mission, Vision and Guiding Principles, in many instances, Terms of Reference include these. (see Implementation Evaluation report);
- Assessments of strengths and weaknesses (of the initiatives) and other commonly used planning components may have been included in other planning documents that were not examined for this review;
- Initiatives were not asked to provide marketing/communication plans (although some did provide these).

At the provincial level, Children First clearly spells out its overall goals, and it is reasonable to expect that the individual initiatives would include or incorporate these goals in some fashion. In fact the majority of these plans includes strategies and/or activities related to the Children First goals, as outlined in the guidelines and therefore to the core activities as well:

- 20 of the plans have strategies related to development of integrated, community based models for services to young children and their families;
- 22 have strategies related to building relationships with all relevant providers and sectors;
- 20 have strategies related to utilizing current research;
- 21 have strategies related to involving communities, service providers, researchers and MCFD staff;
- 22 have strategies related to strengthening family capacity.

7.1.1 Discussion

Individual planning processes reflect unique elements, and each plan should be viewed as an expression of both local conditions and the creativity of each initiative. At the same time, the fact that so many planning elements are used by so many participants represents an opportunity for growth. Acceptance of common meanings of planning terms (strategic issues, strategic direction, goals, objectives, action plans, strategic plans, community ECD plans, etc.) would likely lead to improvements in planning processes, as well as the ability to take a more coherent look at the overall system.

In her 2004 report, the PA suggested that community coalitions should be required to demonstrate that their plans were consistent with provincially developed guidelines and standards of best practice before being vested with the authority to allocate ECD funds to meet the priorities identified within those plans. It appears that assessment of the appropriateness of plans is presently being made by CSMs at the local level, and this is appropriate. However the development of guidelines would likely be useful to the CSMs and could lead to a more consistent approach, as well as an ability to view the different elements of plans from a province-wide perspective. This could greatly enhance CF's effectiveness in informing provincial policy.

If initiatives could agree to using and documenting common steps in the strategic planning process, including documentation of who participated, it would help to illustrate that the plans are rational and do indeed flow from the grass roots in communities.

Whether or not strategic plans are used to create logic models, they should be used as "high level" plans and translated into some sort of operational or action plans. Priorities should be clearly identified at the community table, so that when funding opportunities arise, there is no doubt as to where money should be allocated. This is particularly important in initiatives where allocation responsibilities are handed off to sub committees.

Finally, with the disparity of funding around the province, some initiatives may not have the resources with which to gain expertise in the area of strategic/ operational planning. Technical support and adequate funding will resolve this.

7.2 Findings Related to Early Identification and Screening

25 Annual Reports showed evidence of planning and implementation of screening procedures. A wide variety of strategies are being employed to try to reach as many children as possible. Screening fairs are being held and screening is being conducted at a variety of events. In one initiative Public Health nurses are distributing Nipissing tools through newborn home visits and at all subsequent immunization visits. In another initiative, the Nipissing tool is available in five languages. Another initiative has a mobile screening unit that goes to remote communities. Yet another has created Mini Connection Kits that include the Nipissing tool, and two initiatives have committees with a specific focus on screening.

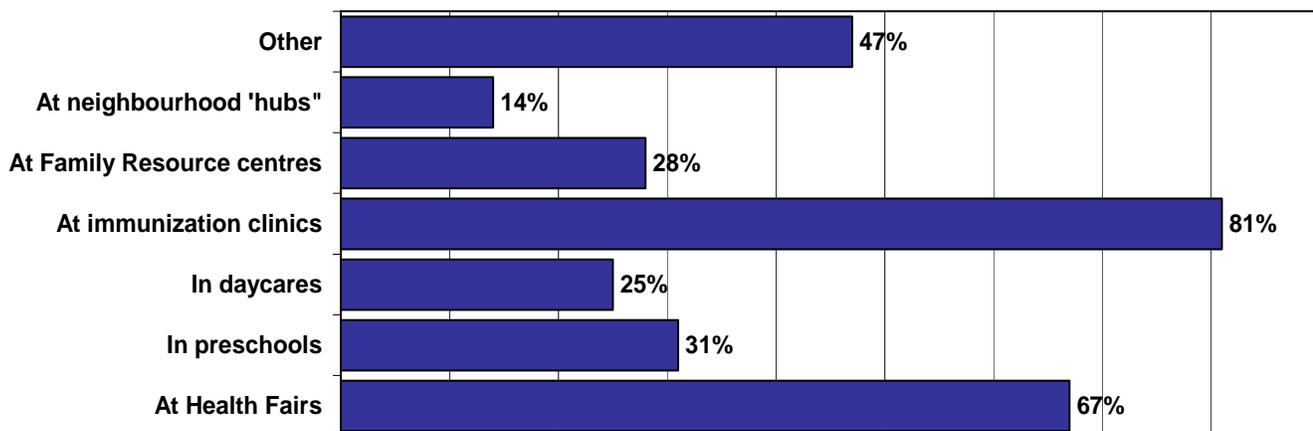
In the survey, coordinators were asked to report on what types of developmental screening was being conducted and how children were being screened:

- 55% of respondents (N=34) indicated that children are being screened using the Nipissing tool;
- 52.9% of respondents indicated that children are being screened using the ASQ.

There is likely some “cross over” in the above data – i.e. communities using both tools. Other tools in use include “Here We Come”; Geselle, and Autism screens. Two respondents indicated that the Nipissing tool is being used as a first level screen, with a follow up ASQ where indicated. Some respondents indicated that screening is viewed as the purview of Public Health and/or the Infant Development program.

Coordinators were also asked to report on where developmental screening is taking place:

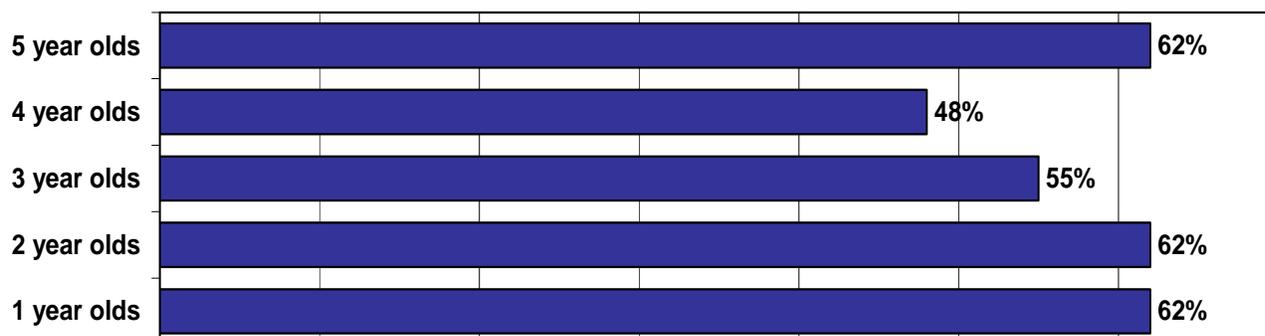
Where developmental screening is taking place (N=36)



The “Other” category included schools, kindergarten, Family Places, Family Resource Centres, Supported Child Development, Ready Set Learn, and Recreation Centres. One respondent indicated that Nipissing tools were available to participants in all early childhood programs (Mother Goose, family drop-ins, etc.).

Finally, coordinators were asked about the ages of children being screened:

Ages of children being screened (N=29)



In addition, one respondent indicated that children were being screened at 2.5 years; another indicated that screening activity was focused on providing screening opportunities for parents (cardiovascular, diabetes).

7.2.1 Discussion

The variety of venues where screening is taking place indicates that screening activity is likely on the rise, or at the very least that initiatives are directing their attention to this function.

Research suggests that developmental screening should be in integral part of all programs for children from birth to three years of age; that it should happen at least three times during the first year, twice during the second year and annually thereafter using valid tools and that it should include follow-up and parent involvement (Yarbrough, K, 2001).

Of course, when more children are screened, more children are likely to be identified as being in need of services and the reviewer is aware of at least one instance where there was a reluctance to engage in any more screening than was already taking place along with immunizations because this would lead to a demand for service that could not be met. This should not be a deterrent. If waiting lists develop in communities as a result of screening, the planning tables can take this into account when identifying priorities.

7.3 Findings Related to the Involvement of Vulnerable Families

Six Annual Reports detailed planning activity related to reaching out to vulnerable families. These included identifying and responding to barriers, delivering printed materials to thrift shops, laundromats, food banks, coffee shops, etc; developing a targeted set of services to reach those who have been “falling through the cracks”, and engaging peer mentors. One initiative invited a “Mom’s” group to participate in running the ECD Committee, and they have done so. The mothers were

“Having a person known to many struggling families through the local food bank programs work one on one with them to help them see the value of ECD programs and services has been working well. She connects to parents through referrals from the food banks and other programs and will work with parents and play with their children one on one, attend programs with them and provide transportation etc. until the families are connected and are comfortable going to programs and accessing services.”
CF Coordinator

supported to connect with a Mom's network in another community and in accessing a recreation supervisor for gym times for their children. The Children First initiative provided advertising for the Mom's Network and a year end report.

Coordinators were asked about successful strategies for involving vulnerable families. Responses from 15 coordinators included:

- Having the local Friendship Centre as a key partner of the initiative which enabled contact with vulnerable families;
- Providing a snack and child care for parent education is important;
- Peer mentors assist with bringing families with less resources to the Family Centres;
- Developing a Family Place drop-in at the food bank;
- Outreach programs in targeted neighbourhoods and elementary schools and free community fairs and festivals with food and entertainment;
- Free bus passes; central location for meetings; fun in the sun packages for vulnerable families;
- Holding forums in areas where vulnerable families resided;
- Concentrating on going to where people are;
- Health Fairs and screening clinics on a Reserve;
- Honorariums, funds for child care costs, including a meal or a snack;
- Community arts initiative;
- A community bus that brings in people who live in outlying trailer courts to services;
- Offering universal programming and services in a non-stigmatized environment;
- Free programs so that all families can participate equally.

7.3.1 Discussion

These successful strategies involving such things as outreach to places where vulnerable families can be found, addressing transportation issues, and partnering with agencies that are in close contact with target groups, are worth noting. In her 2005 Status report, the PA included a list of the ten most common barriers or reasons why families may not access services. These need not be repeated here, but should be taken into account when planning how to reach out to vulnerable families.

A variety of approaches are required to reach out to families where children may be at risk. In one study of strategies to reach out to families whose children were not participating in regulated child care (Taylor et al, 2001) the most effective of these were (in order of effectiveness):

- Reaching parents at community fairs;
- Conducting focus groups in specific communities or with special populations, such as families in public housing;

“Our Community Bus Project is an example of a great community service that links “hard to reach” families with ECD and other services. This free bus service runs 2 days per week. Tickets cost \$2.00. The service connects the outlying trailer courts and subdivisions with the community’s main service areas. This project was funded by Success by Six, Union of BC Municipalities, Community Health Promotion Fund, UBCM Seniors Housing and Support Program and the District.”

(Children F Coordinator)

- Interviewing community/neighbourhood leaders and using them to collect information from parents of young children;
- Surveying parents of children entering kindergarten, to identify younger children in the family;
- Home visiting or door to door canvassing such as visiting the family of every newborn or visiting everyone in a particular neighbourhood.

According to this study the most effective tool was holding Fairs, and this was the most commonly used approach to raising awareness reported by the Children First initiatives.

Making contact with vulnerable families is one thing. Actually recruiting them into programs is another. Families who are at high risk tend to shun prevention programs such as parenting education and often need assistance with accessing basic needs such as food, transportation and suitable housing before committing to prevention programs.

A comprehensive research project on recruiting families into prevention programs showed that the strongest positive influences on parents' inclination to enroll have been the perceived benefits of participation and the parents' history of utilization of other resources. The most significant barriers to enrolment were related to program time demands, scheduling conflicts and concerns about privacy. From experiences in engaging low income inner-city families into a multi-session prevention program, the researchers found that "the fundamental component for successful recruitment is communicating in specific terms how the program can meet the unique needs of each family. This is done in two ways. First staff demonstrate a commitment to helping families overcome barriers to attendance, such as child care needs, transportation and time demands and second, it is made clear that the intervention will be tailored to individual risk factors and strengths." (Hogue et al, 1999).

7.4 Summary

While planning processes appear to be resulting in strategies related to the goals of Children First, the variety of methods used made it difficult to assess whether or not the plans had been developed in a logical way or with full participation of stakeholders. Common planning processes would lead to more clarity.

It is apparent that a large percentage of initiatives are aware of the importance of screening and are working to increase the number of children being screened. The data does not show what percentage of children are being screened in any given community or the reach to the most vulnerable and initiatives may want to consider the option of developing systems to do so. However screening is taking place in a variety of settings and it can be expected that the level will increase in time and with the allocation of appropriate resources.

It is encouraging to see the efforts that are being made around the province to reach vulnerable families and hoped that successes will be built upon over time.

8.0 ADVOCACY

This Children First core function is expected to involve activities to further identify community priorities for young children and families.

This activity relates to the Children First goals of “Increased Community Capacity and “Improving Outcomes for Children and Families”.

8.1 Findings

In the Annual Reports, initiatives made mention of making presentations to Members of Parliament, MLA's, Town Councils, Parks and Recreation Commissions, Health Authorities, etc. Further, advocacy related to early childhood priorities is undoubtedly taking place in structured ways, such as through First Call and more informally at provincial meetings and wherever stakeholders have access to those with decision making authority.

It was difficult to separate out advocacy from public awareness in the review of the Annual Reports, so in some cases findings on activity that could be ascribed to advocacy efforts may be included in the “Spreading the Word” section.

8.1.1 Discussion

In attempt to find out the role that advocacy plays in other somewhat similar initiatives, the reviewer went back to the US examples researched for an earlier section of this report and found that these communities had clarified various advocacy roles:

- In the North Carolina Smart Start initiatives, local partnerships contribute regularly to state-level advocacy to ensure growth and sustainability. Partnerships operate local networks of advocates that continually talk to state legislators to inform them about what services are essential and why funding must continue.
- In the Colorado initiative, advocacy is viewed as an area of “role ambiguity” for the pilots because of funding streams that include federal monies. Currently they are addressing this issue by making a distinction between educating local legislative representatives about the need for a focus on childcare and actual lobbying for legislation.
- In Vermont, where the Regional Councils are the local level bodies, it is expected that these councils will provide an opportunity to communicate directly with high-level state administrators (and at least two legislators) who have the authority to make important policy and funding changes.
- In Minnesota Ready 4K, a nonpartisan statewide organization that was formed to raise awareness and advocate for policy changes that would make children 0-5 a top priority, Ready 4K works with the early childhood coalitions to build public awareness and a groundswell of support and participation in state-level early childhood advocacy.

Perhaps there are conversations that are waiting for their time here in BC; conversations amongst community tables about how they see their role in advocacy and what form that might take; conversations between Children First coordinators about a collective role; and conversations between Children First representatives, CSMs, Regional Consultants and the Provincial ECD Team about the most appropriate channels and ways in which community voices can be heard at the decision making levels across Ministries.

8.2 Summary

While it appears that many initiatives are playing an advocacy role in their communities, discussion of what that role should be at the local, regional and provincial levels would lead to more clarity and perhaps an increased ability to advocate effectively. The US models described in the foregoing section could provide a basis for discussion.

9.0 ALLOCATION

This Children First core activity is expected to involve the following:

- The development of a process for allocating funds to locally identified priorities and the commitment of coalition members to honouring that process;
- Allocation of available funds to meet identified priorities. This may include both funds available within the initiative budget and those from other funding sources (e.g. School District, MCFD).

These activities relate to the Children First goals of "Increased Community Capacity"; and "Improving Outcomes for Children and Families".

9.1 Findings

1. Either Terms of Reference or Annual Reports for 25 initiatives showed that 63% of these are making decisions about funding allocations and the remainder are making funding recommendations to funders.
2. The Terms of Reference for steering committees that were examined indicate that decisions are being made by consensus, or in a few cases by an agreed upon voting system, when consensus fails. In addition, 88% of initiatives included decision making principles in their Terms of Reference.
3. The results of the coordinator's survey indicate that research findings are impacting allocation decisions.
4. An attempt was made to find out just how much of the Children First funding was allocated to community capacity building in the areas of staffing and community development activity and how much was spent on service delivery. 26 initiatives responded to a request for information. The results of this inquiry are unclear, and this is mainly due to flaws in how the request was worded, or because funding had been blended with other sources, such as Success By 6®, Understanding the Early Years or Building Blocks. However, it is clear that three initiatives are using the major part of their Children First dollars for service delivery, four initiatives are using up to 50% of their funding for service delivery related to increasing community capacity and the remainder are using Children First funding for increasing community capacity.
5. It appears that some initiatives continue to use competitive bidding processes for awarding new contracts for services and at least one or two steering committees have handed off decision making about funding decisions to committees that are viewed as free from a conflict of interest in a bidding process, in that they will not be recipients of contracts. The extent to which this is taking place was not made clear in this review. While it seems that some good decisions are being made relative to funding priorities identified in community plans, this way of doing business at the community tables may contribute to ongoing "turf wars", as agencies struggle for survival.

9.1.1 Discussion

There are many layers of complexity involved in resolving issues related to the allocation of funding by community tables, however the following is offered for reflection and discussion:

What if:

- Community agencies could come to the ECD tables, putting the considerations of agency growth and existing services aside, to design a continuum of both universal and targeted ECD services?
- These same agencies were to continue to build trust to the point where they could agree that each of them would somehow survive in some form within that continuum (at least until full agreement was reached that another course of action made sense), either because of their level of expertise in a particular area or their willingness to develop that expertise?
- Community planning tables included enough people who are actually affected by the system (parents) that the turf issues became secondary?

These questions and observations are not meant to discredit the obviously sincere efforts that are being made to make decisions about allocation of funds, but rather to provide food for thought for those who need it as they consider next steps in the capacity building/service integration process.

The three initiatives that have allocated the majority of CF funds to service delivery are reportedly also engaged in community based planning and capacity building. The extent to which this is taking place was not assessed. The Children First guidelines provide flexibility to allocate funds to support service delivery priorities identified in community planning processes and two of these initiatives indicated that the necessary planning and development work had already been done when Children First Funding became available and that they were ready to move on to implementation. This may have led to some unintended consequences related to expectations on the part of other initiatives; i.e. that at some point *their* planning work would be done too and they could then reallocate community development funding to service delivery. As services become more integrated and systems more refined, some initiatives may need fewer resources for capacity building and planning, or resources may be found elsewhere to do this work. However, the work of building and maintaining community ownership involves an ongoing cycle of planning, implementation and evaluation and it should not be expected that this is a phase that will end, unless the "community driven" approach is abandoned.

With respect to budgets: If it is deemed important that a province wide overview of how Children First funding is being expended, perhaps a common template could be implemented. The BC CAPC program financial reporting templates could be considered as a model.

9.2 Summary

The findings show that initiatives are working together with locally based MCFD staff to identify and address funding priorities and that many of them have democratic decision making principles included in their Terms of Reference.

Some initiatives are using competitive bidding processes for the awarding of contracts to address service delivery priorities.

Some initiatives are using all Children First funds for service delivery and this may be leading to some confusion within the system.

The development of financial reporting templates would enable the province to create an overall picture of how Children First funds are being utilized.

10.0 EVALUATION

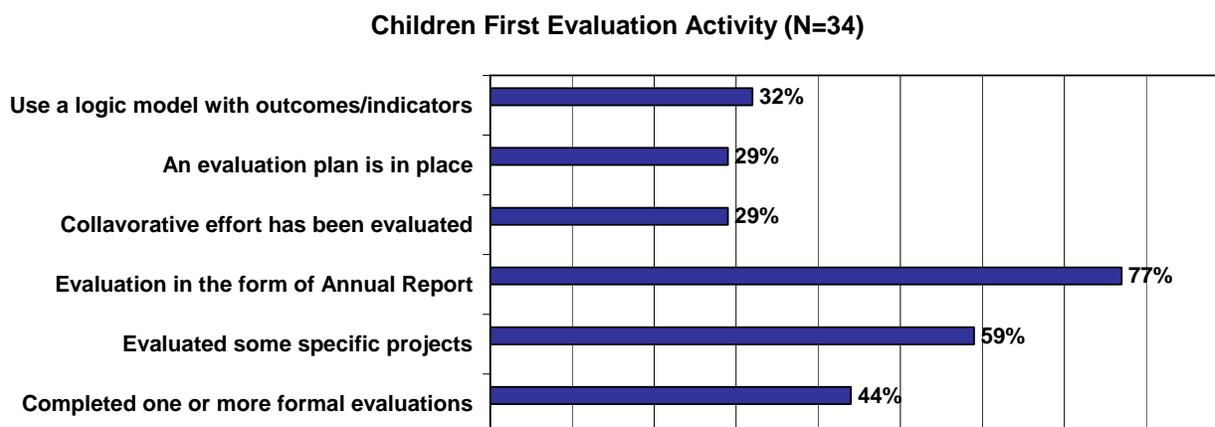
This Children First core activity is expected to include the following:

- Evaluation of the achievement of the provincial objectives of the initiative;
- Monitoring of local child development outcomes.

These activities relate to the Children First goals of: "Increased Community Capacity"; "Increased Effectiveness and Efficiency" and "Improving Outcomes for Children and Families".

10.1 Findings

Children First coordinators were asked about their evaluation activity and it appears that the capacity to do evaluation is being developed around the province. The following chart demonstrates the current level of evaluation activity:



1. Eight more initiatives indicated that they were either in the process of performing an evaluation or planning to do so.
2. 96% of initiatives reporting that they had completed an evaluation indicated that their evaluation results had been used to improve their initiatives.
3. Three initiatives mentioned that a formal evaluation had been performed by an external evaluator. One of these found this very helpful in that the evaluator had worked with the initiative to develop evaluation tools that could be used in an ongoing way. Another reported that the experience was not successful in that they felt that the evaluator did not achieve a high enough level of understanding to reflect what was really happening in the initiative. The third reported that the external evaluator had recommended that the initiative develop internal capacity to monitor in an ongoing fashion, and that a system for doing so has been created.
4. Three initiatives noted that they did not have the resources to do evaluation – time or funding and a lack of expertise.
5. 29% of initiatives have evaluated their collaborative process.

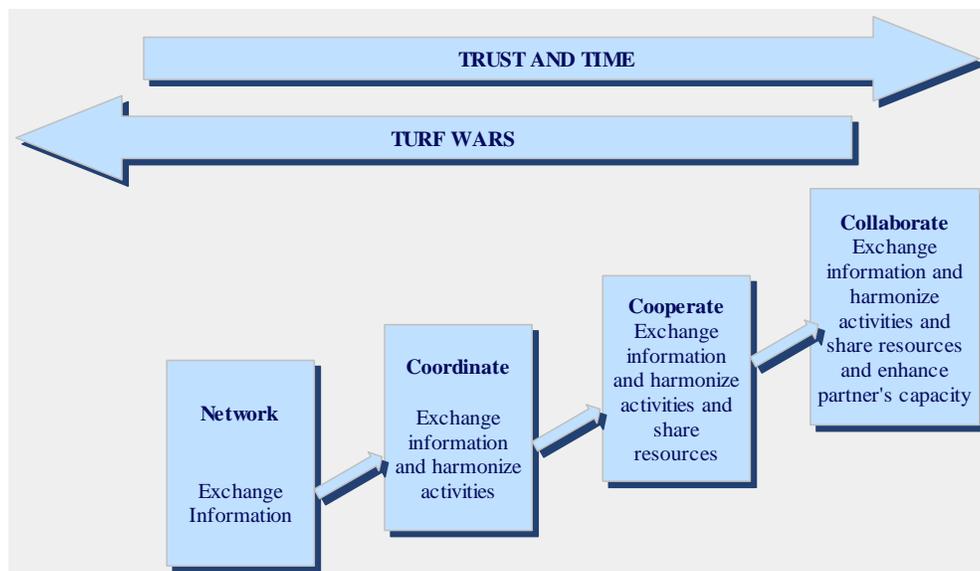
10.1.1 Discussion

At this time, the main reporting requirement of Children First is the submission of an Annual Status Report, in which the initiatives are expected to provide specific background on structure along with examples of how they are addressing the core activities of the initiative. The idea of providing some examples is sensible in that the status reports can be kept to a few pages and still provide the PA with an overview of progress and some assurance that initiatives are indeed focusing upon the core activities. The Status Reports may also be useful to the initiatives themselves, particularly those that do not have the resources to perform evaluation, in that they provide an opportunity to focus on all the good work that has been done in the previous year.

The experience of pulling information related to whether activities were responding to the core components for this review from the Annual Status Reports did allow the reviewer to demonstrate that the initiatives were for the most part doing so. However it did not afford the opportunity to provide a comprehensive process overview. Out of concern that initiatives were actually performing functions that were not mentioned in the status reports, the follow-up survey was conducted and this did in fact reveal a much higher level of activity. Perhaps some of the information reported through the Annual Reports could be collected through the use of a similar on-line survey performed annually, using as few open ended questions as possible. This could provide a way of "rolling up" results of activity related to *process* fairly efficiently.

It was interesting to note that 29% of initiatives have evaluated their collaborative process. Many of the initiatives are fairly new and still in the process of recruiting "collaborators", however in view of the fact that collaboration is key to the initiative, an increase in this type of evaluation would be appropriate.

Collaboration involves a change in "business as usual". Over time, partnerships could be expected to move from networking to coordinating to cooperating and finally to collaborating which should then logically lead to service integration:



Based on concepts from A.T. Himmelman "Collaboration for a Change: Definitions, Models, Roles and a Collaboration Process Guide" and a tool developed by Lancaster Community Health Plan.

There are existing tools that could be used by the initiatives for ongoing measurement of the collaborative process and it might be worth consideration of the use of a common tool. This would allow initiatives to measure progress over time, could help to identify promising practices and would allow for some measurement of how Children First is progressing in this area on a provincial basis.

With respect to outcomes measurement, an examination of Children First evaluation reports was not within the scope of this review, so no comment can be made on the level to which this is being done, or how effectively. Some of the logic models that were either attached to strategic plans or that substituted for strategic plans identified outcomes and indicators and two referred to measurement tools. It appears that this is an area where capacity could be increased, with some support.

Over the past few months, the PA has been working on a logic model that could be used system wide by Children First. The model pre-supposes long and short/intermediate term outcomes, modeled on those suggested by CAPC (Community Action Program for Children) and Success By 6®. Should agreement be reached on using this model, measurement tools will be required. At this time, the PA is meeting with the Success By 6® Evaluation Consultant and the CAPC Evaluation Consultant, to see if a common logic model can be agreed upon. This would be a real step forward towards integration of the evaluation of similar programs in the ECD realm – at least in the area of community capacity building. This would reduce the amount of reporting presently required by Children First and other initiatives and could provide an enhanced ability to evaluate progress systems wide.

A common system need not (and should not) prevent initiatives from continuing to perform other types of evaluation. The evaluation of actual programs and services within the ECD system is critical to building knowledge of which interventions actually make a difference. Through the EDI, we now have the ability to see change over time in children's development. It is important to determine what interventions may be contributing to these changes.

Clearly the development of an evaluation system for Children First should be a priority and should build on the work already done in communities and by the PA. For this to happen, three things will have to be established:

- Agreement at all levels of Children First (local, regional and provincial) upon a shared set of outcomes and indicators and the use of a common logic model;
- Financial and professional support - programs that have moved ahead in evaluation work allocate at least 10% of their budgets to evaluation support;
- The development of a system for capturing, synthesizing and reporting outputs and outcomes.

10.2 Summary

Children First initiatives are engaged in various forms of evaluation so it is likely that capacity is being built in this area.

Some form of ongoing evaluation of collaborative efforts by initiatives will likely lead to an improved ability to work together. The use of a common tool would enable the Provincial ECD Team to assess province wide progress.

The development of a commonly used evaluation system will lead to the ability to assess progress towards outcomes within initiatives and provincially. Training and support will be required to implement and maintain a provincial evaluation system for Children First.

11.0 CONCLUSION

This cluster evaluation of Children First has been informative and challenging. It is clear that the initiative is making strides in mobilizing communities around the needs of young children and families and the diversity of involvement around the province is remarkable.

The Cluster Evaluation provides a basis for discussion amongst funders and community initiatives about how the system can be improved and move to a new level, as well as a baseline for future evaluation efforts.

The reviewer gratefully acknowledges the support and cooperation of the many Children First coordinators, regional and community MCFD staff, the PA and the Provincial ECD Team who participated in and supported this work.

Appendix A
Children First Initiatives in 2005-2006

REGION	Community
North	Prince George, Terrace, Bulkley Valley
Interior	Central Okanagan, South Okanagan, North Okanagan (regional coordination), Vernon area, Sicamous, Salmon Arm, Revelstoke, Enderby, Golden, 100 Mile House, Williams Lake, Ashcroft/Cache Creek, Lillooet, North Thompson, East Kootenay, West Kootenay, Boundary
Vancouver/Coastal	Richmond, Vancouver, Sea to Sky
Fraser	Hope, Aggasiz Harrison, Chilliwack, Abbotsford, Mission, Langley, Delta, Surrey White Rock, Ridge-Meadows, Tri-Cities, New Westminster, Burnaby
Vancouver Island	South Island, Cowichan Valley, Nanaimo, Parksville/Qualicum, Port Alberni, Westcoast. North Island: Comox Valley, Campbell River, Mount Waddington

Appendix B

CF Participation of the Business Community and other non traditional partners

- Organization of a seminar, "Seeing Our City Through the Eyes of a Child", which engaged ECD coalitions and realtors, planners, business people, lawyers and other business people.
- The Rotary Club prepared a pancake breakfast for all the families to help celebrate Family Literacy Day
- Networking among the Royal Canadian Legion, library, public health and Women's Institute established the Books for Babies program which provides books for every newborn in the community
- The City has become a partner in several of our projects and continue to hear our requests to work together. To date, the City has provided staff time in the planning and installation of the playground equipment.
- The ECD Committee wrote a letter to the City describing the need for a downtown washroom during the winter months indicated by families in our initial strategic planning survey. City Council voted to install a change table and keep the washroom open at a cost to the City of \$4500 for the year.
- The Community Foundation continues to publicize its role in administrative support of the Children First and Success By 6® initiatives. This partnership was proudly noted at the Foundation's Annual Celebration and Awards Evening as well as in their Report to the Community newspaper that goes to all residents of the community.
- Partnered with United Way and University with Making Cities Livable conference
- School of Nursing is planning to take on community screening fairs for children under 6 as part of their Community Development curriculum
- Partnership with CURA (Community University Research Alliance) and School of Early Childhood Education for our Community Survey
- Partnership with the City to provide free meeting and workshop space at various venues throughout the city
- Early Literacy/ Family Fun Nights: In Partnership with SD and Local Rotary Clubs, local mall merchants and community businesses
- Youth leadership group is creating an ECD logo for this committee.
- Our partnership with the City's Parks, Recreation and Culture Department is particularly strong as they actively promote their vision of the city as the most livable community in Canada. We are beginning to explore the development of a Children's Charter and we continue to look at the asset development building model as a foundation for the work we do.
- Preconception awareness campaign: a partnership with Public Health Nursing, School District, Children First staff and Street Spirits Theatre Troupe, pre and post test surveys were completed on Grade 10 students regarding their level of knowledge of health before a pregnancy occurs.
- Expanded membership to include City, Parks and Rec. and the Northwest rep. for BC Optometrists Association
- Community Calendar: The Credit Union worked with the 0-6 Service Providers to design their bank calendar into a Make Children First Calendar.
- Incorporating Welcome Baby bags and information in the Welcome Wagon package

- The Working Group applied for a January'06 Township Grant to develop an ECD fold out information card and to create a portable ECD display board for community events hosted in the three geographic areas of the community.
- Many members of this community participate in the Temple. The Make Children First Committee is doing very concentrated work with this temple and its members.
- Ongoing discussions with Health, the Library, and Parks and Recreation have continued to result in funding shifts that more closely align with the community's ECD priorities.
- Immigrant family outreach art project is including parents and children who are new in Canada
- Co-planning an evening event with the Chamber of Commerce titled; "Children – an opportunity for business".

Appendix C

Findings of the Smart Start Study of Business and Parent Participation in Community Coalitions

- Partnerships reported tremendous success in bringing together human service professionals from public and non-profit agencies. However, participation from other mandated constituencies, particularly parents and business was more problematic.
- Parents and business people asserted their involvement is essential, and that each contributes something unique; parents suggested that they bring intimate knowledge and a "sense of reality" about the needs of families, as well as ideas about how to improve services. Business people noted that they provide resources, skills and expertise that can help the partnerships function more effectively and efficiently. Smart Start Executive Directors concurred and emphasized that the contributions of both are critical if partnerships are serious about achieving true community collaboration.
- Smart Start executive directors reported an array of strategies to support parent and business involvement; however the majority tended to focus on implementing only a few strategies rather than a comprehensive community involvement effort. The most often used strategies included: evening meetings and child care arrangements to involve parents; appointments of business people to leadership roles and solicitation of funds to involve business. Despite the efforts reported by executive directors, 33% of parents and 40% of business people reported that few or no extra efforts had been made to encourage their participation.
- Parents suggested that creating a critical mass of parents at the planning table and/or establishing a parent group, increased communication and dialogue with more parents in the community and giving parents greater attention and respect were considered top priorities.
- Business people stressed the need to define more clearly the roles that business people can play in a partnership and they underscored the importance of expanding those roles beyond that of a financial backer.
- Business people wanted highly structured, expeditious meetings. Parents, often with less board and decision making experience, desired more opportunities to ask questions and discuss issues.
- Business people served primarily in leadership positions while parents served mostly as committee members, volunteers and advocates, fulfilling fewer leadership roles, with fewer opportunities to engage in influential decision making.
- Time constraints and the lack of a meaningful role were the major source of dissatisfaction for both parents and business representatives.
- While some participants suggested that participation of low income parents was not their priority, others, particularly parents receiving subsidies to participate adamantly disagreed

and maintained that many low income families do have a desire to participate, although provisions may be required to facilitate their involvement.

- Involvement was more problematic in large geographic regions where long distance travel and greater reliance on small business, often with less time than “big business” complicated and limited participation.
- Where it was viewed that the state had not given over local control; business participants were hesitant to become involved.
- Parent and business turnover was equal (60%) with a tendency towards high turnover at some sites
- Parents identified Executive Directors, child care representatives, family resource centres and churches and colleges as being supportive of their involvement, while business people identified board chairs, government representatives and other business leaders as encouraging and supportive of their participation

Appendix D

Awareness Raising Activities Outlined in Children First 2005-2006 Annual Reports

Sixteen initiatives reported on presentations they had made to parents and other groups including: Parks and Recreation Commissions, Members of Parliament, Town Councils and administrators, Foster Parent groups, preschool providers, the Sikh community, MLA's, School Boards and administrators, Ministerial Associations, multicultural groups, Rotary, Kiwanis, Social Planning Committees, Chambers of Commerce, Kindergarten teachers, Punjabi community, Credit Unions and other business groups, Aboriginal service providers, Health Authorities, MCFD staff, RCMP, Fire Department, community groups.

- We made 37 presentations on brain development, using a manual produced by MCFD
- We made a presentation to local government regarding "family friendly" amendments to the Official Community Plan
- A group of parents and children had made a presentation to Council on National Child Day.
- We organized a seminar with Dr. Suzanne Crowhurst Lennard - "Seeing Our City Through the Eyes of a Child" Through this seminar the initiative was able to engage many new and non-traditional partners, such as realtors, planners, business people, lawyers, etc

Other Awareness Raising Activities:

- We held two child care forums for community members and federal politicians to hold a dialogue about child care prior to the federal election.
- Networking among the Royal Canadian Legion, library, public health and Women's Institute established the Books for Babies program which provides books for every newborn
- Neighbourhood Champions link families to services through their role as ECD Champions
- bus and bus shelter ads
- Family Fun Events
- Celebrations of National Child Day
- Video
- Preconception awareness campaign: a partnership with Public Health Nursing, School District 57, Children First staff and Street Spirits Theatre Troupe, pre and post test surveys were completed on Grade 10 students regarding their level of knowledge of health before a pregnancy occurs.
- Garden Manual: a step by step guide for others wanting to initiate a community based, multi agency garden to improve food security, mental health and family activity.
- Rotary prepared a pancake breakfast for all the families to help celebrate Family Literacy Day
- The Credit Union worked with the 0-6 Service Providers to design their bank calendar into a Make Children First Calendar. Approximated 2500 calendars were distributed. The calendar includes: pictures of local kids, healthy snack recipes, nursery rhymes/games/activities, and developmental tips and reminders

- Setting up book bins and filling with donated children's books for waiting rooms, foyers and on City buses throughout the community
- Celebrating Fathers; materials and books to Food Bank
- Children's Festival where we provided crafts for children and surveyed parents about the community, Celebration of Community, Breastfeeding Challenge
- Community that Cares, Brain Awareness, and Residential School Survivors
- The Mini-Connection Kits will contain materials for professionals (Public Health Nurses including Dental and Nutrition, Infant Development and Supported Child Development Consultants, Family Resource Program Coordinators, Speech and Language Pathologists) to share with families as they connect at a variety of informal venues including Family Resource Programs and Playgroups in the community.
- Immigrant family outreach art project with the Maple Ridge Arts Council
- Early Childhood Community Forums: The first Forum was held on March 21 with well over 50 community members attending from all regions. Representation from front line workers, agencies, local government, school district, health, MCFD, Aboriginal communities, business, parents and more came together to discuss and create a strategic plan for the early years in this region
- Co-planning an evening event with the Chamber of Commerce titled; "Children – an opportunity for business"
- MCF provided funds for an ECD art exhibition "Eye Stories" at the Art Gallery.
- During National Family Week, October 2005, Children First provided community grants for two events. Come Fly a Kite, was a Community Kite Flying Festival sponsored by Hamilton Community Centre, inviting families to join together to make and fly kites.
- Our initiative was instrumental in the city amending its bylaws to recognize ECD in their Official Community Planning activities
- The Festival of Nations 05/06 was the 3rd annual event organized by the Bridging Committee to celebrate diversity. It was held on June 22, 2005. The goals of the Festival of Nations were to:
 - Build relationship between Aboriginal and non-Aboriginal people
 - Create a space for people to gather and learn from each other.
 - Increase understanding of diversity.
 - Recognize the work we are doing and celebrate success.
 - Engage and focus on children and youth.
 - Activities included a children's festival, interpretative hike, opening ceremonies, multi-cultural dinner (feast style) and entertainment. There were approximately 700 people in attendance. We are planning our 4th Festival of Nations for June 22, 2006.

Appendix E

Children First Training activities as outlined in 2005-2006 Annual Reports

- Distributed \$50,000 between 21 individuals (\$1,000 maximum) and 9 groups (\$5,000 maximum) as an Education Bursary Fund for ECD related training and workshops.
- Hosted Dr. Diane Benoit Infant attachment workshops
- Vickie Mead workshops
- Annual "Let's Celebrate" parenting workshop
- Parenting with Pizzazz Conference
- Professional and Parenting workshops on Infant Attachment
- Parenting workshops based on EDI results
- Workshop training for daycare staff and homecare providers
- Workshop training for daycare providers including group daycare and at-home daycare
- Development and funding for an Aboriginal Sensitivity Training session
- Make the Connection Facilitator Training and Program Delivery (Richmond Family Place)
- Project provided training for 24 facilitators and 3 pilot projects of this attachment parenting program.
- Supporting 10 groups in receiving and providing training that enhances the skills and expertise of parents, care givers, and service providers (matching dollars policy that encourages the pooling of resources).
- A group of young mom's worked together with the support of Child and Youth Mental Health, SD, Public Health, Dze L'Kant Friendship Centre, and Make Children First to organize a workshop. The parents identified the topics they want information on and invited community service providers to present. Make Children First was also involved by presenting with Public Health on community resources. They are hoping to take what they have learned from the process and plan another workshop next year. One of the young moms continued to work with Children First by sharing her experiences and stories at other workshops.
- Plain Language Workshop, which taught how to prepare brochures, newsletters, reports and other written materials at a reading level (grade 3-4) that would be comprehended by most parents.
- Diversity: Enriching Early Childhood Experiences, a two-day workshop
- Carl Dunst presentations for children and parents
- Early Learning Symposium to bring together School District management, principals, teachers and child care and preschool providers – shared ideas to expand on early learning opportunities and bridging the gap between early learning and K readiness
- Sharing Books With Babies workshop
- Population Health Approaches workshop
- Workshops/Forums for parents and service providers on dealing with difficult behaviour in children
- Post partum depression workshop
- Learning Language and Loving It
- Hanen training for daycare/preschool providers

Appendix F

Components of Children First Strategic Plans and Logic Models

Initiative	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	
Strategic/ Action Plans contain:																										
Mandate/back ground								✓						✓			✓		✓	✓		✓	✓	✓	✓	✓
Mission & Values (or guiding principles)	✓								✓		✓			✓				✓	✓		✓		✓	✓	✓	✓
Assessment of opportunities and threats								✓					✓									✓				
Assessment of Strengths and weaknesses								✓	✓				✓									✓				
Strategic issues/ directions	✓		✓					✓	✓									✓	✓	✓	✓		✓			✓
Strategies	✓						✓	✓	✓		✓							✓	✓	✓	✓		✓		✓	✓
Vision	✓	✓												✓				✓	✓			✓		✓	✓	✓
Partners/ resources								✓	✓						✓								✓	✓	✓	✓
timeframe								✓						✓				✓								
Outcomes								✓			✓	✓		✓		✓										
Activities										✓	✓				✓	✓	✓	✓								
Logic Models contain:																										
Goals	✓		✓			✓	✓																			
Outputs											✓	✓	✓													
Inputs											✓		✓													
Outcomes	✓	✓	✓	✓	✓	✓					✓		✓													
Activities	✓				✓		✓																			
Success Indicators	✓		✓			✓	✓				✓	✓	✓													
Measurement tools											✓		✓													
Strategies	✓					✓																				
Objectives		✓																								
Who	✓						✓						✓													
Budget	✓																									
Timelines	✓		✓				✓						✓													
Targets			✓			✓	✓																			

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