

**GROWING TOGETHER CHILD AND PARENT SOCIETY
LONGITUDINAL FOLLOW-UP STUDY
2009-2010
Dolan, Ratsoy, Bright et al.**

**GTCPS Growing Together
Child and Parent Society
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EXECUTIVE SUMMARY

Young Parent Programs service both children and the unique needs of young parents. Currently 41 YPP's in BC "Provide (on site) childcare while young mothers finish their high school education, or upgrade their skills. YPP's also provide life skills education such as nutrition, budgeting, and parenting skills (and in a few cases employment preparation programs), " according to Sitara, 2009,p0. "Through liaison with school administrators, the YP program staff ensure that the school recognizes the stresses faced by these parents, and provides assistance that they need to stay in and complete high school. These programs greatly increase the chances for these young women (and men) to go on to further education and to become self sufficient through employment." (Vandyke, Times Colonist, September 7th, 2010).

As you read through this study, you will find that Growing Together (1993-98) far exceeded these parameters in its programming and made life changing interventions that defy the statistics for young parents and their children. The ten year follow up of the families who attended Growing Together between 1993 and 1998 demonstrates the efficacy of best practices when they are adequately supported and funded. Ahead of its time, before the current best practices research was done, Growing Together individualized flexible programming to fit parental needs. Young fathers were recognized and encouraged and fathers or father figures tended to provide long term support for their families. Parents were taught advocacy skills for themselves and their children and connected to a variety of community resources. First Nations culture was recognized and aboriginal parenting practices supported by staff. First Nations resources such as Lalum'uttli' Smun'eem child and family services and Ts'ewulhtun Health Centre were accessed. Through a strong sense of their individuality and through their tightly knit community at Growing Together, they developed confidence, self esteem, and a desire to achieve personal bests and to give back to the community. Many maintained a strong relationship with a father or father figure. Growing Together enabled these young families to break the poverty cycle and create a future for themselves and their family. This is truly significant, particularly in view of past Director Mary Dolan, who stated that many of the families these parents came from were receiving social assistance. Many young families at Growing Together are aboriginal.

Although Growing Together today maintains many of these strengths, funding cuts and diminished resources may result in less successful and more limited long term outcomes for the current group of young parents and their children. **HOW DO WE CONTINUE TO BEST SERVE, ENABLE AND ENCOURAGE YOUNG PARENTS AND THEIR CHILDREN? WHAT ARE THE RESOURCES AND SUPPORTS NEEDED?**

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GROWING TOGETHER CHILD AND PARENT SOCIETY

LONGITUDINAL FOLLOW-UP STUDY

I. CONTEXTUAL RESEARCH REVIEW

i. WHO ARE THE CLIENTS OF GROWING TOGETHER AND WHAT DOES RESEARCH SAY ABOUT THEIR CHALLENGES AND THEIR NEEDS?

Young Parent families trying to establish themselves in today's world in Duncan B.C. confront a grim socio economic context. We are in the midst of an economic recession that has seen repeated and drastic cuts to social services as well as to funding through gaming and grants. B.C. social assistance claims increased 47% over 2008 statistics. This includes single parents enrolling for welfare in higher numbers. The number of employable single parents on welfare increased 25 per cent between September and March, 2009. (Vancouver Sun, May 22, p1)

BC Council for Families reports that "In BC, teen pregnancies decreased by 35% over the ten year period." However, "the support needs of teen parents are actually increasing, while available resources for these vulnerable families are steadily disappearing." . . . "In BC in 2007, there were 1456 live births to mothers under 20, according to the Provincial Vital Statistics Agency. As the teen parent population has decreased, attention - and resources - have become inadequate to address the increasingly complex risk factors of this smaller yet more vulnerable group of families. (BC Council For Families, May 31, 2010) Young parents are a distinct group because of "the adolescent parent's developmental needs and the needs of their child" (Coren, Barlow and Stewart-Brown, 2003) Although there has been a thirty year decline in incidence of young parents, **their risk is now at higher than ever levels.** (Sitara, 2009,p0) Vulnerable youth in B.C. include aboriginal youth, youth from poor economic backgrounds, and those in foster care or with a history of having been in care. (Ibid)

Unicef (2007) and the World Bank (2007) define poverty as the state of having at least one unmet need essential to living. These parents, thrust early into establishing themselves in the adult world face challenges in all areas. Unicef (2006) **reports that children (and the definition of child as 0-19 includes most of these parents) from the lowest income levels are more likely to have poor health, learning**

and behavioural difficulties, to underachieve at school, become pregnant at an early age, have lower skills and aspirations, are more likely to be unemployed, dependent on welfare, or receiving low pay.

(Ibid) The problems these children have as adults are significant and costly to society in terms of government funded programs and services. They also indicate considerable loss of human potential and productivity.

Child disadvantages become more intense as family income levels decrease. (Lethbridge, et. Al. 2006, Hertzman et al 2002, Mustard, 2002 pp 11 - 26; National Longitudinal Survey of Children and Youth 1998). This situation may be worsened because many low income families do not utilize or have difficulty in accessing appropriate services, such as high quality early childhood education .(de V. Peters & Petticlerc, 2009)

Research from numerous fields indicates that **the children of these children are vulnerable to poor outcomes**. For instance, if their parents, especially the mother, have mental and/or physical health challenges, child disabilities become more prevalent. Child health from birth, including interventions, is vital to healthy development. If the parent is unemployed or underemployed, involved in drug or alcohol abuse, a single parent and/or a teen age parent, the child's health and well being are impacted throughout their development. Parental skills, health literacy, health status and education have a huge impact on child health, learning, behaviours and development.

Children who are preterm, low or high birth weight, FASD, who have **disabilities** such as vision and hearing impairment, speech disorders or behavioural problems face even greater challenges. "Overall, vulnerability increased to 30.3 per cent of children in 53 of 59 B.C. school districts last year from 28.5 per cent in the same districts in 2008-09" according to Clyde Hertzman, director of the University of B.C.'s Human Early Learning Partnership (HELP). "A growing percentage of B.C. children -- almost one out of three -- started kindergarten last year with developmental deficiencies that are expected to impair their early learning and possibly their entire school experience," HELP's research concludes. "We can clearly demonstrate that child vulnerability is trending upwards", said Hertzman. "Anything more than 10 per cent is avoidable under optimal conditions of early childhood so about two-thirds of the developmental vulnerabilities that B.C. children currently experience as they start school are preventable." (Vancouver Sun, September 22, 2010)

"In BC, targeted services for Aboriginal young parents are almost nonexistent although it is the one segment of the population where the teen birthrate continues to climb." (BC Council For Families, May 31, 2010)

Distinct cultural attitudes account for much of this discrepancy.: ". . .overwhelming positive and supportive attitudes toward pregnancy in the majority of Aboriginal communities which is often attributed to a cultural appreciation and respect for life regardless of the circumstances of the parent." (Kelly, n.d., n.p.) (Olsen, 2005, p22) Through her interviews with young Aboriginal mothers, Olsen also found a strong cultural opposition to abortion. . . . "Keeping the baby is without question." (Ibid, p25) "Abortion for many Aboriginal girls is considered 'murder.'" (Ibid, p77) While in the past, First Nations

communities had traditions that involved taking care of young women when they became pregnant, these traditions are no longer maintained.

Aboriginal young parents are a statistically significant group. "In B.C. one quarter of all babies born between 1999 and 2001 were born to Aboriginal teens" (Sitara, 2009, p7) "In a typical day in British Columbia, five babies are born to mothers aged 13 to 19" (BC Aboriginal Child Care Society, 2005). "Nineteen percent of Status Indian births and 4% of births to other B.C. residents were to teenage mothers" (Sitara, 2009, p7) **"Up to 70 percent of new First Nations families on southern Vancouver Island . . . are starting with teenage mothers and, in many cases, teenage fathers as well."** (Olsen, 2005, p.13) "Thirty to 40% of status Indian babies born each year are mothered by women less than nineteen years of age" . "From 1991 - 1999, 25% of teenage mothers in B.C. were status Indians, while status Indians accounted for 3 to 5% of B.C.'s total population" . . . **"For Aboriginal women under fifteen years of age, the rate of birth is estimated to be as much as eighteen times that of other Canadian teens the same age"** (Olsen, 2005, p22)

Most child outcomes for aboriginals have been very low until recently. . About 41% of Aboriginal children live in single parent families in BC.. In larger BC centres, 57% of Aboriginal children live in low income families. The rate of high birth weight remains twice that of the general Canadian population. In the past, child death rates, especially for SIDS, are still 1.5 times higher. The incidence of disability and FASD is higher. A higher percent of First Nations children are obese. As they grow, Aboriginal children have a very high rate of school problems, low completion rates, low skills, low employment, and unemployment rates that are twice as high in BC in 2006 as in the general population. Although improving, alcohol and drug addiction remain a problem, and there is a high suicide rate, very high youth crime and incarceration, as well as a higher need for social assistance (Statistics Canada, Aboriginal Children's Survey 2006).

ii. HOW DO WE BEST SERVE YOUNG PARENTS AND THEIR CHILDREN?

Much is known about ECD intervention. Early childhood is the most critical time to make effective social capital investments in society. (Karolyn & Kilman, RAND, 2008, Lynch 2004, Farah at al, 2007, Evans & Schamberg, 2009).

Nobel Laureate in Economics 2000, Professor James Heckman has recognized that the overall significance of ECD programs for society is in the economically and socially important long term outcomes it supports. **People who participate in enriched early childhood programs are more likely to complete school and much less likely to require welfare benefits, become teen parents or participate in criminal activities.** (Heckman & Cameiro, 2003). **Such early investments are much more cost effective than later interventions for adults, especially for those who stand to benefit most from them in lower income families.**

The World Bank Report on Early Childhood Development (2007) concludes that ECD interventions result in higher intelligence scores, higher and more timely school enrolment, less grade repeating and school quitting, improved nutrition and overall health status, improved social and emotional behaviours, improved overall child-parent relationships, increased earning potential and economic self sufficiency in adulthood as well as higher labour force participation by females.

Early childhood development itself is not a complete solution to the challenges these young families face. In order for the child to thrive, the parent(s) need(s) parenting skills, and an awareness of their children's needs for: nutrition, physical activity, and learning through daily reading and interactive play, as well as parental role modeling in healthy living and social practices.

In addition to short and long term benefits for children from ECD interventions, **“Much evidence supports ECD interventions for both young children and parents.** These include: enhancing child learning through access to high quality early childhood education services, parent training and development, healthy living and support for parental employment, interventions that support child learning at home as well in ECE centers, interventions that promote social connectedness of families in their community. Stratham “highlights the importance of making links between adults’ and children’s services so that children who are in need because of their parents’ circumstances can be identified and supported.” (2004, p589) **Clearly, “When young people choose to become parents, supporting them ensures better outcomes for young parents and their children.”** (Sitara,2).

iii. WHAT DOES THE RESEARCH SAY ABOUT EARLY CHILDHOOD AND YOUNG PARENT INTERVENTIONS?

The claims of ECD proponents are backed by research evidence from countries around the world and over five decades including: longitudinal studies, controlled experimental designs, other rigorous empirical studies, panel studies, meta-analyses, systematic reviews and research syntheses conducted by highly respected international research and policy organizations (e.g. Cochrane Collaboration, Campbell Collaboration, UNICEF, UNESCO, OECD, WHO and renowned public policy institutes and many leading universities (e.g. Princeton, Harvard, Columbia). Some of these organizations include The National Longitudinal Survey of Children and Youth, the National Population Health Survey, the Aboriginal Children’s Survey and other studies by Statistics Canada, the Canadian Institute of Health Information, Public Health Agency of Canada, Human Resources and Social Development Canada, Statistics Canada, the Canadian Council on Learning, the Canadian Council on Social Development, innumerable professional journal articles and the work of many provincial ministries and ECD centers of excellence in Canadian universities. In BC, important contributions have been made by Fraser Mustard as well as Clyde Hertzman and Human early Learning Partnership researchers in several BC universities.

Governments have already committed their support. The Federal/Provincial/Territorial Early Childhood Development Agreement of September 2000 commits Canada’s first ministers “to promote early childhood development so that to their fullest potential children will be physically and emotionally

healthy, safe and secure; ready to learn and socially engaged and responsible, and to help families support their children within strong communities” quoted in Mustard & Picherak, 2002b)

There is strong BC wide support for increased spending on family support and early learning and child care. Eighty-eight percent of respondents to a Vancouver YWCA survey in April, 2010 supported the BC government in meeting its goal of reducing the number of vulnerable children to 15% by 2015. To achieve this goal, 89% supported increasing affordable quality child care services, 83% supported increasing income supports for low income parents, 60% supported an investment of \$1 billion or more additional government spending to ensure families and children get the help they need to succeed. Only 14% correctly guessed that Canada ranks near last among OECD nations in support for families with young children.

There is an urgent need to expand the resources for young families, not to reduce them. “The long term impacts in savings to the welfare and child protection system are substantial.” (Times Colonist, Sept. 7, 2010)

iv. WHAT ARE THE OUTCOMES GROWING TOGETHER IS TRYING TO CHANGE?

Young Parent Programs service both children and the unique needs of young parents. Currently 41 YPP's in BC “Provide (on site) childcare while young mothers finish their high school education, or upgrade their skills. YPP's also provide life skills education such as nutrition, budgeting, and parenting skills (and in a few cases employment preparation programs),” according to Sitara, 2009,p0. “Through liaison with school administrators, the YP program staff ensure that the school recognizes the stresses faced by these parents, and provides assistance that they need to stay in and complete high school. These programs greatly increase the chances for these young women (and men) to go on to further education and to become self sufficient through employment.” (Vandyke, Times Colonist, September 7th, 2010).

As you read through this study, you will find that Growing Together (1993-98) far exceeded these parameters in its programming and made life changing interventions that defy the statistics for young parents and their children. The ten year follow up of the families who attended Growing Together between 1993 and 1998 demonstrates the efficacy of best practices when they are adequately supported and funded. Ahead of its time, before the current best practices research was done, Growing Together individualized flexible programming to fit parental needs. Young fathers were recognized and encouraged and fathers or father figures tended to provide long term support for their families. Parents were taught advocacy skills for themselves and their children and connected to a variety of community resources. First Nations culture was recognized and aboriginal parenting practices supported by staff. First Nations resources such as Lalum'uttli' Smun'eem child and family services and Ts'ewulhtun Health Centre were accessed. Through a strong sense of their individuality and through their tightly knit community at Growing Together, they developed confidence, self esteem, and a desire to achieve personal bests and to give back to the community . Many maintained a strong relationship with a father or father figure. Growing Together enabled these young families to break the poverty cycle and create a future for themselves and their family. This is truly significant, particularly in light of past Director Mary

Dolan's statement that many of the families these parents came from were receiving social assistance. Many young families at Growing Together are aboriginal and especially vulnerable to poverty.

Although Growing Together today maintains many of these strengths, funding cuts and diminished resources may result in less successful and more limited long term outcomes for the current group of young parents and their children. **HOW DO WE CONTINUE TO BEST SERVE, ENABLE AND ENCOURAGE YOUNG PARENTS AND THEIR CHILDREN? WHAT ARE THE RESOURCES AND SUPPORTS NEEDED?**

II. PART I RESEARCH DESIGN

This study consists of two parts. The first part is a ten year follow up study to assess child well being and parental well being, assessed by anecdotal information from parents. The parent questionnaire was developed by Mary Dolan, a former coordinator of Growing Together Child and Parent Early Education Center; Peg Cox, a retired pediatric physician; Lorna McPherson, a community advocate for young mothers and their infants; and Larry Mattin, principal of the Cowichan Valley Open Learning Co-op (CVOLC) and Cowichan Valley Alternate Education (C.V.A.E.). Data was collated, analyzed and reported by Marilyn Bright (M. Ed.) and Wende Ratsoy (M. Ed.), members of the Board of the Growing Together Child and Parent Society.

The second part of the study examines Growing Together's(GT) programs in light of recent research on best practices for Young Parent Programs (YPP's). (Sitara, 2009) The purpose of this was two fold. The 1993-98 programs were analyzed to identify successful program elements and aspects to ensure they will be repeated in the future. Mary Dolan, past Coordinator, provided anecdotal information on GT's programs. The 2009-2010 program was assessed to determine current strengths and areas where growth is needed. Kathy Williams, current Coordinator of GT, and Larry Mattin, current principal of CVOLC and CVAE completed program evaluations in light of best practices. The research review, anecdotal survey design and research analysis were done by Wende Ratsoy.

III. OBJECTIVES

1. To provide a long term profile of Young Parents and their children by evaluating the ongoing educational, social and economic well being of Young Parents and their children who have experienced the Growing Together Child and Parent Society programs and child care between 1993 and 1998.
2. To document the retrospective evaluation of the Growing Together Child and Parent Society program by Young Parents.
3. To identify GT's program elements that contributed to successful parent and child outcomes.
4. To assess GT's current program elements to ensure continued success and to identify areas for continued growth and development.

IV. METHODOLOGY

This study was preceded by an earlier study which was completed and published in June, 2000. The initial study was analyzed and reported by Barbara Park of Park Info Services. The study surveyed students/parents who used the services of Growing Together Child and Parent Society between the years of September, 1993 and June, 1998.

While the 1999 - 2000 study dealt more specifically with student program and coursework evaluation, this study is a longitudinal follow-up of the progress of the Young Parents and their children who were

involved in the original study. 'Young Parents' are defined in British Columbia legislation as parents who are under the age of 24 years. Special programs are provided for their support, such as that provided by Growing Together in cooperation with the Cowichan Valley Open Learning Co-op (CVOLC) and Alt. Ed.. The aim of this study is to assess the long term impacts of early interventions offered by Growing Together (in cooperation with CVOLC and CVAE) by examining factors such as the well being and life success of the Young Parents and their children, who were served by the program. To qualify for the study, parents had to have used the resources of Growing Together for a minimum of one month. Most were there for a longer period.

The study was advertised in the local newspapers. Tracking participants was an exhaustive process. Thank you to the following organizations who assisted in contacting respondents: *Community Options Society Staff, Huye'yuLelum Staff, Lalum' utul 'Smun eem Staff, Margaret Moss Health Center Staff, and Ts'ewulhtun Health Center.* Parents were contacted primarily through telephone interviews by Mary Dolan, past coordinator of Growing Together, to ensure a high level of trust between interviewer and interviewee. Sincere thanks are due her for the long hours she spent contacting and interviewing the Young Parents she had worked with between 1993 and 1998. The success of this study is largely due to the strength of the bonds Mary formed with these parents and families.

Both qualitative and quantitative measures were employed to assess child well being, including anecdotal comments and statistical information. Areas surveyed included involvement of maternal mother and paternal father or father figure in the child's development, child health, academic progress in kindergarten and grade one, current academic achievement and plans for graduation. Parental success and well being were examined by the parameters of education attained, employment, source of income, housing, transportation, community involvement and child community involvement, as well as plans for the future. Maternal impressions of how Growing Together programs contributed to their lives and the lives of their children provide a parent evaluation of the program and its long term impact.

The second part of the survey is largely informed by a research summary based on findings in "Programs And Service For Young Parents: A Scoping Review", Georgia Sitara, PHD, Sr. Researcher, Knowledge and Information Services, Office of the Chief Information Officer, Ministry of Labour and Citizens' Services, January 13, 2009, as well as the contextual research review in Part I.

Past and present GT coordinators as well as present and past administrators of CVOLC were asked to consider the best practices for YPP's (Sitara, 2009) and positive outcomes demonstrated by Part I survey data, then reflect on the following questions:

- What are GT's program elements and aspects that you feel contributed to successful outcomes for young parents and their children?
- What has changed between 1998 and 2010?
- What growth and development would you like to see in program elements and aspects?,
- What resources do you need to achieve this?

These qualitative results were compiled and presented anecdotally.

V. DEMOGRAPHICS

Original Follow Up Study (Completed in Year 2000)

Total Number of Parents Surveyed: 92

Total Number of Responses Received: 52 44/52 were Qualifying Young Parents

Total Number of non-Responders: 40 20/40 were Qualifying Young Parents

Total Number of Qualifying Young Parents in the original study: 64

Note: The original study included community spaces (which were parents older than age 24) along with Young Parents whose child or children attended Growing Together for less than one month. This longitudinal study does not include those parents.

Of the original 64 qualifying Young Parents, one Young Parent is deceased, reducing the potential number for the longitudinal study to 63.

Longitudinal Follow Up Study (Completed in Year 2009)

Total Number of Qualifying Young Parents: 63

Total Number of respondents in this study: 50

* Three studies were not included as they were community spaces, not young parent participants. Their data is not applicable to this study.

* One respondent only participated for a few days in Growing Together. The minimum attendance to qualify for this study was determined to be one month. Most respondents were long term.

Total Number of qualified respondents: 46/63 = 73% response rate

Total Number of First Nations respondents : 16/46 = 33% First Nations Young Parents

Total number of children who attended Growing Together: 54

* Three respondents each have two children who attended Growing Together

* One respondent had three children who attended Growing Together

* One respondent had four children who attended Growing Together

GradeTen-6 Grade Eleven-2 Grade Twelve-0 Graduated- 1

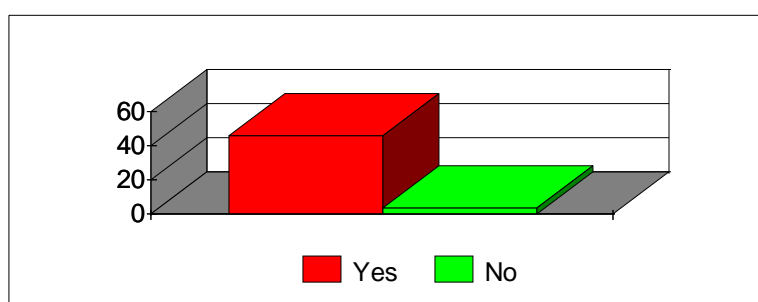
Not Applicable: *deceased at age 9

Not in school : *too young for school

Total: 54

b. INDICES OF CHILD WELL BEING AND DEVELOPMENT

Children Cared for by Mother

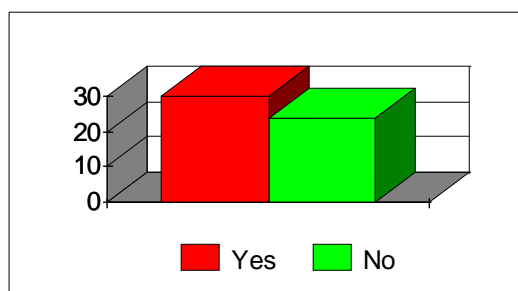


Yes: 51/54 = 94%

No: 3/54 = 6%

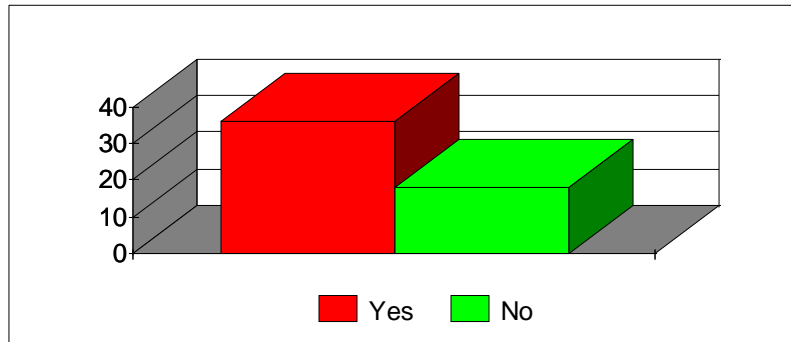
Total: 54

Children Involved with Father and/or Father Figure



Father: 30/54 = 55.5% **Father Figure:** 15/24 = 28% **No Father or Father Figure :** 24/54 = 44.5%

Subsequent Childcare Attendance (away from mother)



Yes: $36/54 = 67\%$

No: $18 / 54 = 33\%$

Total: 54

Parent's Perception of Subsequent Child Care Experience



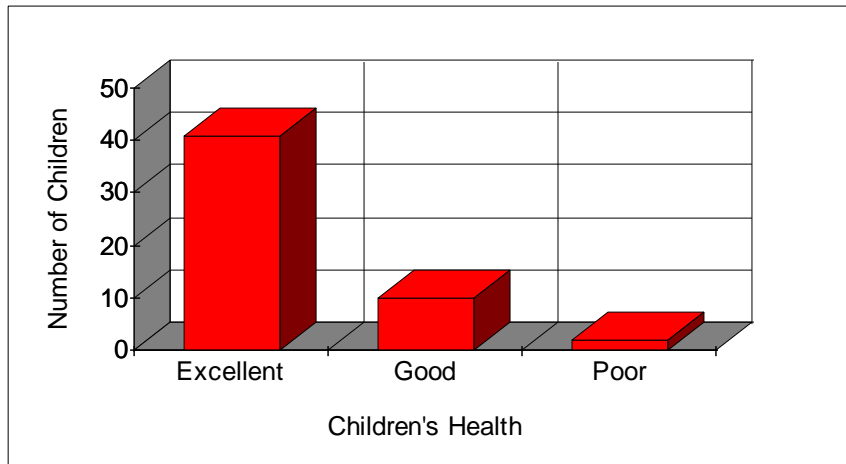
Excellent: $20/36 = 55.55\%$

Good: $10/36 = 27.77\%$

Poor: $5/36 = 13.88\%$

Unknown: *Father cared for child during the week **Total:** 36

Parent's Perception of Children's Health



Excellent: $41/53 = 77.35\%$

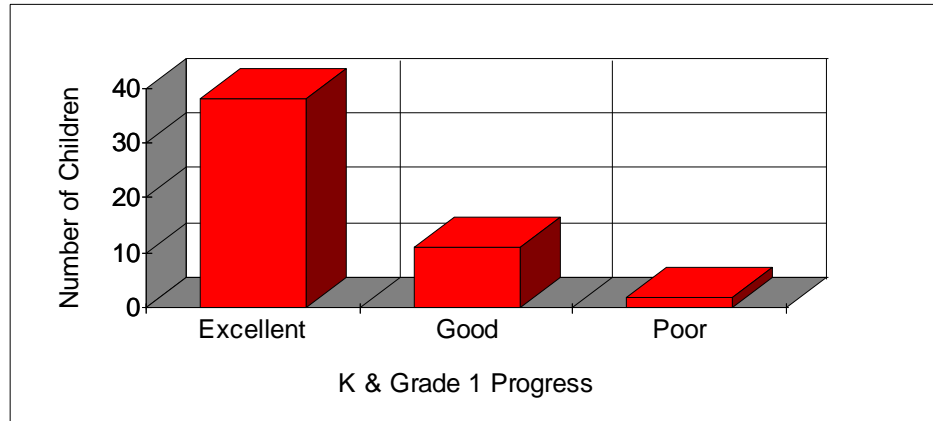
Good: $10/53 = 18.86\%$

Poor: $2/53 = 3.77\%$

Not Applicable: *1 deceased

Total: 54

Parent's Perception of Kindergarten and Grade One Progress

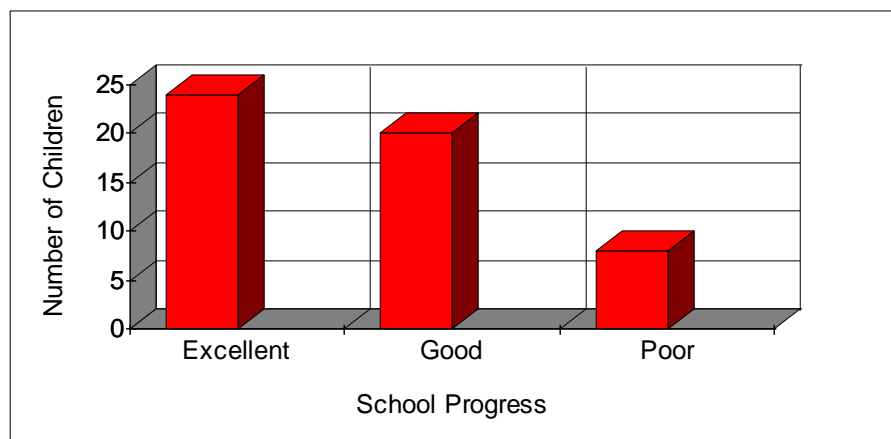


Excellent : $38/51 = 74.5\%$

Good: $11/51 = 21.56\%$

Poor : $2/51 = 3.92\%$

Parent's Perception of Children's Current Scholastic Progress



Excellent: $24/52 = 45.15\%$

Good: $20/52 = 38.46\%$

Poor: $8/52 = 15.38\%$

Learning Challenges: 7/52 = 13%; **Social Challenges:** 6/52 = 12%; **Health Challenges:** 2/52=4%

N/A : 1 *1 child not yet in school.

N?A 1 * deceased.

Total: 54

Comments:

Excellent:

- *Place 26/600 students, 5A's and 2B's
- *Was on honor roll at first school, now at second highschool, finding it more difficult
- *One child already graduated, second child loves school
- *Straight A's
- *Honor student
- *Straight A's
- *Ahead of grades, honors in science and math
- *Honour roll and principals list last two years

Good:

- *Excellent math, reading behind
- *Home Schooled after grade one, to age thirteen
- *Dyslexia, excellent socially
- *Some social barriers
- *Social difficulties
- *In alternate programs, high school was difficult socially
- *Excellent in First Nations studies and art. Academic problems starting in Grade 9
- *Good at academics when he applies himself. Has had many surgeries
- *Not keen on math and English right now, very smart when he applies himself, very keen on music and art, social studies; really into history and science.
- *Recently having reading difficulty

Poor:

- *Difficulty in middle school
- *Dyslexia suspected; parent has low trust level with schools
- *Social issues, needed 1 to 1 thinking of alternate education

* Dyslexia suspected, strong social skills

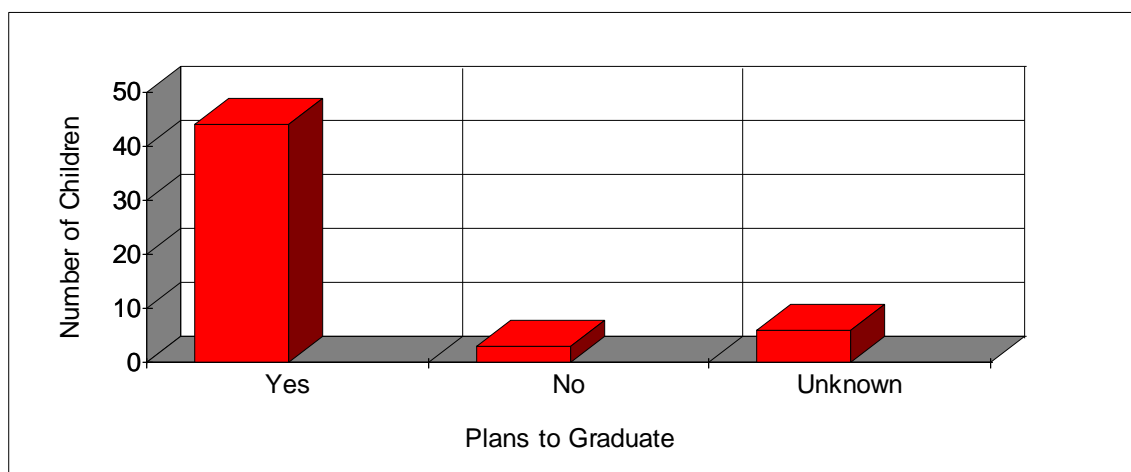
*Social issues, he has 3 great friends since birth but they did not go to school with him

*Child has cerebral palsy

*Social issues, Involvement in a tragic incident has resulted in academic difficulties. Has not been able to focus on school in the last year. She may go back to school next year.

*Struggling. Dad's coming and going did not help. Dad and Mom are together now.

Children's Graduation Plans



Yes: 44/53 = 83%

No: 3/53 = 6%

Unknown: 6/53 = 11%

Not Applicable: 1 *deceased

Total: 54

Comments:

Yes: (Future Plans)

* Advanced art degree

*Marine biologist

* Struggling to stay in school and out of trouble

* Definitely. 3 A's and 3 B's last report

* Likely to graduate early

* Will be a chef or go into the army

* Wants to graduate, mother keeps encouraging him

* One has already graduated and wants to be a forensic scientist. The second definitely wants to carry on and graduate and has goals for future to be computer technologist.

* Veterinarian

* Will be a lawyer or an architect

* Parents have saved for her university education

* Wants to graduate but wants to party

* Learn a trade

* Both children will

* Honor student

* Wants to be a chiropractor, Mother thinks all 3 children will graduate

* Going to college

* CYC degree, conservationist or horticulturalist

* Wants to go to Harvard

* On honour role and principal's list for 2 ½ years

* She does want to graduate, perhaps from Queen Margaret's.

* Doctor- sets realistic goals and achieves them

* Wants to be a guitar player in a band - or a singer

* He doesn't realize the importance yet. Mixed! He wants to go to Japan and be an artist over there. Trying to get a grade 11 ASL exchange to Japan. He is very, very smart. We did not know he had ADD until he had the nervous breakdown, so he has done very well with such a challenge.

* Sees herself graduating

* He knows he needs to and he plans to

* Owner/operator of esthetics salon

* Pharmacist or physiotherapist

- * Parents saved RESP's

- *Policeman or fireman

No:

- *Doesn't care about school right now, he is interested in electronics

- *He wants to graduate, is beginning to have social problems at school and less interested lately

- *Not focused on school. Mother anxious that he not drop out

- *Child likely does not look that far ahead, but the mother and father talk about the importance.

- *Not focused on school, mother wants him to get help, perhaps at Sylvan this summer, it is not an option for him to drop out

Unknown:

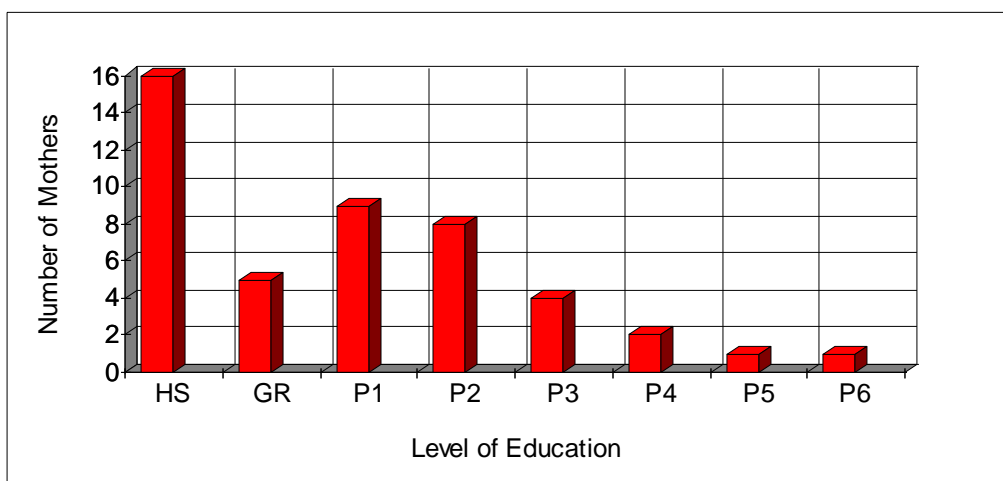
- * Wants to party, parents contacting CVOLC

- *Just began to plan his future in CAP Classes

- *Both are too young

c. INDICES OF YOUNG PARENT DEVELOPMENT AND WELL BEING

Highest Level of Mother's Education



Did Not Graduate High School: $16/46 = 35\%$

High School Graduation or Equivalent: $5/46 = 11\%$

Post Secondary Education:

1 Year: $9/46 = 20\%$

2 Years: $8/46 = 17\%$

3 Years: $4/46 = 9\%$

4 Years: $2/46 = 4\%$

5 Years: $1/46 = 2\%$

6 Years/Masters Degree: $1/46 = 2. \%$

Mean: 15.4 yrs. Or 2 yrs. Post sec. **Median:** 15 yrs, or 2 years post sec. **Mode:** High School

Total Number with High School graduation or equivalent: $30/46= 65\%$

Total Number with post secondary education: $25/46 =54.34\%$

Areas of Study:

*RN, Associate degree, medical receptionist course

*BA and first two years of masters in social work

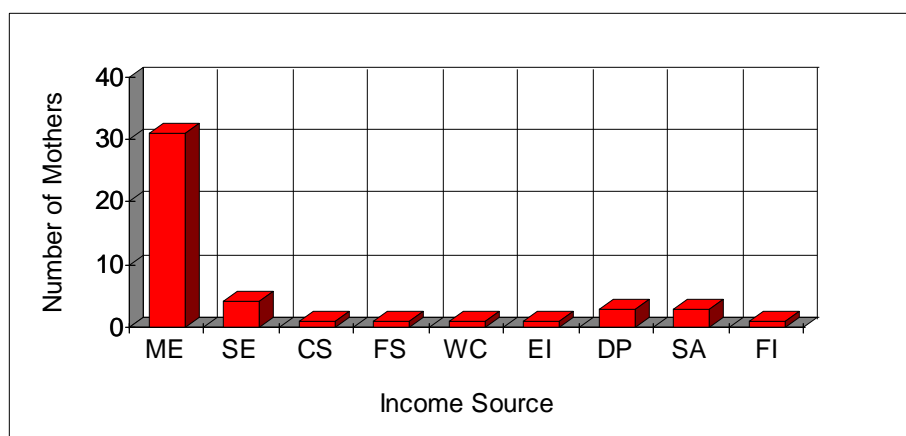
* Residential Care Assistant, currently completing LPN

* Child and Youth Care - First Nations

*Residential Care Attendant

- * Culinary Arts Program
- *Legal Administration Assistant
- *Completing Grade 12 Adult Ed., did not graduate because she had to work.
- *Business Application Course, Medical Office Diploma College Course, Medical Office Administration College Course, and Licensed Practical Nurse
- *Residential Care Attendant and bookkeeping
- *Living off inheritance
- *Early Childhood Education and two years B.ED at U Vic
- *Degree in Child and Youth Care, now in middle of Masters in Business Administration
- * Residential Care Attendant
- *Degree in Child and Youth Care
- *Legal Secretary Certificate
- *Dental Assistant Certificate , Dental Specialist Diploma.
- *Hospital Unit Clerk Program, Pharmacy Technician Certificate
- * Business Administration Management Diploma
- *Administrative Assistant Certificate and one year completed towards Early Childhood Education Diploma
- *School of Beauty Certificate, has applied for Child and Youth Care First Nations Studies.
- *Residential Care Attendant and two years BA-Psychology
- *Residential Care Attendant Certificate, working on Dogwood (High School Graduation).
- *Residential Care Attendant and CSW Certificate, graduated with honors (High School)

Mother's Main Source of Income



Mothers Employment: $31/46 = 67\%$

Spousal Employment: $4/46 = 9\%$

Child Support: $1/46 = 2\%$

Family Support: $1/46 = 2\%$

WCB: $1/46 = 2\%$

Employment Insurance: $1/46 = 2\%$

Disability Pension: $3/46 = 6\%$

Social Assistance: $3/46 = 7\%$

Financially Independent: $1/46 = 2\%$

Types of Employment

Banking:

- *Senior loans officer at Credit Union
- *Manager of customer services at TD Bank

Bus. Admin/Office:

- *Officer manager at Cowichan Tribes, housing dept.
- *Works for N.Cowichan in new centre
- *Receptionist, Administrative Assistant, Facilitator with Tribes
- *Office work
- *Administration with Cowichan Tribes

- Business Owner:**
- *Family Child Care. Not licensed.
 - *House cleaning business
 - *Part owner of 3 large child care centres in Victoria
- Deliveries:**
- *Shipping and Receiving
 - *Canada Post
- Education:**
- *Teachers' assistant at First Nations school
 - *Child care
- Food and Hospitality:**
- *Graveyard shift at Tim Horton's until 2007. Now back at school.
 - *Cashier and waitress in hospitality industry
- Health Care:**
- *Registered Nurse
 - *Licensed Practical Nurse with VIHA
 - *Licensed Practical Nurse
 - *Dental assistant
 - *Casual work in the hospital.
 - *Fitness instructor
- Retail:**
- *Gas attendant and cashier
 - *Walmart
 - *Walmart, Safeway, Liquor Depot
 - *Cashier at grocers
 - *Walmart
 - *Cashier
- Social Care:**
- *Youth worker

*Canadian Fire Alarm Assoc. certificate with world wide company,
First female technician in Canada.

*Human Service/Social Dev. worker for her First Nation band

*Resident Care Assistant and Cowichan Home Support

*Working with people with physical and mental disabilities

*RCA and Community Support Worker. Off work temporarily due to
accident.

Not Currently Employed

*Off because of personal and medical concerns

*Disability

*At home Mother, Partner works at the mine

*Waitress. Left when baby was born

*Focusing on addiction recovery

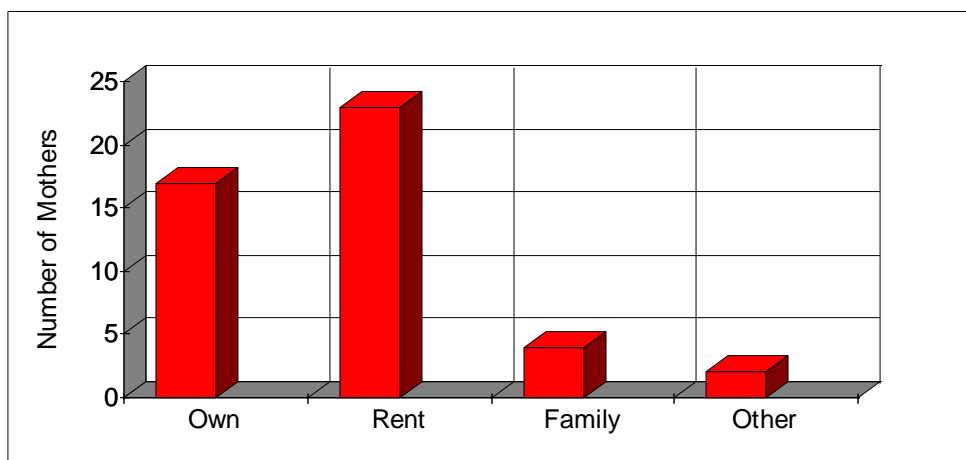
*Disability

*Disability

*On stress leave

*Studying at University over the summer. Looking for a job with First Nations
Child and Family Services

Mother's Current Housing Situation



Home Owner: 17/46 = 37%

Renter: 23/46 = 50%

Living with family: 4/46 = 9%

Other: 2/46 = 4%

Total: 46

Comments

Home Owner:

*Had home built last year

*Owns home with husband

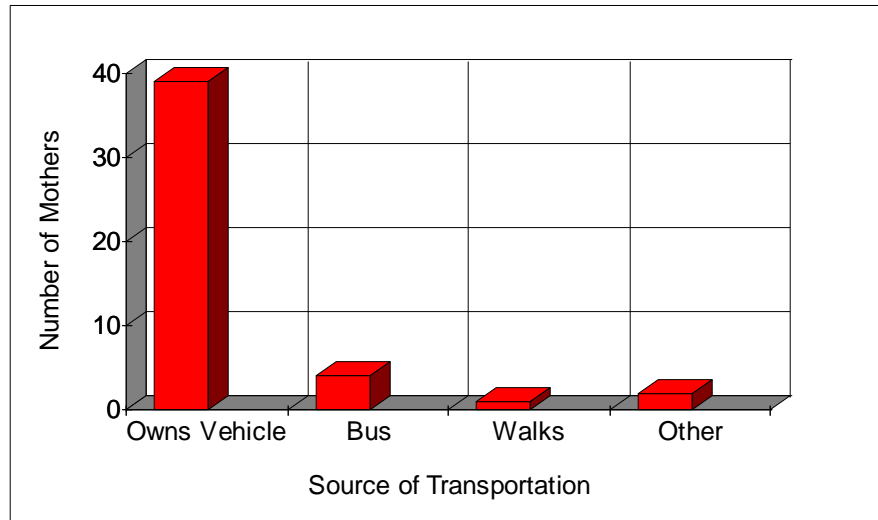
*Owns home, lives with boyfriend

Renter:

*Lost home when relationship broke up

*Was a home owner, now divorced

Mother's Source of Transportation



Vehicle Ownership: $39/46 = 85\%$

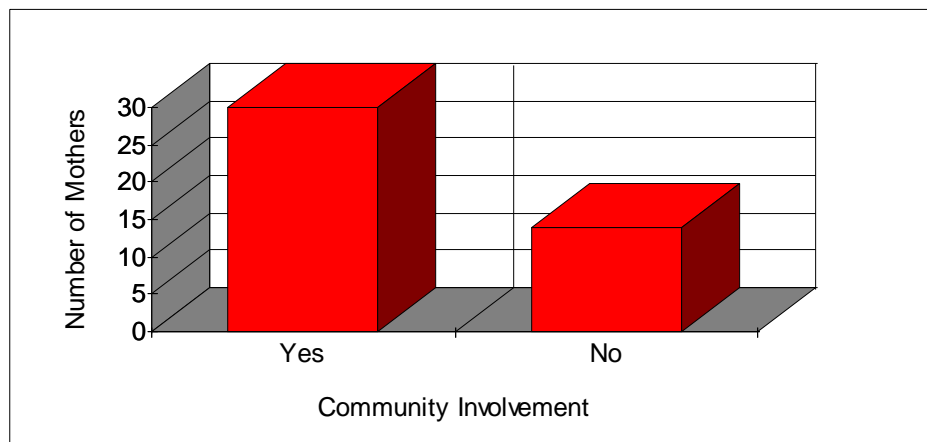
Bus: $4/46 = 9\%$

Walking: $1/46 = 2\%$

Other: $2/46 = 4\%$

Total: 46

Mother's Involvement in the Community



Yes: $30/44 = 68.18\%$

No: $14/44 = 31.81\%$

Not Applicable: 2 *No response Total: 46

Comments

- Yes:**
- *Outreach, hospital
 - *P.A.C., supports families with severe illness, Cops for Cancer
 - *Helps organize children's nights and movie nights on remote island where she lives
 - *Fostering several other children
 - *Works with the First Nations community and culture; she attends community meetings and community events. These parents have been foster parents in their community for several years.
 - *Air Cadets committee, dad has been a volunteer fireman for 18 years
 - *Pow Wow society, Long House helper
 - *North American Indigenous Games, wants to volunteer to end homelessness
 - *MS walks, family fundraising (e.g. Cops for Cancer, Save the Trees rallies and other environmental issues
 - *Strong start program with three year old, donations, fundraising for community events
 - *Soft Ball, 7 days a week, March to July, each year for 5 years, plays for Provincial sometimes, camping and fishing
 - *Young People's A.A., helped open one in Duncan, helps organize dances for young people, sports nights
 - *Supporting people with addictions, coaches ice hockey
 - *Sun Run every year, Breast Cancer Walk, fundraising for Boys and Girls Club, committee to raise funds for Children's Hospital, resource at school for children with dyslexia
 - *Campaigned to keep Koksilah School open, involved in reading program with Cowichan Tribes, helps other FN students with rides to University, prayers for others
 - *Goes to cultural activities, involved in the Big House, swimming and other family activities
 - *Volunteers in local food bank, assists with homeless and other addicts in town - informal advocate, shares 'Street Smart' tips
 - *Volunteer with Salvation Army
 - *Girl Guide leader, P.A.C., Took a group of 8 Girl Guides to Parksville to join 3,800 others from around the world, Head Lice Team Leader at school, volunteer at Food Bank, reading to elderly at the lodge
 - *First Responder, Level 3 with Fire Dept., volunteer fire fighter

*Mother is owner of 3 large licensed group child care centers (3 buildings) in Victoria. 200 children receive care and early childhood education, 40 teachers employed, a lot of diversity in families. She runs island Kids Academy with 3 partners, providing excellent quality care for children.

*Hot lunch at daughter's school; treasurer of swim club; reads in her daughter's class

*Volunteered at organic farm

*Helps run Cowichan Youth soccer tournament (eight years)

*TD Friends of the Environment, fundraising and clean up

*Assisted school counselor with troubled child; limited by illness and other disorder

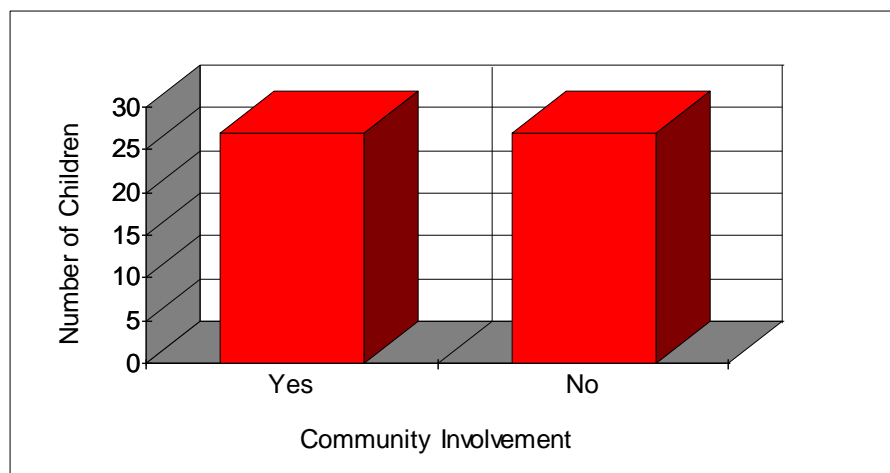
No: *No time

*No free time, Fundraising for school over the years

*Right after high school the mother did some volunteer work. No time now.

*Not involved. Too busy studying, parenting, working.

Children's Involvement in the Community



Yes: 27/53 = 50.5%

No: 26/53 = 49.5%

Not Applicable: 1 *0929. Deceased

Total: 54

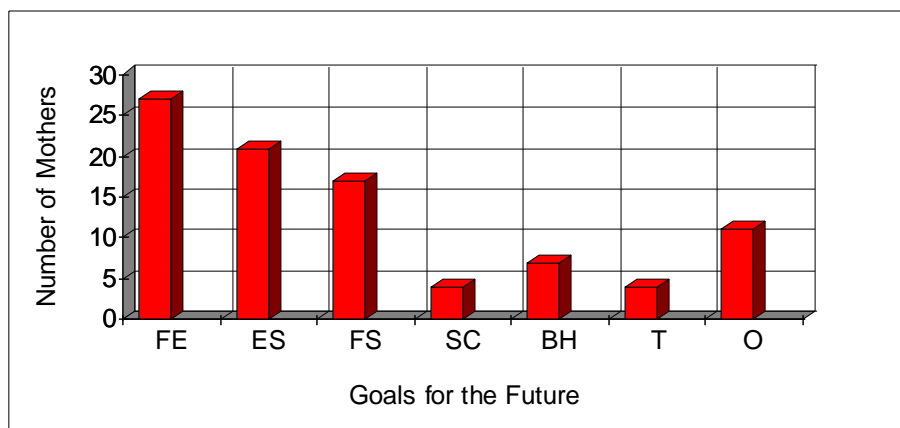
Comments

Yes: *Scouts leadership

*Pathfinders

- *Drama, swimming, dance
 - *Scouts, soccer, swimming lessons
 - *Son – soccer, 15 year old daughter has had a part time job since aged 13
 - *Air Cadets
 - *Two children perform musically. One daughter composes her own music. Mother gives credit to Growing Together that her children are so musical.
 - *Soccer, library, gym, community family events, donations, fundraising
 - *Baking (children) raised \$200
 - *Bowling, swimming
 - *Ice hockey
 - *Children go to church once a week
 - *Children are in several sports
 - *Son has been in sports through school, wants to get into baseball, it is expensive
 - *Daughters in Guides and Sparks
 - *Son does snowboarding
 - *Guides, Pathfinders
 - *Cubs and scouts, but socially he did not fit in
 - *Soccer, fundraising, travel B.C. with soccer club
 - *Swimming, Camp Phoenix, DARE program
 - *Girl guides, fundraising cleaning up environment
 - *Hockey ,camping, fishing, harvesting sea weed and bark
- No: *Daughter was in sports, although not now

Mother's Future Goals



More than one response possible. Categorized after responses given.

Further Education: 27/46 = 59%

Employment Satisfaction: 21/46 = 46%

Family Success : 17/46 = 37%

Self Care: 4/46 = 9%

Buy a House: 7/46 = 15%

Travel : 4/46 = 9%

Other: 11/46 = 24%

Comments:

*Advanced degree in nursing

*E.C.E.

*Upgrade education

*R.N., safe, healthy consistent environment for children

*Return to college to study Social Work and Office Management

*College

*Accounting, computer programming

*Family counselor

*To live simply

- *Further Education, raise children
- *To be satisfied with life, travel
- *Psychiatric nursing
- *Bring her daughter up, to enjoy her and see her graduate
- *Raising children, "getting herself back on track"
- *Work in addiction field, further training
- *Supporting child through school
- *Own house and find a better job. She is hopeful that we can have a Growing Together CVOLC reunion
- *Work and get children back
- *Grade 12 and get a full time job, own home
- *To create a Homeless Vancouver Island Handbook before the 2010 Olympics
- *Upgrade to R.N., travel more
- *Return to work as a receptionist in a law firm, take time for herself, be healthy, play
- *Own home, go to school, graduate and have a career, wants her children to do well
- *Family daycare
- *Masters degree, start a business in tourism
- *Go back to school
- *Graduate college, be a drug and alcohol abuse counselor, go to England, may move there
- *Raise children, peaceful life, to be self sufficient through hunting and gardening
- *Relaxing holiday, continued success with the child care facilities
- *Retirement, rest, pay for children's university
- *Buy a house, get care and driving license, go back to school and become a dentist in Vancouver
- *Self care, support daughter's dreams
- *G.E.D., Medical Secretary course, lack of child care and cost of childcare prevents her taking more courses
- *Buy a house
- *C.G.A.

*E.C.E. diploma, get daughter back in school and on track with her education

*Work to support and raise family

*CYC First Nations Diploma in 2 years, get 150 hours of volunteer and paid experience to qualify for the course

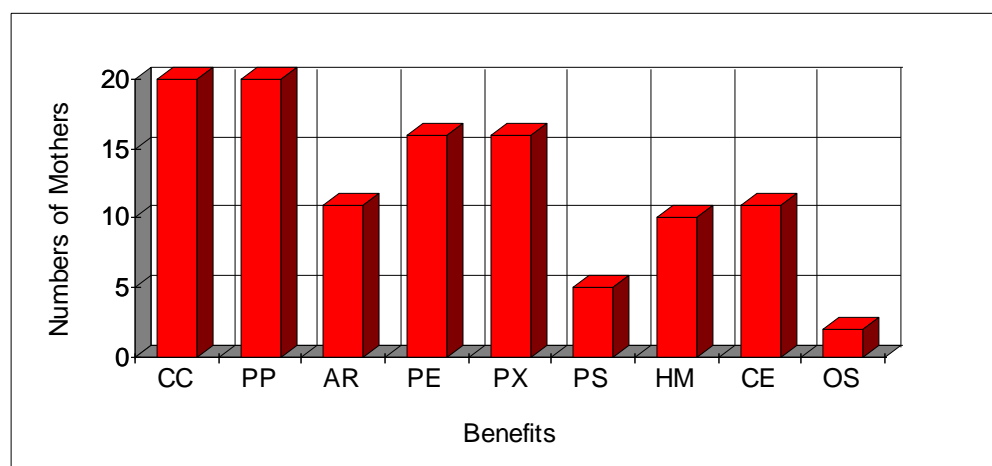
*Travel, work in Europe for a year, director TD Bank

*Registered for L.P.N. training in fall, to become an R.N., buy her own home - wants 3 bedroom home

*Own home, further studies, work with young people involved in self harm

MOTHERS' RETROSPECTIVE EVALUATION OF GROWING TOGETHER'S PROGRAM

Benefits of Growing Together's Programs



More than one response possible. Categorized after responses given.

CC: CHILDCARE, EARLY EDUCATION: 20/46 = 44%

PP: PARENTING PROGRAMS/GROUPS: 20/46 = 44%

AR: ADULT ROLE MODELS, MENTORING & SUPPORT: 11/46 = 24%

PE: POSITIVE ENVIRONMENT FOR CHILD AND MOTHER: 16/46 = 35%

PX: PROXIMITY TO SCHOOL: 16/46 = 35%

PS: PEER SUPPORT AND FRIENDSHIPS: 5/46 = 11%

HM: HOME MANAGEMENT SKILLS: 10/46 = 22%

CE: COMPLETION OF EDUCATION: 11/46 = 24%

OS: OUTREACH SUPPORT: 2/46 = 4%

CHILDCARE, EARLY EDUCATION:

Comments:

*Teachers in the center were good with the children

*Sign Language helped with self esteem and communication. Child bonded with caregivers

*Social skills for son

*Social development

- *Sign Language helped communication at home
- * "all of the care givers were excellent", child developed great language skills
- *Excellent for infants. Gave Mother peace of mind.
- *Great!" Mother appreciated staff's patience and understanding of youth
- *Liked the connection between Growing Together and Elders Center
- *School readiness
- *Child was happy there
- *different age groups made for a better education for children
- *child learned to socialize and lots of other things
- *Helped her child find the 'gift within'. No tension in the centre
- *her child was comfortable in groups; he had very good communication development and social development; he interacted with others well. Daily reporting and consistency of caregivers were beneficial
- *Interaction with other children taught him to be sensitive to others needs
- *still uses sign language
- *GT taught social skills and kept children in a routine. Provided a foundation for reading, and routine to get up and go to school.
- *learned Sign Language; the child care was especially well managed. . "My child is the person he is because of all the love and care he got at that place."

PARENTING PROGRAMS/GROUPS:

Comments:

- *Parenting programs were beneficial. Gave her skills to be a better Mom
- *Extra support from other Young Parents with similar backgrounds
- *Community Kitchens and Parents Group were helpful
- *Sharing child development charts
- *Enjoyed cooking classes , parenting was easier and Parents Group was fun
- *Child development questionnaire
- * "really enjoyed parenting courses"
- *Food programs and Community Kitchen were beneficial

- *Parent & Tot reading program
- *Parent education was the most helpful, Super Host, Community Kitchens and Food Safe
- *Community Kitchens, making bread, curried chicken and challah. "It gave me confidence".
- *Nobody's Perfect "helped her find herself as a parent and influenced her career choice in child care" . . . art classes at Parents Group were beneficial. The Parenting Education was a strong foundation for believing that she could trust others to care for her child so she could get an education
- *liked Community Options Society Parent Support Group; even though she was young, having this support with her first child made parenting her second and third children easier;
- *Helped her develop a good relationship with her daughters, set the foundation for communication and closeness;
- *Liked the parent/tot reading program.
- *Parent programs helped with time management. Community Kitchens helped with nutrition
- *Parent Support Group
- *Being with other moms in Parent Support Group
- *Mom's group
- * "You can never have too much education on parenting", Nobody's Perfect and Community Options Society were helpful.

ADULT ROLE MODELS, MENTORING & SUPPORT:

Comments:

- *Staff "were so there for me"
- * "Very supportive and understanding staff" . . . "very beneficial"
- *Patience of the people who "understood"
- * "encouragement and empowerment for her as a young parent
- *They gave support and friendship
- *Work experience in the baby room. Learned you can work with a special needs baby.
- * "She learned to be patient when the baby cried. Staff respected her need to pump and feed. She felt respected.
- * "It was the staff supporting us, helping us to learn to be parents when we were still growing up ourselves."
- * "She was heavily supported in caring for her girls in so many ways"

* "You were all just like family for me". She succeeded because of all the support.

*Support changed her life and gave her direction

POSITIVE ENVIRONMENT FOR CHILD AND MOTHER:

Comments:

*Non judgemental

*Flexibility

* "like an extended family"

*Very flexible , her child loved it! staff were supportive

*Child bonded with caregivers, "family feeling"

*Open door policy appreciated, "friendly and caring" . . . "built trust"

* "peace of mind"

* "friendly and caring", responsive to her individual needs, flexible

*being able to help out was fun

* "He was happy there (child)"

* "There was lots of respect" . . . "It made her confident."

* "Everybody should know that the ladies there were absolutely awesome. I will never forget all of you."

*No tension

*Transparency , "open door" .

*Peaceful, happy, welcoming atmosphere, very positive, feeling of family, "When you're 17, that's big."

*Liked schedule and setting, "It was wonderful." Enjoyed crafts and being creative.

PROXIMITY TO SCHOOL:

Comments:

*Able to form attachment with her baby

*Having child close to school

*No separation anxiety

- *School was right beside child care. Good home and school communication
- *Would not have left her baby far away
- *Enjoyed going for lunch with her child
- *She was able to look out the window during classes and see her baby, less anxiety for her and her child, better for bonding and feeding
- *Able to breastfeed and pump; staff "checked in with her about the baby"
- * "like a dream!", able to breastfeed
- *Open door policy where parents could be with their child
- *Had no car so having the school close by was helpful. "You could just be there for your child."
- *Appreciated being able to "peek in" on her child.
- * "It was comforting to have my child next door and I was able to pop in and also able to focus on my studies."
- *Able to breastfeed
- *She did not want to be away from her child
- *Good to have her daughter close by

PEER SUPPORT AND FRIENDSHIPS:

Comments:

- *Social support with other teen parents
- *Friendships with other mothers are still in place
- *Still keeps in touch with man parents, children are friends
- *Made friends and is still in touch with them
- *Enjoyed sharing with others who were going through the same experience

HOME MANAGEMENT SKILLS:

Comments:

- *community kitchens, budgeting
- *Cooking classes, home management
- *Food programs and community kitchens
- *Super Host, Community Kitchens, Food Safe helped her get work

- *Learning to make bread, etc. inspired her to be self sufficient
- *Community Kitchens got her interested in making food and had a huge impact
- *Life Skills training
- *" I can still feed my children healthy and cheap; community kitchens was the best!"
- *Cooking
- *Nutrition

COMPLETION OF EDUCATION: 11/46 = **24%**

Comments:

- * "Could not have gone to school without it."
- *Encouraged the mother's continuing education
- *Helped her finish school and choose career
- *Could not have left the baby far away. Would not have gone to school. Would be on welfare without it.
- *Able to keep baby and get an education
- *Could not have gone to school without it, gave her an opportunity to progress in life
- *Helped her complete her Child and Youth Care studies
- *Helped her complete course at Spratt Shaw and find work
- *Gave me the routine to get up and go to school
- *She only needed one more credit to graduate and she did it because the child care center was right there beside the school
- *The mother thought it would not be possible to get an education. The program let her know that it was possible.

OUTREACH SUPPORT:

Comments:

- * The outreach community resources
- *Home visits

GENERAL COMMENTS:

- *A wonderful resource that should be widely available

- * "entire aspect was beneficial" . . . "always thinks of program, daycare and school and all that it did for us. . . It was truly one of a kind."
- * "Would not have gotten head without it!"
- * "all was helpful, she liked it all"
- * "It gave her a head start in life to be able to better herself rather than being a welfare statistic; she doesn't know how she found us, but she's glad she did."
- * "Everything offered was beneficial."
- * "Growing Together was one of the best and happiest experiences of her childhood."
- * "Thank you for all that you gave us. I don't know what I would have done without you. I was so young (15)."
- * "Growing Together got her on track and influenced her life."
- * "The whole thing was good."
- * "She would have had much more struggle in the last fifteen years -- going to school and work was not such a chore, because of all the support. So she succeeded."
- * "whole thing: . . . it "changed her life"
- *well managed
- * "it kept me positive" . . . Helped her to succeed

Part 1. Data Analysis and Implications

a. Interviewer Impressions

Mary Dolan states that, "The majority of the responders had attended long term and experienced long term benefits. My general impressions were that the outcomes were very positive. Parents were deeply appreciative, especially of their ability to keep their children close to them. They seemed to have overcome the stigma of having a child while young. It was encouraging to see the number of families who used the opportunities given to them and are now self-sufficient.

The trends I noticed were:

- the goals that mothers employed to focus their lives; several had high aspirations.
- that so many desired to continue their education on an ongoing basis. that the cycle of poverty was predominantly broken for this group of Young Parents who were at risk.
- that the cycle of low expectations for their children was broken."

b. Summary of Part I Research Results

The high rate of response is an indication of the far reaching implications of early intervention in the lives of young parents and their children.

One third of the surveyed group are First Nations.

This study is based on maternal responses only. There is a need to survey father and father figures to determine their needs for programs and services and how to further encourage and support their involvement in their children's lives, beginning during gestation.

94% of mothers continued to care for their children. 55.5% of fathers or father figures were involved long term with their children.

55.6% continued to participate in quality child care programs after Growing Together. This is a contributing factor to positive child outcomes. (Are parents who have had successful initial child care experiences more likely to place their children in day care?)

96% of children were considered by parents to have excellent or good health.

91% of children were perceived by parents to have excellent or good progress in kindergarten and grade one. 45% of children continued to demonstrate excellent academic progress in school. However, they reported that 13% experienced learning challenges, 11% reported social challenges and 4% reported health challenges that impacted academic progress.

65% of mothers graduated high school, or its equivalent. 54% had some post secondary education. The average education attainment was two years post secondary.

93.5% of mothers were not on social assistance. 37% of mothers owned their own home. 85% of mothers owned their own vehicle.

68% of moms are active in their community, many of them extensively.

Rather than being a social capital expense, these moms are clearly an asset.

Mom's accessed community resources for 51% of their children.

Mothers were very goal and future oriented.: 59% wanted to further their education; 37% were determined that their families succeed; 47% desired employment satisfaction

The benefits of GT that mom's valued the most, in rank order:

- 1 - Quality child care 43.5%
 - 1 - Parenting programs and group 43.5%
 - 2 - Positive environment for child and mother 35%
 - 2 - Proximity to school 35%
 - 3 - Adult role models, mentoring and support 24%
 - 3 - Completion of education 24%
- Close 4th: Home Management Skills

PART II

CONTEXTUAL RESEARCH REVIEW AND DISCUSSION:

What has made Growing Together's '93-'98 program so successful? How do we continue to ensure that success? What does the research say?

- i. What does research say are the effective practices of young parent programs?**
- ii. What aspects of Growing Together's 93-98 Program aligned with "Best Practices"?**
- iii. How does current practice at Growing Together compare with Best Practise exemplars? What has changed?**
- iv. Recommendations: How can we ensure continued success of the Growing Together program?**

The following is a summary of the researches best practices to support young parents and their children, based on Sitara's 2009 "Programs and Services for Young Parents: A Scoping Review" (section 6, pages 23 - 29). These practices present a framework for analysis that helps us to identify which salient aspects resulted in Growing Together's 1993 - 1998 successes. They also provide us with a template upon which to base future successes, and to inform policy.

i. **What does research say are the effective practices of young parent programs?**

1. BEST PRACTICES: RECOGNIZE THE UNIQUE NEEDS OF YOUNG PARENTS IN DEVELOPMENTALLY APPROPRIATE AND AGE SPECIFIC PROGRAMS THAT THEY ARE INVOLVED IN CREATING

“Some practitioners suggest that young parents need to be recognized as a **specific client population** with needs that should be addressed in ways that are developmentally appropriate and age specific.” (Sitara, 2009, p1) This includes providing “**flexible projects** without rigid activity schedules which are able to respond to client needs as they arise.” . . . “Activities and supports based on the interests and skills of the participants . . . **strengthen parent self-confidence**” . . . and “providing services that young parents want.” (Ibid,p26) Therefore, “best practice guidelines in program and service provision support placing youth more centrally in **program creation and delivery.**” (Ibid, p1) Sawtell et al. recommend “**work with young people**, not just for them, to maximize effectiveness and ownership, ask them what they want, again and again, and act on what they want. (2005, p2) ”

2. BEST PRACTICES: STRENGTHS-BASED APPROACH TO PROGRAMMING AND SERVICES

“Based on a consultation with young parents between the ages of 16 and 25, Planned Parenthood of Toronto reports that “stigma is one of the most pervasive issues facing young parents.” (Planned Parenthood of Toronto, 2005) According to the Toronto Report, negative assumptions by the general public as well as service providers about teen pregnancy and parenting creates added difficulties for young parents.(Sitara, 2009, p14) “A more **positive strengths-based approach** to youth pregnancy and parenting by service providers can (also) begin the process of eliminating the stigma associated with young parenting and help to ensure better outcomes for young parents and their children.” (Sitara, 2009, p1) “**Establishing positive goals** (such as children thriving, school readiness, and normal child development) rather than goals solely tied to reduction of negative outcomes could help to significantly reduce stigma (Batten & Stowell, 1996, p32), Staff attitudes, empathy and communication skills are central to a successful program. **Respectful, “positive and non-judgmental attitudes by service providers** are highly valued by these young clients” (Ontario, 2007, p14) J. Stratham suggests that characteristics in service workers “which families in crisis appreciate and value include **reliability (keeping promises), respect, practical help, the ability to give support, time to listen and to respond, and seeing their lives in the round rather than just the problems**” (2004, p594)

3. BEST PRACTICE: FATHER FRIENDLY AND INCLUSIVE

“Nine times out of ten it has been the young mother who is the custodial parent and who will be there throughout the life of the infant” (M. Turpel-Lafond. Banquet Address, Forging Futures Conference 2008) This has arisen in part because “fathers have on the whole tended to be ‘neglected or misunderstood’ in the development of service provision” (Coren et al., 2002, p100) Fathers, children and mothers will benefit educationally, emotionally and financially if fathers are supportive and involved.

“Boys need preparation for fatherhood” (Planned Parenthood of Toronto, 2005, p15) “Increasingly, researchers and practitioners are emphasizing the importance of targeting teen boys and young men” (National Campaign, 2006) Young Parent Program’s need to “shift in language from “teenage mothers” to “Young parents” to be more respectful and inclusive of young fathers (Batten and Stowell, 1996,p43), “providing positive images of young fathers” (Sitara, 2009, p24) More significantly, YPP’s need to involve fathers in programs and program development. In particular, “there is a new emphasis on fathers and on **making programs and services “father-friendly” and more inclusive.**” (Sitara, 2009, p1) “The hope is that father-friendly environments will increase fathers’ long-term commitment to and engagement with their family (Batten & Stowell, 1996,p43)

4. BEST PRACTICE: CONNECT YOUNG PARENTS TO COMMUNITY RESOURCES

“Parents need adequate social and economic supports in order to fulfill their obligations. (Riordan, 2002, 160)” “In order for these young families to thrive, they may need numerous supports, including food, housing, mentoring, child care, and education.” (Sitara, 2009, p0) YPP’s need to **“enable parents to become more active in their own community by introducing them to other services and people.”** (Riordan, 2002, 159) “Services need to be accessible, embedded in community and trust needs to be established “between carers and the community (Sims, et al, 2008, np)” (Sitara, 2009,p25)

5. BEST PRACTICES: SUPPORT CULTURALLY DIVERSE YOUTH AND CHILDREN

“Multicultural approaches to child care have been found to be important to a child’s cognitive development and positive adaptation.” (Batten & Stowell, 1996, p10) **“Cultural relevance and sensitivity is recommended for all aspects of service provision, from nutrition to counseling, for mothers and children alike.”** (Sitara, 2009. P25) Recognize and address different cultural views around “attachment and bonding, parenting styles, . . . sexuality, birth control, . . . food and nutrition” (Ibid,p24) Respect diverse family patterns.” (Ibid, p26) “Indigenous children need services that supports a strong cultural identity to enable them to move into the school system and experience success. (Sims et al, 2008, “Indigenous child care - leading the way”)

ii. According to Best Practices, what aspects of Growing Together’s 93-98 programs and services contributed to successful outcomes for young parents and their children ?

In the words of Mary Dolan, “Growing Together was and is one of a kind, and a fore runner in the establishment of best practice. We have always been blessed with excellent staff, both here and with the leadership at C.V.O.L.C. (Cowichan Valley Open Learning Center)”. “The group of Early Childhood Educators employed during the first five years took university courses in child and youth care in order to develop professional knowledge and skills for working with youth. Staff were committed to the program, providing staff stability. This enabled one of the fundamentals of child and youth care to occur which is the building of trusting relationships”. It seems that dedicated, highly empathic staff with excellent communication and problem solving skills facilitated a family centered experience based on an open door policy, respect and empowerment that exemplified many best practices

“We recognized the complexity of the mother’s life. We respected the mother and father and the family culture. We believed in the parent’s ability to succeed if she or he was given the opportunity. Empathy was felt for the poverty issues. I believe we were ready always to support and assist creatively when necessary. We did this without judgment and always (with) encourage(ment). We listened to the parents and asked them what they needed or wanted to participate in and tried to arrange for that. Having the child and youth workers and a very flexible academic program worked well. The young parents began to trust and also to speak up and advocate for their children. They had time to make friends and practice social skills. The diaper service and food program and the ‘no parent fee’ for child care, assisted in minimizing the effects of family poverty. (Staff were) very flexible, maintaining the space for a child, outreaching and supporting in crisis, welcoming back the family when ready to focus on school again. Bringing on site services and also field trips out in to the community as well as community partnerships helped to build trust and confidence.” Parents and children were provided with a spiritual dimension through the Virtues program, and through Random Acts of Kindness.

Ms. Dolan goes on to describe the informal but crucial benefits of “kitchen visits”, the heart of the open door policy:

“The kitchen . . . had been a casual meeting place for parent staff interactions and much informal parenting skill information was transmitted. Also social skills were strengthened during the kitchen visits due to positive role modeling and a relaxed environment for peer interaction and peer support.”

It appears that a foundational strength of Growing Together between 1993 and 1998 was the reliability of staff in keeping promises, their respectfulness, providing practical help, supportiveness, time to listen and to respond and seeing the potential in client’s lives. Within this trust relationship, staff were able to build programs tailored to young parents needs -- flexible, client centered, strengths based programming that built their self confidence. This confidence was reinforced by making lasting community connections and thereby establishing a resource base of skills, knowledge and expertise and relationships that endured beyond the parents years with Growing Together. Interestingly, Growing Together has blended in the First Nations culture of (mostly) Cowichan Tribes. Although this was not a goal, this arose from a focus on parents as the most important person in the child’s life. Individual parents taught the staff their customs and traditions, including welcoming extended family into the center. Although successful in most aspects of Best Practices, Dolan adds that “we did welcome and involve fathers and manage to build trusting relationships with some, however not a high percentage (participated).”

iii. How does current practice at Growing Together compare with Best Practise exemplars? What has changed?

Dolan reports that:

“Since 2001 in particular, it has been more difficult to offer such a flexible program. Students needed to spend more time on academics. (This has resulted in them spending) less time in the child care center. A higher percentage of students were mandated by the ministry to come to the program because their child was deemed at risk or was in the care of the ministry. . . . The number of students at alternate school increased and it was more difficult for the school to give a parent group room to use. Although they always tried to accommodate, it was not the same as the parents group having its own space. . . . (In addition, due to the increased responsibility or more involvement with MCFD family conferences, etc., it became necessary to attend to the real and expressed needs and entitlement of staff to have peaceful breaks. ” Staff now have a separate staff room.

One impact of the outcomes of the '93-'98 program was the strength of parents relationships with each other, continuing on into present day. The loss of this is difficult to measure. These friendships helped to minimize the isolation and stigma that can come with being a teen parent , built self esteem and mitigated stress.

In addition, current Director, Kathy Williams points out that many parents are now going to Adult Education and are not on site to attend groups. Larry Mattin, current Administrator of both The Cowichan Valley Open Learning Center (CVOLC) and Cowichan Valley Alternate Education (CVAE), confirms the regimentation of student programming, pointing out “We are bigger. We have fewer Student Support Workers. We offer more elective opportunities. Our time table has changed from 2 blocks/periods per day to 5 periods per day. We try to offer both a full 2004 grad as well as an adult grad. . . . This meant that students went from needing 13 courses to graduate to 20 courses. . . . With the new grad came a number of (additional) barriers to our learners: grade 10 provincial exams, mandatory PE.”

The close ties with parents, children and staff that beget many of the “best practices” are further eroded by Community Option Society no longer providing a Community Support Worker to trouble shoot and liase. A community support worker is a vital program link to provide the flexibility and support that young parents need to succeed. Their services include important community networking, linking parents to community resources and band resources, as well as crisis intervention. A CSW can intervene in a crisis that might otherwise preempt a young parent’s education, making it a bump in the road instead of the end of the road. Staff have been spread even thinner at the center by now providing supervised visits for parents to see their child who has been moved in to the care of the ministry. More high risk families mean more problem solving, which can put a strain on today’s GT staff, who are primarily trained in early childcare and education. Early Childhood specialists have limited training in dealing with emotionally charged young parents, at times forcing them to juggle parental crises while attempting to provide stability and a positive safe environment for children. While the CSW is a vital link for parents and a huge agent in flexibility, proper preparation of staff cannot be overlooked. Early Childhood Education now only covers one Child and Youth course, one communications course and one course on families. Recent graduate, Jessica McPherson feels that she needs to be certified in Child and Youth care to be fully prepared to meet the challenges she faces in her job. While a CSW can develop programs to suit young parents needs and can do such things as run a parent drop in center, it is clear that the most important relationship is between the childcare staff and the parents. They are the ones

who role model and mediate parental development. Williams cites the cut backs in the amount of Child and Youth care workers hours at CVOLC as further reducing supports to parents.

Despite these limitations and challenges, Growing Together continues to be successful and to grow in many areas of best practice. The tradition of staff as facilitators and growth agents for young parents continues to mentor parents in positive and healthy ways. The center continues to provide strength based parent centered programming by focusing on each parent's unique needs.

Greater structure and less flexibility has made good communication and close ties between G.T. staff and parents essential. Staff try to maximize relationship development and build trust at early morning drop off times, and through the children's daily communication books. Executive Director (E.D.) Kathy Williams describes the central impact of the infant room. "(The) infant room is the first contact. This is where staff focus on making parents feel at home in the center," and establish relationship foundations. She explains that parent centered programming today tends to be informal and individualized. The center continues to be "open door" in that parents are always welcome to visit their child. Williams emphasizes that all learning is parent centered and that this is inherent in the staff's relationship to parents and their children. "When the parent is in the center, the parent is in charge of the child. Staff wait for parents to come to them with problems. This establishes that the staff is clearly a resource and support for the parent and builds parent self esteem and confidence. When guidance is given in parenting skills, it is given respectfully." Staff work along side parents as they interact with their children, to role model and enhance their parenting skills. Infant programming in particular is based on the needs of the parents, built around the time parents need to be in class, and focusing on the skills they request more information on.

This communication has become even more essential with parents whose children are in ministry care. Bonding, teaching and learning become very compacted as this is the only time the parent experiences contact with their child on a one to one basis. This has added challenges to multiple aspects of supporting the parent.

To help facilitate bonding between parents and GT staff, Administrator Larry Mattin keeps all young parents (with children in the infant room) at CVOLC, which is on site. Close communication is required between GT staff and staff at CVOLC and Adult Ed. Williams has initiated breakfast meetings early in the year to build rapport and to provide opportunities for CVOLC and Adult Ed. This strengthens the ongoing relationships and provides alternate education staff the opportunity to ask questions and gain insight into programs, GT staff and parents needs.

Despite the richness of these strengths in best practices, wryly, Williams concludes that, there is "less celebration of parents because they're not on site."

The greatest growth has evolved in three “Best Practices” areas: connecting young parents to community resources, making the program father friendly and inclusive, and supporting culturally diverse youth and children.

Linking to community resources has also evolved to be more individualized today. GT staff refer parents to the Executive Director to link them to other community supports as requested. Ms. Williams notes that GT now connects their parents to a wider array of resources. These include mental health referrals, connecting parents with free food, “Good Food” bags for \$10.00/month, more health and clinic referrals, the Clements Center attending GT to provide occupational therapy and speech and language therapy, assistance applying for birth certificates and family allowance, referrals to subsidized housing, help to find rental housing and connecting parents with other parents.

Williams has noted that fathers are definitely more visible at the center these days. Four fathers participated in a UBC study on children and safety. She attributes this to a number of factors: “Fathers are encouraged to participate in all levels of the program. We post pictures of fathers and mothers interacting with their child to visually express this inclusion. “ . . .”Fathers are welcome, even if the parents are not together. (In fact,) the center will not restrict a father’s access to his child without a court order.” Administrator Larry Mattin and three of his male teachers at CVOLC have young children. They provide good role modeling for dads and encourage fathers’ active participation by example. If parenting groups form, they will be open to both mothers and fathers when it is in the best interests of the group. In the past, young mothers have felt more comfortable limiting the group to other young mothers. For now, GT directs fathers to a Dad’s group held once a week at the Duncan United Church. To provide a fathers group on site that could focus specifically on the challenges of being a young father (anger, immaturity and communication issues are noted by Ms. Williams), GT would need a leader.

From a parent centered basis, the cultural representation of First Nations at GT has grown. Traditions such as not cutting finger nails and hair for the first year of life, covering mirrors if there has been a death in the family, and supporting the practice of parents chewing food then giving it to the baby are now accepted routines. Cultural foods are part of the menu on special days and in some cases, incorporated into the weekly menu. Drums are available in the centre for playing at all times. Parents are encouraged to bring in cultural items from home to enhance the program delivery. The center has CD’s of traditional Cowichan music which they play. The First Nations community resource, Tsewul H Tw health center comes into the center to consult on health, dental and parenting issues.

iv. Recommendations: How can we ensure continued success of the Growing Together program?

The Growing Together program ‘93 - ‘98 clearly succeeded in providing essential bridging that allowed parents and children to succeed against the odds. Their outcomes correlate highly with a successful embodiment of the Ministry of Labour and Citizens Service’s Best Practices research (“Programs and Service for Young Parents”, January, 2009). Although the GT program of 2009 - 2010 continues to have many strengths, the conditions and constraints they exist under have changed. In order to see similar results, this program and its staff need a variety of supports.

The contextual research review at the beginning of Part I of this paper establishes that more young families than ever are living in poverty as of 2009. In general, programs that address the needs of both parents and children are seen to be essential to reducing the risk of continued poverty and its long term impacts on child and parent health, educational achievement and long term ability to integrate with and contribute to society. In particular, young parents confront the greatest risk of all and are the most vulnerable members of this population.

Although this population is decreasing in general, among Aboriginal births, "70 percent of new First Nations families on southern Vancouver Island . . . are starting with teenage mothers and, in many cases, teenage fathers as well" (Olsen, 2005, p13). "Thirty to 40% of status Indian babies born each year are mothered by women less than nineteen years of age." "For Aboriginal women under fifteen years of age, the rate of birth is estimated to be as much as eighteen times that of other Canadian teens the same age." (Olsen, 2005, p22)

With Growing Together's Cairnsmore location in a low socio economic setting, and proximity to several bands, demand for Growing Together's services will not only remain steady in the future, but is projected to increase. Giving them the support they need to do their best work just makes sense. Investments at this level of programming are a cost saving to MCFD down the line. **This is effective social intervention.**

The list of needs spans both long term and short term goals and involves initiative both within the centre itself and beyond, to the community it serves. Advocacy that creates awareness of the effectiveness of Young Parent Programs and the growing supports needed by young must occur, possibly through the Executive Director and the Board of Directors. Young parents who are willing to share their stories could be a powerful part of this. Advocacy efforts should include a call for a comprehensive poverty reduction strategy for B.C. We have fallen behind several other provinces in this.

The community and the government need to be reminded that Canada comes last in its services to young children as reported by Unicef (2008) (Vancouver Sun, September 22, 2010). Alternatives to foster care for babies of teen parents need to be provided. Growing Together advocates that Serenity House be recognized and funded by the Ministry. Adequate funding for YPP centers needs to occur. Currently, they are funded for twenty days per month, when the average month provides twenty-two days of care. A sister centre at Vancouver Island University is needed to provide students in ECE and C&Y with exemplars of Best Practices and to provide quality care for the children of young parents going on to further education.

With greater complexity of young parents and their childrens needs and a wider array of community resources to be consulted, true collaboration is vital. Time must be set aside for Team Meetings, to be facilitated by the Executive Director. Staff need to be aware of Sitara's "Best Practices" research. Best Practices need to be made into policy to focus goal setting and regular program evaluation.

Foremost to supporting Best Practices at Growing Together would be the hiring of a Community Support Worker, which has already been done for 2010-2011 for this year only, as Growing Together's

budget cannot sustain the cost. Both male and Aboriginal employees should be considered. Young parents should be surveyed when they register to assess their needs and guide the ED and CYW in their programming.

The next most pressing goal would be to provide space at the center for a parents drop in room. While the CSW will be a vital link and can enhance areas of practice, including providing outreach to fathers, it is the staff who are on the front line, forging the vital trust relationships with parents and teaching them vital self advocacy skills. Their job entails far more than just E.C.E.. YPP workers should at least have C&Y coursework that includes communication skills, poverty education and adolescent psychology. ECE workers in general are underpaid for what they do and the impact they have on society. Additional coursework in working with special needs infants and toddlers would be an asset, as would ECE First Nations training. For staff already in the field, at least partial employer support in pursuing further education and professional development would be a strong incentive. An interim measure would be to hire an aboriginal outreach worker who has some training and sensitivity to young fathers, their issues, risks and challenges.

Administrator Larry Mattin would like to see the Child and Youth Care worker time increased at CVOLC. The transition to more stringent graduation requirements and greater structure that accompanied this cutback initially resulted in almost no graduations. Though that number is slowly increasing, Mattin feels CYC workers would empower the students most at risk. Mattin would like to see the development of a Family Studies 12 course to enable all future parents in their optimal development. Dolan recommends First Nations cultural studies to enable First Nations young parents to work with the tribes. Williams suggests that an interim, partial solution to parental bonding could be fulfilled by providing a PE program at the school that has a social focus and emphasis on parent's utilizing their planning skills to access community recreational resources.

Meanwhile, practical aspects of running the program cannot be overlooked. Currently, young parents are required to provide an additional \$100 per month to cover the cost of the program, if they have birthed their child after their 20th birthday. This continues until their child turns 18 months old. The fees are then increased to \$215.00 for children 18 months to 3 years old.. This is prohibitive and actually has resulted in some of GT's young parents dropping out of school. Scrapping this additional fee would mean enhance a young parent's budget, adding funds that could be best spent putting food on the table and finding adequate housing as early on as possible.

Growing Together, now fifteen years old, is in need of repairs that place a strain on their operating budget. In addition," operating costs such as utilities and food have increased dramatically and the YPP rate from subsidy has not changed in 10 years," according to E.D. Kathy Williams. Without Ministry funds to address capital expenses and inflation, the Board of Directors will have to allocate funding to meet these needs. This will no doubt impact critical funding for programs.

The future is continuing to unfold whether we're ready to meet it or not. Our vision and our willingness to adapt are crucial to the continued success of Growing Together. Hopefully, this research will enable closer communication between Ministry support personnel and decision makers, our Board of Directors,

and our greatest asset of all, our staff, who have made all these successes a reality through their sense of vision, dedication, commitment and hard work.

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