

The agenda for the **Special Meeting of Council** to be held in the **Conference Room** of the Municipal Hall, 8645 Stave Lake Street, Mission, British Columbia on Wednesday, May 21, 2014 commencing at 3:00 p.m.

1. CALL TO ORDER

2. ADOPTION OF AGENDA

3. NEW BUSINESS

(a) Social Development Commission Workshop

- i. Introduction and Agenda Review – Kirsten Hargreaves
(3:00~3:10 p.m.)
- ii. 40 Developmental Assets as a Foundation for Community Development – Keith Pattinson (3:10~4:00 p.m.)
- iii. Mission Community Profile – Kirsten Hargreaves (4:00~4:15 p.m.)
- iv. How Are Mission's Children Doing? – Laura Wilson (4:15~4:50 p.m.)
(including "How Brains Are Built" – 4 min video)

BREAK (4:50~5:00 p.m.)

- v. Housing, Women and Harm Reduction Distribution Program – Dorothy Henneveld (5:00~5:40 p.m.)
(including "Surviving Not Thriving" – 9 minute video)
- vi. Reacting and Adapting in 2014 – Kirsten Hargreaves (5:40~6:00 p.m.)
(including "Healthy Living, Public Policy Makes a Difference" – 6 min video)

(b) Social Development Commission Recommendations to Council

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4. ADJOURNMENT

DATE: May 21, 2014
TO: Mayor and Council
FROM: Kirsten Hargreaves, Manager of Social Development
SUBJECT: **Social Development Commission Recommendations to Council**

RECOMMENDATION(S): Council consider and resolve:

1. That one time contributing funds in the amount of \$1,500 be given to the Social Development Commission for implementation of a “Middle Development Instrument” (MDI) in Mission funded through the Council Contingency Account with the Financial Plan amended accordingly and;
2. That the Social Development Commission be merged with the Mission Healthy Community Council followed by a staff report outlining the mandate, membership and Terms of Reference for the merged group.

EXECUTIVE SUMMARY:

The community of Mission has actively participated in Early Development Instrument (EDI) data gathering 5 times over 10 years. The Early Development Instrument is a questionnaire developed by McMaster University and utilized across Canada. The questionnaire has 104 questions and measures five core areas of early child development known to be valid predictors of adult health, education and social outcomes. This questionnaire is completed by Kindergarten teachers across British Columbia for all students. Results are considered a population level research tool measuring developmental change or trends in populations of children at varied geographies: provincial, regional and by neighbourhood offering us vulnerability rates by geographical area. To date, approximately 2,300 Mission children have participated in this data collection. We are now well positioned to facilitate a Middle Development Instrument (MDI) with grade 4 students in Mission to set up indicators of social health that span the school years providing us with longitudinal data.

The mandate of the Social Development Commission is to contribute to the realization of the District of Mission’s vision by facilitating the implementation of the Social Development Plan. In 2006, Council prioritized the creation of a Social Development Plan for Mission. This decision was in part, a response to social concerns in our community. Community forums were held identifying community priorities resulting in the first Social Development Plan. In January 2009, the Social Development Program switched gears from working with the community in the creation of a plan to working with the community to implement the plan. Social Development in Mission encompasses a Manager, a volunteer based Social Development Commission, volunteer working groups and related projects and events. A living document, the social development plan has broadened over time to incorporate new groups, projects and events evolving with both need and community energy. We are now in a 5 year review period.

PURPOSE:

The purpose of this report is to provide background information and accompanying rationale to Mayor and Council on the two recommendations outlined in this report. It is expected that this information will contribute to a more informed decision making process.

BACKGROUND:

Middle Development Instrument

The EDI defines child vulnerability as the portion of the population which, without additional support and care is at increased risk for challenges in school and in the community. Collected in groupings referred to as waves, each wave contains data collected from several consecutive school years. The Human Early Learning Project (HELP) through the University of British Columbia utilizes this information to create maps, graphics and reports that summarize results for individual communities. This information helps communities, schools and Governments better understand how children are faring both in individual communities and across the province. Equally important, this information directly contributes to child serving agencies in Mission to help them tailor the services they offer to ensure they are appropriate and serving true need.

Many community level groups in Mission rely heavily on EDI data to inform their work with children and families by identifying strengths and needs in Mission. The Ministry of Children and Family Development and Ministry of Education use EDI data to plan early childhood investment, policy and program development. In B.C. community level researchers use EDI data to address important questions related to the genetic, biological and social determinants of children's health, wellbeing and development also informing community policy and program development.

Childhood experiences in the middle years (ages 6 – 12) are also strong indicators of adolescent adjustment and success. It is equally important to understand how Mission's children are faring in the middle years. The Middle Development Instrument (MDI) is a self-report questionnaire completed by children in Grades 4 and 7. All questions relate to the five areas of development strongly linked to well-being, health and academic achievement. This is a unique opportunity to hear genuine youth voices of Mission on their experiences in the Mission community. This information would allow us to provide educators, parents, community agencies, programmers, researchers and policy makers with rich and otherwise difficult to obtain information on the social and psychological worlds of children in middle childhood allowing us to collaborate together in creating a positive Mission environment in which children do more than simply survive, they thrive.

Merging of the Social Development Commission and Healthy Community Council

Social Development Commission members have always hoped to be utilized in an advisory capacity to Council. While never utilized in this way, the Healthy Community Council also came into existence in 2009 as a way to maintain action items outlined in the community health plan. While the Social Development Commission was responsible for oversight and creation of the Social Development Plan, it is the working groups that do the work on the ground. Recently, there has been growing awareness and frustration in the amount of overlap between the Social Development Commission and the Healthy Community Council. Thus, we believe the only logical step moving forward is to merge these two groups thereby decreasing meeting burnout, overlap and merging energies to work collaboratively on projects that benefit the social health of the community.

A community workshop held on December 5, 2014 called "Silos to Systems" drew together diverse community partners for learning and dialogue on how we as community agencies can work together more effectively and in a more coordinated fashion. One of the outcomes of this workshop was an identified need for a merger between these two groups. Currently, the Healthy Community Council is working on a Community Health Plan. This plan aims to merge the social and health sectors

recognizing that evidence based practice suggest these two spheres are interrelated and damage is done when they operate as silos. There is growing momentum in Mission right now among both health and social sectors to operate through the “Every Door Is the Right Door” approach.

DISCUSSION AND ANALYSIS:

Middle Development Instrument:

To better support Mission’s children and provide our Municipality with streamlined data over time, The Social Development Commission is recommending that a onetime grant of \$1,500 be contributed towards the total cost of implementation. Mission School District #75 and Mission Ministry of Children and Family Development have each committed to \$1,500. The five categories to be measured include:

- social and emotional development
- connectedness
- school experiences
- physical health and wellbeing
- constructive use of time

Results of the EDI of Mission’s children would be presented to Mayor and Council as well as community groups following the receipt of these results. The Social Development Commission is making a concerted effort to gather and monitor social indicators of health in Mission. We feel it is integral to capture and measure vulnerability statistics of our youngest citizens so that we may better support them as they grow and be prepared with appropriate programming should they need it. The MDI is not dependent upon socio economic status alone. Children across all income groups can be at risk for less time connected to adults and unhealthy home lives. Research has demonstrated that children in grade 4 give reliable and valid responses to the MDI questionnaire, helping us prevent problems before they start. We would like Mission to join the 23 Municipalities across British Columbia participating in the MDI.

Merging of the Social Development Commission and Healthy Community Council:

As both these groups are Committees of Council, this recommendation is coming forward first to Mission Mayor and Council before the respective committees. We do not foresee much change taking place as an outcome of this merger. As part of our 5 year review, the Social Development Commission is currently looking at membership. As the Healthy Community Council membership is large with an average of 50% of regular members attending meetings, this would enable us to engage in a mutual analysis of members ensuring the individuals at the table are a good fit and prepared to engage in work together. A review of process and procedure of the blended group may also be warranted at a later date.

The main foreseen challenge is the need to maintain emphasis on social needs just as we would need to maintain emphasis on health needs. Evidence based practice in Community Development literature tells us that merging health and social sectors contribute to a stronger more balanced approach to community needs. Working groups would continue to operate in the same way, drawing from the stronger, more aligned backbone of the larger group for enhanced collective impact.

COUNCIL GOALS/OBJECTIVES:

The recommendation to merge the above mentioned committees of Council compliment Council’s stated objective in the core service review to move towards decreased overlap and enhance

efficiency.

FINANCIAL IMPLICATIONS:

A onetime donation of \$1500 to the Social Development Commission for completion of a Middle Development Instrument (MDI) with Mission's grade 4 students.

COMMUNICATION:

The Social Development Commission feels strongly that the suggested merger in this report is a logical next step. Following Mayor and Council's decision, the Social Development Manager will prepare and present to the Healthy Community Council on this topic.

SIGN-OFFS:



Kirsten Hargreaves, Manager of Social Development, Parks Recreation and Culture



Reviewed by:
M Sinclair Director Parks, Recreation & Culture

Comment from Chief Administrative Officer
Reviewed