

Policy Internships and Fellowships Program  
Final Report

**Work-Life Public Policy: Vision to Reality Initiative**

**Christine D. Dockman**

Home Position: Program Consultant, Adult Health Unit  
Population and Public Health Branch  
Health Canada, BC/Yukon Region

Host Position: Intern and Fellow  
BC Council for Families  
Vancouver, BC

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*The opinions expressed herein are those of the author and do not necessarily represent the views of Health Canada, the BC Council for Families or the Centre for Voluntary Sector Research and Development.*

The Population and Public Health Branch - BC, Health Canada, BC/Yukon Region agreed to the assignment of one of its employees to the identified host organization for a six-month internship. The following section describes briefly the department's mission and vision, key health approach, policies and strategies. It also includes a brief history of the home branch as well as the purpose, scope, key partners and goals of the branch's British Columbia team.

## Home Organization

Health Canada: Health Canada is responsible for helping the people of Canada maintain and improve their health.

The department is committed to improving the lives of all of Canada's people, and to making this country's population among the healthiest in the world, as measured by longevity, lifestyle and effective use of the public health care system.<sup>1</sup>

More specifically, the department is committed to the improvement of the well-being of Canadians through health promotion and illness prevention. One of the ways in which the department is working to achieve this goal is through the creation of federal funding programs as part of its "Promotion of Population Health Business Line". These programs provide funding, based on specific criteria, to community-based non-profit organizations for the purpose of increasing the capacity of individuals and communities to maintain and improve their health.<sup>2</sup> The purpose and capacity for funding by the department have come a long way since the provision of its first grant in 1902.

Health Canada defines population health as "an approach to health that aims to improve the health of the entire population and to reduce health inequities among population groups."<sup>3</sup> In order to reach these objectives, it looks at, and acts upon, the broad range of factors and conditions that have a strong influence on our health.

The Population and Public Health Branch (PPHB), mandated to attend to the Promotion of Population Health business line, is one of seven branches of Health Canada and has offices in the National Capital Region and in the other departmental regions, namely Atlantic, Quebec, Ontario/Nunavut, Manitoba/Saskatchewan, Alberta/North West Territories and BC/Yukon. The office in BC is located in downtown Vancouver.

Since 1986, the branch in this region has undergone eight structural and/or functional changes. As part of the change process, it has contributed to the national development, and the actual application, of three evolutionary, leading-edge health promotion conceptual frameworks. It has yet to be discerned what kind of impact there will be on PPHB in BC (and in other regions), as a result of the establishment of a Canada Public Health Agency – a 2004 federal Budget commitment.<sup>4</sup>

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<sup>1</sup> Website reference: [www.hc-sc.gc.ca/english/about/values.html](http://www.hc-sc.gc.ca/english/about/values.html)

<sup>2</sup> Population and Public Health Branch - British Columbia, Health Canada, *Highlights of Our Work – April 1, 2002 – March 31, 2003 Annual Summary* (Vancouver: Health Canada, 2003), p. 4.

<sup>3</sup> Website reference: [www.hc-sc.gc.ca/hppb/phdd/approach/index.html](http://www.hc-sc.gc.ca/hppb/phdd/approach/index.html)

<sup>4</sup> Website reference: [www.fin.gc.ca/budget04/pamph/paheae.htm](http://www.fin.gc.ca/budget04/pamph/paheae.htm)

The experience of the past two decades, characterized by continual change, provides a glimpse of the kind of resilience, innovativeness and resourcefulness that staff have had to develop, in order to survive and continue to provide creative and caring support to community groups. It is likely that having to work in times of uncertainty has enhanced empathy for the non-profit sector, which has also faced major challenges over the years as funding from public sources dwindled. To this day, non-profit organizations continue to struggle with sustainability issues.

Population and Public Health Branch – BC Team: The purpose of the PPHB BC Team is to increase the capacity of communities to use a population health approach, with a view to promoting health and reducing inequities in health status. The team provides: funding to communities to reduce health inequities for at-risk groups; support to community partners who deliver PPHB-funded programs; and support to communities to increase community capacity and education about the Population Health Approach (PHA).<sup>5</sup> In fulfilling its mandate, the team maintains effective relationships with key partners, in order to assist at-risk populations.

Our key partners include non-profit organizations that deliver the branch's funding programs, departmental branches, other federal departments and agencies, the provincial government, Regional Health Authorities, municipalities, funding partners, universities, research institutes, and project participants.<sup>6</sup> The Population Health Approach requires collaboration across different sectors, in order to address twelve health determinants – including poverty, early childhood development and working conditions, to cite a few - and their interactions.<sup>7</sup>

As the PHA requires evidence-based decision making, applies multiple strategies and intervenes on many levels - individual, family, organization, community - and through public policy, it can be readily seen how Health Canada could look to community organizations in the non-profit sector, which serve at all of these levels, for input to public policy development. The potential for a natural partnership exists; infrastructure to support this partnership is being provided through the blueprint outlined in *A Code of Good Practice on Policy Dialogue (Building on An Accord Between the Government of Canada and the Voluntary Sector)*.<sup>8</sup>

The Policy Internships and Fellowships (PIAF) Program provides a viable way to encourage and support the practice of the language and interactions of public policy dialogue, as this report will substantiate.

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<sup>5</sup> Population and Public Health Branch - British Columbia, Health Canada, *Highlights of Our Work – April 1, 2002 – March 31, 2003 Annual Summary* (Vancouver: Health Canada, 2003), p. 3.

<sup>6</sup> Ibid, p. 3.

<sup>7</sup> Further information on PHA is available at the following website:  
[www.hc-sc.gc.ca/hppb/phdd/determinants/index.html#determinants](http://www.hc-sc.gc.ca/hppb/phdd/determinants/index.html#determinants)

<sup>8</sup> Website reference: [www.vsi-isbc.ca/eng/relationship/accord.cfm/](http://www.vsi-isbc.ca/eng/relationship/accord.cfm/). The Code was introduced in October 2002, but is still in the early stages of implementation.

## **Host Organization: BC Council for Families (BCCF)**

In 1977, the BC Council for Families (the Council) was established as a non-profit, non-governmental organization following the BC Conference on the Family (1975, 1976). It received all-party support in the legislature, and was established as a partnership between community and government. Since then, the Council has worked on behalf of families and people who serve families across the province.<sup>9</sup>

The mission of the Council is to provide leadership through education, training, advocacy and research, for the healthy development of families. Throughout its 27-year history, the Council has consistently advocated that prevention, promotion and early support must become a valued and essential part of the continuum of supports and services to children, youth and diverse families.

The Council's current programs and services are outlined in the chart in Appendix A and include the following:

- Training and program coordination to support healthy family development
- Resources for families and those who work with families
- Advocacy, research and policy development
- Public education and promotional activities
- New collaborations that promote healthy family development

The Council has received several awards for its work at the provincial, national and international level. The Council is well placed to influence the development of public policy, in view of its history, the scope of its involvement and experience with multiple sectors and issues impacting both BC and other Canadian families, and its extensive networks and levels of collaboration, particularly with governments.<sup>10</sup>

The Council obtains project funding primarily from provincial and federal government sources; other funding sources include foundations, membership fees and publications.

### **The Match**

A colleague at PPHB-BC received an e-mail about the PIAF call for applicants in May 2003, and forwarded it to me because she knew that I was looking for more opportunities to become involved in policy development. For the past 15 years, I have worked in the department as a Program Consultant in the field of health promotion, with various opportunities to support or provide input to the development of healthy public policies. Prior to 1989, I worked for two years as the Director of Nursing in the Arctic during the transfer of health care facilities and services between the federal government and the Government of the Northwest Territories. My background also includes the provision of direct health care services, management, teaching and facilitating in public, not-for-profit and private sectors, running my own private practice, as well as volunteer work, including membership on various Boards and the founding of two non-profit associations.

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<sup>9</sup> Website reference: [www.bccf.bc.ca/main/about\\_who.html](http://www.bccf.bc.ca/main/about_who.html)

<sup>10</sup> C. Matusicky, *Some Facts about BC Council for Families* (Vancouver: BC Council for Families, February 2004).

In 2001, I received a certificate for successfully completing Health Canada's Workplace Health System Training Course at Centennial College in Toronto. My interest in the health of employees and organizations was profiled by: my role in the preparation of a departmental Health Plan in 1990; my experience in providing consultation to organizations in BC seeking direction on the development of healthy workplaces; my role as a union representative mediating conflicts and negotiating resolutions in the workplace; co-facilitation of workshops on creating a respectful workplace with managers and employees; and my involvement in initiating and completing a Health Canada Corporate Environmental Scan (on the status) of workplace health practices for employees, nationally and in the BC/Yukon Region, with recommendations for regional senior managers. Over the past few years, my manager has been aware of my interest in becoming involved in an initiative involving policy development. These and other circumstances came together to stimulate my interest in applying for this PIAF placement - an assignment my branch and department were willing to operationally support through the provision of leave and salary.

I had previously worked with Carol Matusicky, Executive Director of the BC Council for Families, in my capacity as Program Consultant responsible for supporting and working with two unique, multi-sectoral projects, Family Caregiving and the Workplace Conference and Collaboration on Work-Life. The BC Council for Families had advised the first project and sponsored the second. I immediately thought of Carol and considered that she might be equally interested in working with me on policy development. Both of us were aware that the work started on work-life issues was unfinished and needed to be pursued in a different way. I met with Carol on May 15, 2003, and found her to be very receptive to a PIAF placement. As much as the Council would have liked to have participated in an exchange (with the federal government), it was not able to spare its human resources or the salary to cover the cost of both its employee (out) on an interchange assignment and a replacement to work on regular programs in the interim. Other non-profit organizations that applied to the PIAF program found themselves in similar circumstances.

For over ten years, the BC Council for Families has had a strong focus on work/family/life issues. Prior to 1994, the International Year of the Family, the Council had conducted extensive research on the concept of "family friendly." This research produced: brochures on "family friendly" workplaces, recreation places, hospitals and other environments; two extensive, annotated bibliographies on "Work and Family"; and a booklet entitled *Work and Family..Finding the Balance: A Workbook*.<sup>11</sup> All of these products have had extensive distribution across Canada. As well, several workshops on work/family/life were conducted with participants from business, labour, government and the community.

The Council supports research, dialogue and public education on work/family/life issues. With funding from the United Way of the Lower Mainland (Success by 6 initiative), the Council has sponsored a series of workshops for various sectors and has conducted research on BC employers and their workplace policies. I participated in one of these informative workshops.

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<sup>11</sup> Website reference: [www.bccf.bc.ca/cat/wl.html](http://www.bccf.bc.ca/cat/wl.html)

## **The Placement**

The overarching goal of the placement was to enable the voluntary sector, and specifically the BC Council for Families, to become an even more viable partner in the development of public policy.

Because employment falls within the jurisdiction of provinces and territories (except for work in a federal worksite), Carol and I chose to focus on public policy and practices that support work-life balance in BC workplaces, more specifically BC work-life standards legislation. My position at the Council was entitled Policy Intern, Work-Life Public Policy: Vision to Reality Initiative.

As a first step toward the development of public policy on work-life issues in BC, we completed a Community Map<sup>12</sup> to assist us in determining our potential partners in the roles of “collaborators”, “influencers” and “constituents”. As the initiative progressed, it became apparent that more time (than was available) was going to be needed, in order for our efforts to significantly impact the “influencers”, let alone the “regulators”.

During the development of the work plan in November 2003, we realized that, in order to identify any gaps in BC work-life public policy and obtain direction from constituents around what was needed to improve the situation, it was going to be necessary to complete a survey of a targeted population; at that point the internship also became a fellowship and my new title became Policy Intern and Fellow.

The original completion date was targeted for the end of the fiscal year, i.e. March 31, 2004. The placement started late due to a delay in PIAF funding and the remaining term was too short to support the community and developmental processes needed to produce the intended deliverables. Consequently, my home manager allowed for some additional time to enable me to bring closure to the initiative and to engage in bridging activities as part of my transition back to the department. The initiative was then to be carried out between October 20, 2003 and April 23, 2004.

## **Environmental Context Impinging on the Placement**

Over the past decade, much has been done in British Columbia in the area of work-life. Yet there is still much to do. The media have reported high levels of worker stress, increasing incidence of depression and heavier workloads and greater expectations around productivity as a result of technological developments. Surveys and reports continue to document the ongoing issues that concern both employees and employers: the changing demographics of the workplace; the increase in stress-related leave; the reporting by employees with family responsibilities that they feel they are giving their families the leftovers of their time and energy; the growing “sandwich generation”; the shorter hospital stays and therefore greater demands for care giving in the home; and a concern that the workplace must address the decline of volunteerism, if we are to maintain a strong civic society.

Given the high levels of stress under which employees at all levels have been working over the last decade or so, issues around healthy workplaces have become predominant in the public

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<sup>12</sup> Christine Dockman, and Carol Matusicky, *Public Policy on Work-Life Issues in BC – Community Map* (Vancouver: BC Council for Families, revised March 5, 2004).

service over the past five years, and collective agreements have been negotiated to provide some helpful work-life benefits. In this context, Health Canada has developed sensitivity around the need to address these issues effectively. Elaboration of regional policies and practices varies from branch to branch. Certainly, the department has been known for the pioneer work of its Workplace Health Unit in the development of resources, research and systems to help Canadian corporations, farms, and small businesses design and implement their own best practices.

The Council was one of the sponsoring organizations and a member of the advisory committee to the National Council on Family Relations, for the BC Work-Life Summit 2003 held in Vancouver on November 19, 2003; other members included representatives from: the Business Council of BC; VanCity Credit Union; EnVision Financial; New Westminster District Labour Council; Tourism Vancouver; Tina Holden and Associates; Work, Family, Life Consulting; Work-Life Balance Consulting; Hyatt Regency Vancouver; West Waves Marketing; and the United Way of the Lower Mainland. Some of these members were also sponsors, along with Electronic Arts Canada and the University of British Columbia Human Early Learning Partnership (HELP) - a consortium of researchers.

One of the key features of the Summit was the launching of a special report entitled *Where to Work in Canada? An Examination of Regional Differences in Work-Life Practices*<sup>13</sup>, prepared at the request of the Summit Advisory Committee, and the presentation of the highlights by one of the researchers, Dr. Linda Duxbury. The data had been extracted from a national Health Canada-funded study, *Work-Life Conflict in Canada in the New Millennium: A Status Report*<sup>14</sup> involving a survey of 28,500 employees from across Canada, approximately 4,000 of whom were from British Columbia; the findings situated BC in relation to the rest of Canada.

Following the release of *Where to Work in Canada? An Examination of Regional Differences in Work-Life Practices*, the BC Council for Families become its distributor. The report establishes a benchmark for work-life practice in British Columbia. Despite periodic initiatives on the part of the private, non-profit, labour and public sectors in the province over the last decade, British Columbia was rated as a less favourable environment for Canadian professionals who wish to maintain their health and have a meaningful career as well as a family (life). Employees in BC were less able to balance work and family, and the researchers recommended that both career development and the work environment be addressed. Appendix B provides a summary of Canadian work-life trends and BC work-life practice status, based on the above report.

## **Highlights of My Work Experience**

I began my internship with a focus on work-life public policy in BC, more specifically BC employment standards that support work-life issues. The intent was to build on the BC Work-Life Summit and on the above Duxbury and Higgins report, launched at this event. During the planning phase of the internship, it became apparent that a targeted survey of constituents (see next section, below) would be useful in identifying possible gaps in BC work-life public policy,

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<sup>13</sup> Linda Duxbury and Chris Higgins, *Where to Work in Canada? An Examination of Regional Differences in Work-Life Practices* (Ottawa: Carleton University, November 2003).

<sup>14</sup> Linda Duxbury and Chris Higgins, *Work-Life Conflict in Canada in the New Millennium: A Status Report* (Ottawa: Health Canada, Final Report-October 2003).

any improvements needed and actions to take to influence the recommended changes in public policy. At that point, the internship also became a fellowship. The specific goals for the initiative were multi-sector collaboration on work-life public policy development in BC and strengthening knowledge transfer in this area.

### **Collaboration with Multiple Sectors on Public Policy Development in BC.**

The objectives of this collaboration were to: identify and communicate about conflicts and progress made on work-life-family issues in BC and Canada; use the BC Work-Life Summit as a lever for engagement in public policy development, from identifying the gaps to formulating recommendations for improvement and actions to take; and identify the interest and role of the non-profit/voluntary sector in public policy dialogue on work-life issues. These objectives were pursued (and concrete results achieved) through the research activities outlined below and by actively supporting development of, and participating in, post-Summit follow-up with multi-sector action groups addressing work-life public policy, best practices and education/social marketing. These collaboration groups and the committee of the whole have targeted one year for action in these areas, and will assess directions taken at that time.

### A Three-Part Study of Work-Life Public Policy (WLPP) in BC

With the assistance of PIAF program organizers, we hired a research assistant on contract (Tom McCarthy, a Master's student in Public Policy from Simon Fraser University) to work with me in developing a survey questionnaire and reference materials, recording and collating focus group responses, completing a comparative study of BC work-life standards with Quebec's legislation and compiling a report on the results of all three parts of the WLPP study. I was interested in the results of the comparative study, as Duxbury and Higgins had cited the province of Quebec as having the best practice in Canada with respect to the provision of supportive benefits. Although the survey sample was relatively small, the triangulation of the data obtained from these three methodologies confirmed the validity of the key findings.

#### *Part 1: Work-Life Public Policy Survey*

The survey on BC work-life public policy was distributed with the assistance of the Council's staff in February 2004. The purpose of the survey was to identify if there were any gaps in current work-life public policy in British Columbia, and if so, identify what work-life public policy is needed, and recommend strategies that would help to raise the standards. The survey was divided into four sections, which covered: (1) opinions about current work-life legislation in British Columbia; (2) opinions about the most important areas needed for work-life public policy reform; (3) views on which actions might help to bring about the reforms identified in the previous section; and (4) demographic information.

The study population was multi-sectoral and composed primarily of those individuals who had registered for the BC Work-Life Summit on November 19, 2003, as well as others who either had subject expertise or who had previously demonstrated an interest in the issue. This was not a random sample. The majority of respondents were managers.

The following issues were clearly identified by respondents as needing the most attention: taking care of dependents (children, elderly, those with special needs); ensuring a capacity to have children while employed; and contributing to satisfactory family relationships and positive parenting, and therefore to the health and integrity of families. Moreover, the results of the

questionnaire provided convincing evidence that respondents felt very strongly that reforms were needed in most areas of work-life legislation in order to make a difference in the workplace. They were particularly concerned with sufficient access to paid leave to care for (important needs of) family members, and wanted assurance that work responsibilities would not come in the way of the decision to have children, or their ability to raise children in a responsible manner. Most troubling was the minimal recognition of the need for the employer and employee to support volunteerism in our communities.

### *Part 2: Focus Group Responses*

Between December 2003 and March 2004, I facilitated seven focus groups (four of which were hosted by the Council) with representatives from labour and non-profit organizations located within the Lower Mainland. The focus groups were designed to: (a) provide information on topics such as work-life trends, indicators, practice and standards in BC and the *Code of Good Practice on Policy Dialogue*; and (b) solicit opinion on the adequacy of current work-life public policies and legislation in BC, develop recommendations, and explore the role and capacity of the non-profit sector in the development of work-life public policy.

There were two different kinds of focus groups. Four of the group sessions focused on participants' opinions on the adequacy of present work-life public policy and legislation, and on recommendations for improvement. The other three group sessions focused on the role of the non-profit organization in work-life public policy development and its capacity to participate as a public sector partner in this regard.

The predominant themes that emerged from the focus group discussions were:

- Inadequacy of current provisions
- Difference between large and small organizations
- The importance of education of employers and employees, on work-life issues and need for balance
- Legislative provisions versus voluntary standards/union standards/collective bargaining

The focus group participants identified five main areas of inadequacy in BC work-life standards:

- Non-legislation of allowed minimum sick time
- The culture of hours versus averaging or flexibility of hours
- No access to (short-term) paid leave days for urgent family matters or bereavement
- Insufficient Employment Insurance (EI) premiums paid during maternity leave
- Lack of supports while on parental leave, including inadequate EI payments to mothers or fathers when on parental leave

Focus group participants indicated that the voluntary sector has a role to play in the development and/or reformulation of work-life public policy, by:

- Completing or supporting research
- Providing an information clearinghouse
- Identifying, developing and sharing best practices in work-life policies and practices
- Advocating policy positions
- Role modelling for non-profit or small organizations
- Coordinating multi-sector input to public policy dialogue

- Assessing the effectiveness of current and new public policy

Participants felt that there was a definite role for the non-profit sector in the development of work-life public policy, but that capacity building in the following areas was needed for effective action:

- Increased funding to support human and material resources needed to carry out this additional role
- Enhanced cooperation and teamwork with government agencies and other groups
- Increased policy development capacity through training
- Greater visibility, with policy makers and the community, with respect to the ability and capacity of the non-profit sector to engage in public policy development

During the focus group sessions, it became evident that sustainability of organizations within the voluntary sector remains a serious challenge, and will need to be addressed by public funders in a way that signifies genuine recognition and valuing of this sector as a viable partner. Public service or support responsibilities have been devolved to the voluntary sector as a result of federal and provincial downsizing and re-structuring over the past decade. Nevertheless, voluntary organizations remain the backbone of the structure and culture of communities, providing service, to the best of their ability, to people of all ages and in all walks of life.

### *Part 3 – A Comparative Study of Work-Life Legislation in BC and Quebec*

According to the Duxbury/Higgins research noted above, Quebec was rated as the best overall in work-life practice in Canada; therefore, I thought that a comparative analysis of BC employment standards with those of Quebec's employment legislation supportive of work-life issues could prove informative in terms of identifying gaps and recommending possible options for raising BC standards.

Each province has its own set of labour standards regulations. However, the federal government regulates workers in the classes of business that are considered federal. These include, among others, the federal public service, shipping, airlines, railways, banking, radio and television broadcasting, and First Nations activities. This category of workers, comprising approximately 10% of the Canadian workforce, is regulated by the *Canada Labour Code*<sup>15</sup> and was not included in the comparative study.

The aforementioned Duxbury/Higgins study found that workers in Quebec, both professional and non-professional, were far more likely to report positively on four work-life vital signs areas: work and family outcomes; family outcomes; organizational outcomes; and personal outcomes. Work and family outcomes measured the extent to which compromises had to be made in both the working life and family life, in order to keep both components intact. Family outcomes measured success the worker felt that his/her family was experiencing around family functioning and parenting. Organizational outcomes measured a number of variables impacting productivity and also related to the satisfaction workers were experiencing in their jobs. Finally, personal outcomes measured how respondents were feeling about their personal well-being, as indicated by levels of stress, burnout, depression, life satisfaction, health status, etc.

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<sup>15</sup> Website reference: <http://laws.justice.gc.ca/en/L-2/>

One or more of the above outcomes may have been related to one of the significant differences between Quebec and British Columbia: Quebec legislation provides twice as much family leave as British Columbia (up to 10 days).<sup>16</sup> This difference can likely be explained by the greater role of the family in Quebec society. Historically, Quebec families tend to larger sizes. Social and cultural activities and institutions have traditionally centred on family involvement or participation. The presence of the family as a central unit of society in French-Canadian culture is a probable explanation for the provincial differences in this and several other provisions in Quebec legislation.

### *Conclusion of the Study of WLPP in BC*

The results of the WLPP three-part study offer a clear and convincing argument that: (a) current work-life standards do not meet the needs of workers; (b) there is an important need for the BC government to raise the standards; (c) the government needs to take action towards improving work-life policies and practice by employers in this province; and (d) BC could benefit from a study of work-life policies and practice found in Quebec legislation and workplaces. Progress or reform in this area would yield important positive results for the province. Not only would such change increase community cohesiveness and family and job satisfaction, but it would also help enhance the province's socioeconomic competitiveness as the place to work, live and raise a family in Canada.

More information on the results of the three-part study is available in a report entitled *A Study of BC Work-Life Public Policy: Is it Time to Raise the Standards Bar?*, to be posted on the Council's website ([www.bccf.bc.ca](http://www.bccf.bc.ca)).

### Strengthen Knowledge Transfer Specific to Work-Life Public Policy Development

Knowledge transfer objectives included: involving federal/provincial regulators in policy dialogue; communicating with non-profit sector stakeholders on a regular basis on activities and progress being made during the PIAF assignment; producing reports - for PIAF and for the BC Council for Families and its voluntary network - on project learnings, outcomes, future policy directions and recommendations for voluntary sector action; and raising awareness, in the public, private and voluntary sector in Canada, about work-life public policy development as well as the role of the voluntary sector in BC. All objectives were completed to varying degrees or are in the process of being completed. Some direct policy dialogue occurred with federal/provincial regulators at the BC Work-Life Summit; both representatives acknowledged the need for review and updating of standards. The initiative was timely in that it provided the opportunity to seek the information that will be helpful in further dialogue on raising the standards bar.

The educational component and discussions that ensued during focus group sessions also contributed to (the goal of) knowledge transfer. I reviewed the Council's personnel policies in terms of work-life issues and am currently documenting my observations in a report entitled *BCCF: Modelling Work-Life Policy and Practice in a Non-Profit Organization. A Chart on Vital Signs Assessment of BC Work-Life Public Policy* is being completed, which could be useful in

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<sup>16</sup> Gouvernement du Québec, *Act Respecting Labour Standards* (Quebec City, 2003). Website reference: [www.cnt.gouv.qc.ca/en/lois/normes/index.asp](http://www.cnt.gouv.qc.ca/en/lois/normes/index.asp)

future dialogue with potential influencers and regulators. I participated in post-summit multi-sector action groups and am continuing to work with others on a volunteer basis to develop a social marketing campaign to raise awareness about the importance of maintaining work-life balance for the health of employees, organizations, families and communities. A discussion paper that outlines a case for raising the bar for work-life support standards is also being prepared; it is addressed to MLAs and MPs in BC, provincial ministries with mandates relevant to work-life issues, national and provincial non-profit organizations, labour and possibly the media.

BCCF will continue to follow up on these objectives through: distribution of above-noted documents; continued awareness raising around the issues; input to the social marketing campaign and promotion of best practices; ongoing organizational capacity building as the Council continues to move through its own re-structuring process; dialogue and encouragement of federal, provincial, non-profit and corporate partnerships in the development of healthy public policy; and follow-up on WLPP study results concerning the role of the voluntary sector in influencing the recommended reforms. A bibliography of all resources and information utilized during the WLPP: Vision to Reality Initiative will be posted on BCCF's website ([www.bccf.bc.ca/programs/collab\\_piaf.html](http://www.bccf.bc.ca/programs/collab_piaf.html)).

Communications on the initiative was provided: initially to my home department through the BC/Yukon Regional electronic newsletter; to the BCCF and the BC Family Resource Association through monthly staff meetings; to participants involved in the collaboration on work-life before and after the BC Work-Life Summit and at meetings of the committee of the whole and of action groups; (twice) to BC subscribers of BCCF's electronic newsletters; and through postings on BCCF's website.

### **Reflections on the Work Experience**

One of the major challenges for this initiative was the lack of sufficient time to complete all of the objectives due to the delay in funding for the PIAF program. Even though faced with time pressure, we did not lower our aspirations so that they could be more readily achievable in the six-month period.

Much has been accomplished around the goal of multi-sector collaboration on work-life public policy development, but there is so much left to do to strengthen knowledge transfer, that I plan to continue as a volunteer in collaboration activities in the community. I learned that prevention of work-life conflicts can be under-rated as a key factor in creating productive, healthy workplaces, in decreasing stress-related illnesses, in promoting healthy families and healthy child development, and in supporting community integrity. For significant change to occur, a positive critical shift in attitude and awareness is needed, by society, public policy regulators and employers and employees alike.

I truly thank CVRSD, Health Canada and the BC Council for Families for supporting my involvement in this placement. It has been memorable and inspiring to work with my non-profit colleagues and the Centre's staff as well as with PIAF alumni and partners.

I plan to bridge the experience between my host organization and my home department by: making a joint presentation on the WLPP Initiative, along with the Council's Executive Director, to the BCCF Board of Directors and to the PPHB staff; adding to the Council's and branch's Resource Centres, WLPP resources and tools developed through this initiative; seeking branch

support to facilitate healthy public policy development work, related to issues for at-risk populations, through existing community funding programs; and encouraging the branch in the region to become a more active partner in order to increase the effectiveness of the Voluntary Sector Initiative (VSI) in BC.

## **Voluntary Sector-Public Sector Comparisons**

### The way work is done reflects cultural differences

Teamwork occurs in both environments. While there is still some tendency at times to hierarchy in the kinds of teams formed to work together in my home department, in the Council everyone - from the Receptionist to the Executive Director - pitches in to help with large, repetitive tasks such as mail-outs. It is wonderful to note that this team effort is so natural that staff meetings can be going on at the same time! In the current funding climate, the old adage of “many hands make light work” applies to the voluntary sector. Given the downsizing and technological advances that have occurred over the past decade, an adage that might apply to the public sector could be “fewer hands make more work”!

### The way decisions are made reflect cultural differences

Decisions are made more collaboratively and quickly in the voluntary sector, mainly due to the fact that fewer decision makers are involved; moreover, individuals involved in carrying out the decisions are, for the most part, directly consulted. It is also worthy of note that the latter’s opinions are respected and weigh in heavily when the final decision is made. In the voluntary sector, there is an inherent belief that those who are hired to do a job were hired because they were capable of doing the job and for the most part probably knew best what was needed to accomplish the work. In the public sector, however, there is an inherent caution in relation to this assumption, because it is necessary to involve others, extraneous to the implementation of the actual decision, but essential to the protection of integrity, transparency and accountability of decisions, due to the possible impact of any lack in these areas at the highest political level. The opinion of greatest weight in decision making in this context is the possible perception of the Canadian taxpayer.

For risks to be taken at any level in Health Canada, documented evidence supporting the need for the action must be available before a final decision is made and action is taken. There is an interesting similarity between the voluntary sector and the public sector: when it comes to voluntary organizations spending government funds, risk-taking decisions are also backed up by evidence of need, before action is taken. It is evident that we (in the public service) have come to expect this kind of evaluation and validation from the organizations we fund under the Population Health Fund.

### Use of lenses by the voluntary and public sector

While all decisions in the public sector are evaluated through several different lenses, the voluntary sector uses basically two kinds of lens in sequence - the efficient and effective capacity lens that balances available resources with need, followed by the creative lens if client, community or organizational need is greater than available resources. The public sector adopts these perspectives as well.

## Work environments impact differences in approach to work-life conflicts

In the host organization, although staff time at work is valued and monitored, family needs are honoured and recognized as most important and if not addressed, as stressful for the employee as well as the organization. The Council in this regard models its mandate internally. A flexible approach to making up time may be permissible, whereas the culture in the unionized public sector leads to the development of tightly practiced policies that require pre-planning and written approval prior to taking leave, except for cases of emergency or illness. If there is no leave provision in the benefits available for a particular family need, the employee is not able to take time away from work, unless s/he uses sick or vacation leave. Any flexibility in this regard is at the discretion of the public sector manager, and application varies amongst departmental work sites.

Small non-profit organizations like small businesses really see their employees as their most valuable asset and understand the necessity of having a positive, accepting, supportive work environment in order to retain staff, bring out the best in each employee and maintain high morale and productivity. One very important role for the manager is maintaining high morale despite sustainability challenges. During the 1990s, when major downsizing and re-structuring were underway in the public sector, indeterminate hiring was put on hold and many staff were hired in term positions or contracted for specific short-term tasks. In that era, maintaining a high level of morale in the public service was similar to the challenge facing the voluntary sector today, with one fundamental difference - survival of the branch or department was not dependent upon low staff morale due to job insecurity. Today in the public sector, it is understood that a healthy work environment makes good business sense; policies and practice around work-life issues tend to be addressed through collective bargaining processes.

Sadly, toward the end of my internship/fellowship, the reality of job instability in the voluntary sector was demonstrated when half the team at the Council had to be laid off due to non-renewal of public funding. Without improved sustainability, we in government cannot realistically expect the voluntary sector to spend staff time and organizational funds on any significant (but) unsupported partnership activity with us. The professional interest and the will to participate in a public policy partnership are there, but all sides of too few desks (i.e., scarce resources) are taken up with funded programs/priorities or with seeking funding. Knowledge and expertise that could be garnered for the greater public good are being diverted to daily organizational survival strategies - capacity at its basic level. There is an intrinsic policy dialogue here that needs to be concluded in a way that "will put into action the Accord the government signed with the voluntary sector that will enable it to contribute to national priorities, and represent the views of those too often excluded." (Speech from the Throne, 2002)<sup>17</sup>

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<sup>17</sup>Website reference: [www.sft-ddt.gc.ca/sft.htm](http://www.sft-ddt.gc.ca/sft.htm)

## Conclusion

Because of a lack of support for preventive work-life policies and practice, “BC has become a place to train and provide experience for qualified professionals, who then leave to go elsewhere in Canada to have a family.”<sup>18</sup> Considering regional differences (across Canada) in work-life practice identified in the Duxbury/Higgins report, a cultural shift in attitude - from a culture of hours to a culture of flexibility - is needed in provinces such as BC, in order to regain a healthy quality of life, become competitive as the place to work, live and raise a family, and decrease health care costs attributable to burn-out and stress-related chronic diseases.

With further capacity building and increased multi-sector and community awareness, the voluntary sector could be in a unique position to play an instrumental role in the development of healthy public policy to address work-life issues in BC. The Council has the necessary technical experience in this field and the will to provide leadership for this sector. Stakeholders need to identify creative mechanisms to provide human and financial resources that would help the voluntary sector, in the longer term, to fulfill the role recommended by the above-noted focus groups not only with respect to work-life, but also in relation to any other public policies impacting the well-being of communities.

The provincial government will be challenged to raise the bar for work-life standards through legislation in a way that recognizes differences in the capacity of small and large organizations, yet still expects the vital signs of work-life balance to be healthy in workplaces across the sectors. BC could be encouraged to explore the potential for the development of a partnership with this sector similar to the one the federal government has begun to undertake through the Accord.

Over the last couple of years, the VSI (including the PIAF program) has taken some real (albeit preliminary) steps toward raising the profile and strengthening the knowledge of the non-profit sector in relation to public policy dialogue and its processes; however, more needs to be done to increase awareness about the VSI on the front line across all sectors, so that its implementation becomes a way of doing business on a day-to-day basis. PIAF program organizers could be encouraged to consider expanding the scope of the program’s partnerships to include corporations. This would further catalyze public policy dialogue across all sectors, as well as possibly address some sustainability issues.

PIAF and the Centre for Voluntary Sector Research and Development are to be commended for the innovative work they are doing on behalf of the voluntary sector and the public service in Canada. It is hoped that sustainability and enhancement of these components, along with the rest of the VSI, will be seen as essential, in the sense of continuing to strengthen the capacity of the voluntary and public sectors to work more effectively together in the best interests of the communities they both serve.

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<sup>18</sup>Linda Duxbury, web cast presentation on *Where to Work in Canada? An Examination of Regional Differences in Work-Life Practices* (media launch on November 19, 2003). Website reference: [www.worklifeforum.com](http://www.worklifeforum.com)

## APPENDIX A

### Training and Program Coordination to Support Healthy Family Development

- Goal:** To provide quality-training opportunities to practitioners who work with families.
- Programs:** Nobody's Perfect  
Parent-Child Mother Goose  
Ready or Not!  
Building Blocks  
Suicide Prevention
- Action:** Coordination of training  
Database of trained facilitators & agencies  
Networking & Support  
Quality Resources  
Newsletters  
Quality Control

### Advocacy, Research & Policy Development

- Goal:** To recognize gaps, initiate & make accessible the latest research on issues that impact families & communities.
- Action:** Public Policy Development  
Professional Development Workshops  
Focus Groups  
Conferences  
Consultations – Government & Organizations  
Roundtables  
Forums

**Vision: Healthy families in a healthy society.**

**Mission: Leadership through education, training, advocacy, and research for the healthy development of families.**

**"Investing in Families for a Brighter, Sustainable Future"**

1977-2002

### New Collaborations That Promote Healthy Family Development

- Goal:** To proactively address trends & issues of concern to families & communities.
- Action:** Father-Involvement Network-BC (FIN-BC)  
Collaboration on Work-life  
Provincial Parent Development Coalition

### Resources For Families And Those Who Work With Families

- Goal:** To provide cutting edge resources to families & those who work with families.
- Action:** 300,000 print resources distributed per annum  
Online information through content-rich interactive website – [www.bccf.bc.ca](http://www.bccf.bc.ca)  
Home of the Elizabeth McNair Resource Centre & Play Library  
Telephone referrals to programs, services & professionals  
12,000 online resources on all aspects of health and well being through our role as Relationship Affiliate of the Canadian Health Network ([www.canadian-health-network.ca](http://www.canadian-health-network.ca))

### Public Education & Promotional Activities

- Goal:** To inform the public, our membership & decision makers about changes taking place in families & to promote the key role families play in society.
- Action:** - *Family Connections* magazine that focuses on contemporary family issues  
- **E-Newsletter: a free monthly subscription**  
- **Resource Library**  
- **Promotion of National Family Week**  
- Celebration of International Day of Families  
- Media Connections – TV, radio interviews & press releases.
- 10th Anniversary Celebration of International Year of the Family** in partnership with Literacy BC.  
Theme: *Celebrating Families & Learning.*

## Work-Life Public Policy: Vision to Reality Initiative

### APPENDIX B

#### A Snapshot of Current Trends and Statistics in Work-Life Practice in Canada and BC

**Source:** Dr. Linda Duxbury, Dr. Chris Higgins, [Where to Work in Canada? An Examination of Regional Differences in Work-Life Practices](#); November, 2003. Additional information, including the full copy of this report, can be found at [www.bcworklifesummit.com](http://www.bcworklifesummit.com); published copies can be obtained from the BC Council for Families.

#### Trends in Canadian work-life issues:

**Families are changing:** Women are participating in the paid labour force in record numbers, increasing numbers of fathers are assuming family responsibilities, Canada's population is aging while average rate of births is decreasing, numbers of families simultaneously caring for young children and elderly parents are increasing.

**Workplaces are changing:** Increasing globalization, and other factors have contributed to considerable re-structuring, job loss, and increasing job uncertainty all negatively impacting employers and employees as well as productivity, creativity and morale. Many workers are experiencing heavier workloads and increased demands for education and training. Growing numbers of people are reporting increased stress and burn out in trying to manage their work and family responsibilities in a work culture that tend to be more reactive than proactive around these issues.

**Work-life balance initiatives contribute to healthy workers and productive workplaces:** Research has demonstrated that supportive work environments lead to improved employee health and morale, lower employee turnover, increased employee and customer satisfaction, and decreased absenteeism – all of which contribute to financial benefits for those workplaces that provide them. Growing numbers of organizations recognize the costs, which accompany work-life conflict and have established policies and practices to support people in balancing their work and family life; many do not consistently or equitably implement them.

**Future success in an increasingly competitive business environment:** While Canadian organizations have long held that “people are our most important resource”, current policies and practices do not reflect this view and employers are looking for ways to stay “lean and mean” but effective. Trends indicate that future success will depend on making the most of one's employees; the relationship between work and family will become a critical issue for the majority of the workforce, as we progress into this century.

## **Statistics\* on work-life practice in BC, relative to the rest of Canada:**

### *Work Environment:*

- Employees in BC were less likely to work either a regular 9 to 5 workday or flextime arrangements; this is due to a higher number of employees who work a compressed workweek or shifts.
- Professional workers in BC were less likely to report high levels of workplace flexibility, and less likely to agree that their work environment supported balance.
- Professionals in BC were more likely to work paid overtime, less likely to work unpaid overtime than their counterparts in the other provinces.
- Non-professionals were more likely than professionals to be able to get a paid day off to care for a sick child or an elderly dependent. (Note: the non-professional group is less likely to have elderly dependents or children than the professional group)
- The culture of hours – the beliefs that “only by working long hours will I advance in my career” and “it’s not OK to say no to more work” is stronger in BC than in other provinces.
- Employees in BC were the most likely in Canada to perceive that the culture within their organization forced a choice between work and family, making it difficult to advance.
- Employers in BC were more likely to offer employees time off in lieu of overtime, and offer non-professionals unpaid leave of absence, emergency days off, short-term leave, and pro-rated benefits for part time work. Both groups were less likely to be able to take personal days off with pay and to be able to telework. This suggests that employers in BC are not prepared to offer financial assistance to employees with personal problems.

### *Work and Family Balance:*

Data suggests that employees in BC are less able than elsewhere in Canada to balance work and family demands.

- Employees living in BC spend more time per week commuting to work.
- Employees in BC were more likely than other employees to say that if they had extra time, they would prefer to devote it to pursuits such as sports and fitness instead of family.
- Employees in BC were more likely to agree that work demands have prevented them from starting a family and that they have had fewer children due to the demands of work.
- Non-professionals were less likely to report high family and parental satisfaction than in other provinces.
- Non-professionals more likely to report high role overload and high work interference with family.
- Employees were more likely to off-shift with their spouse, to balance work and family demands.

### *Work Attitudes and Outcomes:*

- Employees in BC were less likely to have missed work due to childcare issues (Note: relates to the culture of hours, feeling forced to choose between family and work responsibilities in order to advance and BC employees as a group being less likely to have children due to work demands.)
- Employees in BC had lower levels of job satisfaction with ability to meet their career goals.
- Professionals were less satisfied with their work schedules and workloads than their Canadian counterparts.
- Professionals in BC reported lower absenteeism than other professionals due to eldercare.
- Professionals in BC were less likely to be committed to their employer.
- Non-professionals in BC were less likely to report high levels of job satisfaction, yet less likely to leave due to lack of recognition or non-supportive work environment.

- Employees in BC were more likely to have purchased prescription medication in the 6 months prior to the study.
- Professionals in BC were more likely to report that their health was poor.

***\* The sample researched included workers from private, public and not-for-profit sectors (medium and large corporations/ organizations). The sample did not include workers from small businesses or non-profit organizations.***

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