CAMBRIDGE
POLICY AND ORDINANCE
FOR CHILDREN, YOUTH & FAMILIES

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City of Cambridge
Policy for Children and Youth

Report of the Substance Abuse Study Committee

September, 1989

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Goal Statement:

All youth in Cambridge have the right
to an environment that promotes
responsible decision making and
supports them in their decision
not to use or abuse alcohol
and other drugs.

INTRODUCTION

THE STUDY COMMITTEE

The Substance Abuse Study Committee began meeting in early March, 1989 and subsequently met for a series of 5 meetings. Following the last meeting, a subcommittee of members was formed to work on refining the recommendations proposed by the larger group. A listing of all Study Committee members follows this section. This report is a compilation of Study Committee members' input, supporting research, and information gathered at other community forums such as Area 4 Crime Task Force meetings and a meeting convened by the Governor's Alliance Against Drugs at Cambridge Rindge and Latin High School.

APPROACH

The Study Committee has consistently defined substance abuse as a sociological problem, placing it in a social context of poverty, poor education, societal and family attitudes about drugs, family patterns of drug use, etc. Medicalization of the substance abuse issue would limit the way solutions are addressed. The Committee also recognized the various strategies for addressing the drug problem:

> to decrease the supply (e.g. curtailing the flow of drugs into the country)
>
> to change rules that govern distribution (e.g. raising the legal drinking age)
>
> to reduce demand (e.g. prevention, treatment and deterrence of drug use)

This report and its concluding recommendations have a focus on reducing the demand for drugs as the means for addressing the drug problems among youth. This approach stems from the desire to be more prevention-focused and the recognition that the drug problem cannot be won until the demand for drugs is lessened. This is particularly true with drugs that are easily accessible, such as alcohol and nicotine.

The Committee has also recognized that there must be a comprehensive response to substance abuse that involves parents, the media, government, schools, the legal system, community-based agencies, and other major influencing institutions.

SUBSTANCES USED BY YOUTH

Data put forth by the Director of Concilio Hispano's Addictions Program, and concurred with by other Committee members, provided this information on drugs used by adolescents:

Most common drugs used by Cambridge youth (in order of prevalence):

a. tobacco
b. alcohol
c. marijuana
d. cocaine/crack
e. various pills and LSD

There may be a link between tobacco use and alcohol use, as 25% of smokers have problems with alcohol, but only 3% of nonsmokers have problems with alcohol. The point of introduction of tobacco in a youth's life is generally 7th grade. The point of introduction of alcohol is generally between 7-9th grade. There is a direct correlation between age at onset of use, and addiction: the younger a child is when starting to use a substance, the more likely that child is to become addicted.

Lieutenant Bongiorno, in charge of Narcotics for the Cambridge Police Department, stated in his presentation at an Area 4 Crime Task Force meeting that youth are exposed to illicit drugs by age 12. Bongiorno also stated that the primary drug of choice in Area 4 is cocaine. The Police are finding less trafficking of marijuana, which may be related to the bulkiness of this drug and the difficulty of concealment, especially in comparison with cocaine. Also the potential for making large profits are much greater with cocaine than with marijuana.

DRUG USE RESEARCH

The Study Committee recommends caution in interpreting and utilizing research on drug use. Many potential problems of reliability and validity exist. First, as is the case in a recent Boston Globe article, headlines may announce that drug use has declined, but the study often addresses illicit drugs and omits alcohol use, which has remained steady or increased. Another misleading factor is that studies often use in-school youth as a sample base, thereby omitting out-of-school youth who are more at-risk for substance abuse. Last, studies are usually based on self-reported information in which verification of accuracy of the data is not possible. The trust factor would need to be great for a youth to reveal drug use to a researcher. Keeping these limitations in mind, the research can nevertheless offer information on general trends in drug use among specific subgroups of the population. Some of the more recent research on drug use by youth is cited in the Research section of this report.

SECTIONS OF THIS REPORT

As the Study Committee met, we tended to view substance abuse in the stages of Prevention, Early Intervention and Treatment. When recommendations were made, it became clear that strategies and interventions occur within schools, the community or the family unit. These three categories are therefore the headings of the core section of this report.

SUBSTANCE ABUSE STUDY COMMITTEE MEMBERS

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SCHOOLS

SCHOOLS

Background of the Issue:

Schools are only one of many settings in which substance abuse prevention should occur. However, schools have great potential as a setting for drug abuse prevention and intervention because schools can reach every child for a prolonged period of the child's life. School systems are prepared in varying degrees to meet the social service needs of their students, and may not see their role much beyond education in a strictly academic sense. The Cambridge school system has a framework from which many health and social services have been developed and implemented for students. This framework is a component called Comprehensive Health and Human Services and it serves as an umbrella for health curriculum, school-community linkages, and support services for students. The challenge is to continue to fill in the gaps in services that will both prevent the onset of drug use, and intervene and address the needs of youth who have begun to use alcohol and other drugs.

On March 27, 1989, the Governor's Alliance Against Drugs sponsored a student forum at Cambridge Rindge and Latin High School. Attended by well over 100 high school students, the forum provided a unique opportunity to directly hear the frank thoughts of students on issues of substance abuse. There was consensus that public policy should focus on reducing the demand for drugs rather than on diminishing the supply. The following are other key statements by the students:

Students expressed frustration with the pending budget cuts in education and asked how the schools could be expected to play a larger role in drug prevention with fewer resources.

Opinions were expressed as to why youth take drugs: influenced by other youth who are taking drugs; youth do not take drug use seriously; adults in the society are also abusing drugs and are therefore poor role models; drugs are used as a means of empowerment; drug dealing is financially lucrative; youth don't care about physically abusing their bodies; there is a lack of after-school options that provide youth with alternatives; drug use is often glamorized by the media; youth turn to drugs for fun and excitement in their lives; youth take drugs because they want to "be cool" (cool is defined by youth not by adults).

One peer educator expressed that, in her work with 6th graders, she learned that they were already well-versed about drugs.

The students felt that it was not enough to be knowledgeable about drugs. They believe substance abuse education should also examine one's attitudes towards drugs.

Overall, most of the students had well-developed, serious ideas on drug-related issues and were very willing to express their opinions. It was evident that input from youth would be valuable in developing and evaluating prevention and intervention programs.

Recent research (see Research section of this report) suggests that drug use among youth overall has declined, although alcohol use has remained steady or is slightly increased. The Study Committee used caution in interpreting such findings because, among other issues, the research samples were usually drawn from school populations. This methodology omits out-of-school youth who are more at-risk of abusing substances and may have dropped out of school because of drug use or drug-related problems at home. Cambridge currently has a drop-out rate of 25-30% of the student body; these youth often become disenfranchised from mainstream society making it near impossible for them to receive the support services that they need.

With regard to in-school youth in Cambridge, some members of the Study Committee felt that substance use within the high school is well-controlled. A 1988 review of disciplinary actions at the high school showed that out of 6,000 disciplinary cases in the school, 30 to 40 cases were related to substance abuse. There is currently a strong security force of 7 staff at the high school. However, other members of the Study Committee pointed out that some substances are difficult to detect, citing cocaine as an example of a drug which is odorless and does not necessarily cause clearly inappropriate behavior. In addition, some academic or behavioral problems may be caused by use of substances by the student or a family member, but may be classified as a problem other than substance abuse.

Resources in the Cambridge School System:

*Currently all 9th graders receive mandatory health education for half of the school year, 5 days per week. Health curriculum is also taught in the Longfellow and Harrington grammar schools.

*In 1988-89, substance abuse prevention curriculum was taught in 8 schools. 50% of students in elementary schools received either health or substance abuse prevention curriculum. In 1989-90, health staff will work with all elementary schools via a health newsletter and follow-up classroom visits. The Superintendent of Schools has established a city-wide Task Force to work on comprehensive substance abuse prevention. She is mandating that substance abuse prevention be taught in all classrooms.

*There is a Peer Leadership Program in which 50 students provide rap sessions for 6th graders, 3 times a year.

*In-class training for teachers occurs for 10-week intervals by School Department Staff. The Mount Auburn Prevention Center has done 18 hour teacher trainings in substance abuse awareness and has trained 113 teachers since 1984.

*A Teen Health Clinic, managed by Cambridge Hospital and located on-site at the High School, opened in the Fall, 1988. Substance abuse counseling and assessment are provided to students by the CASPAR Alcohol Education Program.

*The Human Services Collaborative creates linkages between school and community resources and has developed Student Support Teams in 5 schools. These school-agency teams are: Fletcher-Cambridge Department of Human Service Programs; Graham and Parks-Cambridge Family and Children Services; Harrington-The Family Center; Longfellow-Catholic Charities; Peabody-Cambridge Youth Guidance Center. Cambridge Rindge and Latin High School, House C, developed a student support team on their own. Student Support Teams provide a means for coordinating and unifying support services to address the needs of at-risk students. Three new schools are being added to the drop-out prevention program in 1989-90 and paired with the following agencies: Agassiz-Cambridge Youth Guidance Center; Morse-Cambridge Family and Children's Services; and Tobin-Cambridge Family and Children's Services. These schools and agencies will work to form student support teams.

*Concilio Hispano administers a Youth Enrichment Program on-site at the high school for approximately 60 Latino youth. The goal is to help students avoid the use and abuse of drugs by enabling them to feel good about themselves, stay in school, set future goals, and seek adequate services when faced with barriers to academic success.

*CASPAR, Inc runs groups in 5 Pilot Schools for 7th and 8th graders.

*A Truancy Review Panel meets weekly to review cases of referred students ages 6-16. The panel is composed of the Cambridge Public Schools, Cambridge Youth Guidance, Cambridge Juvenile Court/Probation, Adolescent Consultation Clinic, the Cambridge Dept. of Human Service Programs, Children's Hearings Project and the State Dept. of Social Services. The Review Panel meets 1.5 hours weekly and reviews 4-5 cases per week.

*The School Dept. administers a Drop-Out Prevention Grant funded by federal and state monies. These funds provide the resources to augment and coordinate support services in the school setting.

*Cambridge Community Services, in conjunction with the New England Sports Museum, have recently implemented the Winning Edge Program. Winning Edge is an after school program that uses sports and health concepts to motivate sixth and seventh graders. Winning Edge stresses: academic skills training; parent education and family involvement; self-esteem building; peer education.

Identified Problems:

*Not enough emphasis placed on Health Education.

*Not all secondary bi-lingual students receive Health Education in their first language. Some bi-lingual students in House D receive native language instruction by a non-certified teacher.

*Health and Drug Education is occurring sporadically.

*No systematic evaluation of the effectiveness of Health Education.

*Not enough resources for Teacher Training.

*Student Support Teams are only operating in 5 elementary schools. Current plans are to extend the Teams to 3 more schools. On-going funding and expansion to the remaining 5 schools is uncertain.

*No systematic procedure or training for insuring that teachers can identify and assist students who may be abusing drugs.

*Limited emphasis or policy for parental involvement.

*The youth who often need the most help, are dropping out of school.

Recommendations:

1. Mandate and elevate the importance of Health Education, with a strong substance abuse prevention component, in every grade level K-9, including Health Education for bi-lingual students in their first language and for special needs students. Develop creative options for administering Health Education in grades 10-12, i.e. mini-courses. Build-in an evaluation component to determine the effectiveness of the education.

2. Provide Teacher Training that consists of examining substance abuse issues and practice teaching the curriculum in a co-teaching model with Trainers. Training should be available for all teachers providing classroom instruction in Health Education. All school staff should be systematically trained in substance abuse awareness.

3. Extend the Student Support Team Model from the 8 elementary schools where it currently operates and/or is currently being implemented, to all 13 elementary schools and all of the high school. Support the plan to implement the model in 3 additional schools in 1989-90.

4. Establish a procedure for Identifying and Referring students who are suspected of using drugs. Provide identification and referral training to school personnel.

5. Insure consistent implementation of a School Policy for students in need of disciplinary action due to drug related offenses. The Policy should provide for the youth's health and human service needs, along with clear guidance regarding discipline.

6. Provide support for a strong, In-School Peer Leadership Program through adequate supervision, resources, and training.

7. Recognizing that parents can be a valuable source of knowledge and support to their child, attempt to include Parents in the early stages of problem identification, provided that this would not be a breach of the youth's confidentiality.

COMMUNITY

COMMUNITY

Background of the Issue:

It is often expressed that an effective effort against substance abuse must be a concerted effort by the entire community. This is a departure from previous thinking that substance abuse problems should remain hidden and resolved within the family unit. More and more we see the business community, clergy, local government, community-based agencies, concerned citizens, educators, and others coming forward to help address the drug problems in their communities. Such broad-based involvement has been emphasized in the national policy against drugs as evidenced in President Bush's recent remarks for the war on drugs, "to be waged at every level of government and by every citizen."

An example of a community approach began in Cambridge in September, 1988 with the formation of the Area 4 Crime Task Force. Area 4 is the poorest neighborhood in the City, housing approximately 25% of all poor children in Cambridge. The Task Force was formed because of concern among residents of the increasing drug trafficking and use in their neighborhood. The Task Force is made up of approximately 25 members who represent local clergy, neighborhood councils, the Area 4 Coalition, the School Department, the City's Department of Human Service Programs, residents of nearby housing projects, the private sector, and the Police Department.

Through the Task Force, the community is gaining awareness and an understanding of the drug problem in their community. Cambridge Police Lt. Richard Bongiorno reported to Area 4 residents that 88 drug arrests occurred in Area 4 in 1988; there were 41 drug arrests in Area 4 during January-April, 1989. Lt. Bongiorno also stated that cocaine is the primary drug of choice in Area 4. Much of the drug activity in the area is taking place in a four-block section of the neighborhood between Columbia Street and Windsor Street.

Initially the Task Force identified the following drug-related community needs:

*The need for more police visibility and surveillance.

*The large number of abandoned buildings in the neighborhood that must be boarded up. Empty buildings are used to make drug deals.

*The need for a lighting survey to determine areas of the neighborhood that need to be better lit.

*The need for school gymnasiums in the area to be open to teenagers over the age of 14.

Considerable progress has been made with these concerns. Police visibility in the neighborhood has been significantly increased. The Police Department reports that 65% of their drug effort is concentrated in Area 4. Owners of abandoned buildings have been notified about boarding up their property. New lighting has been installed. The new City budget includes funds for the design and development of an Area 4 Teen Center.

The challenge with the formation of any such Task Force is to maintain involvement of current members as well as broaden community participation. The Task Force has recently established its Action Plan that defines both short and long-term objectives. They are:

1. Outreach - make more residents aware and involved in the Task Force and its objectives.

2. Education - how to recognize and respond to drug activity in the neighborhood while maintaining personal safety; information to parents on how to prevent or intervene in drug use in their own families.

3. Implementation of a Block Watch.

4. Development and implementation of a Youth Center.

5. Securing State funds under the "Reclaim our Community" initiative to support Task Force activities.

Area 4 does not house all the City's drug problems; Cambridgeport, Harvard Square and the City's public housing projects are also cited by police as "hot spots". But the Task Force is the first broad-based community approach to the drug problem and may spur on other such efforts in Cambridge neighborhoods.

In addition to the efforts of the Task Force, Cambridge also has a number of community-based agencies that address substance abuse problems. Although, in most cases, the resources of these agencies have gradually increased over the years, resources still fall short of the need. Members of the Substance Abuse Study Committee voiced strong concerns that the youth most in need of services are often the group that is least likely to receive them. One reason is that at-risk youth are much harder to reach, and if they are using substances, they will continue to become more disenfranchised from mainstream society. If a youth drops out of school, they are no longer part of a system that can serve to monitor behavior and respond to problems. Many of the recommendations of the Study Committee offer strategies for reaching youth at the community level and via creative programming.

Issues of training, coordination, and mode of treatment were also examined by Committee Members. Committee Members believe that it is not enough to be trained in substance abuse awareness, but providers serving adolescents should have additional training on serving the adolescent population. There were concerns about the lack of coordination between service providers as evidenced by the fact that some of the Committee members were meeting each other for the first time. And last, Committee members expressed concern about the lack of an oversight body to review the modalities of treatment used by public and private programs.

Community Resources

Area 4 Crime Task Force
A community-based coalition that addresses the drug problems in Area 4.

Concilio Hispano, Addictions Program
Bi-cultural, bi-lingual services to Latino residents including outpatient counseling, acupuncture clinic, work with incarcerated individuals, group therapy, AIDS counseling and testing, individual and group counseling with adolescents at the high school.

Cambridge & Somerville Program for Alcoholism Rehabilitation (CASPAR)
Comprehensive alcoholism treatment and rehabilitation services through the following Divisions: Walk-in Outpatient Service, Inpatient Unit, Intervention Center, Phoenix Club, Emergency Service Center, Men's Community Residences, Women's Alcoholism Program, New Day, Family Services, and the Alcohol Education Program. The Alcohol Education Program provides alcohol, drug, and AIDS education and assessment for high-risk groups.

Bridge Over Troubled Waters
Drug counseling services to runaway youth.

North Charles Institute for the Addictions
Comprehensive outpatient drug treatment including individual, group and family counseling, drug evaluations, and a methadone maintenance program.

Cambridge Hospital, Cahill 3
Alcohol detoxification unit and inpatient treatment.

Mt. Auburn Hospital Prevention & Training Center
Alcohol and drug education, peer leadership training, stress management training, training for parents to become group facilitators, training of individuals who work with elders. Outpatient services at Mt. Auburn Hospital.

Visiting Nurses Association
In-home services to families at-risk who have substance abuse related problems.

Alcoholics Anonymous, Al-Anon, Alateen
Self-help organization for alcoholics and family members.

Community Arts Center
Located in Newtowne Court/Washington Elms, focuses on the arts as a medium for personal and social development of at-risk youth.

Identified Problems

Not enough resources and programs to reach out-of-school youth and youth at-risk.

Not enough after-school and summer activities for all youth.

No "street outreach" to reach disenfranchised youth.

No systematic review of substance abuse programs and their mode of treatment.

The need for improved collaboration among service providers and City Departments.

Inadequate involvement of youth and parents in program development.

Not enough understanding of the attitudes about drugs among ethnic and racial groups.

The profit motive incentive that often lures youth into drug dealing.

Lack of a comprehensive, community response to the drug problems.

Inadequate parent knowledge and skill to deal with drug problems in their families.

Lack of early-intervention services to at-risk families.

Recommendations

Community-Based Services

1. Expand and develop Experiential Education Programs for at-risk youth that are administered by trained workers, provide creative alternatives for their role in the community, challenge a youth's self-concept and allow youth to view themselves in a more positive fashion.

2. Create more opportunities for all youth to participate in After-School and Summer Activities that promote youth development and positive alternatives.

3. Explore the feasibility of establishing a CASPAR After-School Program Satellite Site in Cambridge.

4. Provide "Street Outreach" as a means of reaching out-of-school youth who are disenfranchised from traditional support systems.

5. Explore options for expanding and coordinating the Peer Leadership Program outside of the school setting. Insure that the program is culturally and linguistically appropriate.

6. Provide opportunities for youth to participate in Support Groups that are structured, yet informal enough for youth to express their thoughts and concerns. These sessions should be led by community professionals who already have a rapport with youth.

Policy & Planning

1. Implement a "Quality Assurance" procedure for prevention and treatment programs wherein a program's design, philosophy, and modality of treatment would be reviewed.

2. Expand Training Opportunities for Service Providers that focus on specialized training needed to serve adolescents.

3. Identify ways to Improve Collaboration among service providers and other City efforts to combat drug abuse.

4. Identify and Address the Barriers that prevent youth and families from utilizing existing services.

5. Insure that there is Input from Youth and Parents in the planning and development of programs and services.

6. Insure that Drug Education Addresses the link between Using Drugs and HIV Infection and that it provides information on the Physical Consequences of Using Drugs.

7. Promote more Research on Attitudes about Drugs among various racial and ethnic groups.

8. Recognize and address the issue of the huge Profit Motive that can lure youth into dealing drugs.

Community Mobilization

1. Form a Community Task Force that has knowledge of the resources

available to combat drug problems, advocates for resources to fill the gaps in services, promotes public awareness of the problems, and coordinates training efforts in the community. The Task Force should include representatives from key institutions in the ethnic and racial communities.

2. Provide Opportunities for Parents to Contribute to the prevention of substance abuse, both as a member of the community and as parents. Develop a Parent Information Booklet that includes communicating about drugs with your child.

3. Coordinate efforts with and support the newly formed Cambridge Chamber of Commerce Pilot Outreach Program to Combat Drugs.

FAMILIES

FAMILIES

Background of the Issue:

The family unit plays a critical role in how young people respond to drugs and alcohol in their environment. For example, the parent's attitudes and use of substances are a strong influence on the patterns of use by their children. According to the National Association for Children of Alcoholics, children of alcoholics are at the highest risk of developing alcoholism themselves or marrying someone who becomes alcoholic. On the positive side, it is generally accepted that parents who foster self-confidence and self-worth in their children, as well as exercising good communication in drug-related issues, will help prevent their children from using drugs.

The Substance Abuse Study Committee expressed many concerns with regard to substance abuse and families. Some members felt that there is an increasing incidence of youths' parents abusing substances and that therefore parents would be experiencing greater conflict around their children's use. Gains made during counseling with youth could be counteracted when a teen returns to an addictive family system. Committee members also expressed frustration with the poor results that they've experienced when attempting to get parents involved in programming.

Economic pressures affect parents' abilities to attend to their children's needs. Committee members felt that the City must help in providing a setting in which it is possible for parents to effectively parent. Networks that previously gave guidance about family life, i.e. the church, extended families, are no longer as influential, therefore creating a greater need for community networks that can support families.

Committee members also discussed the relationship between the disintegration of the family unit and the rise of addictive disorders and related problems such as spouse and child abuse. The family unit may serve as a mediating or regulating force, providing support or imposing containment on any predisposed tendency of an individual toward substance abuse.

Often in discussion of causes of adolescent problems, such as substance abuse or teen pregnancy, the issue of self-esteem is introduced. The Study Committee agreed that self-esteem is an important contributing factor but thought it necessary to define the term. We reviewed and generally accepted the definition put forth by Donald Ian Macdonald, M.D. in the publication, Drugs, Drinking and Adolescents. Within this definition, it is clear the role the family would play in influencing the self-esteem of their children.

Macdonald defines self-esteem as personal judgment of worthiness and introduces four major factors that are the antecedents of self-esteem. These are:

1. The respect, acceptance, and concerned treatment that an individual receives from "significant others" in his or her life.

2. An individual's history of successes. Macdonald states that good behavior and accomplishment that are rewarded are apt to make a child feel good about him or herself and lead to continued successful performance.

3. Having values and aspirations. For example, the child in high school who is unable to express any plans for the future is at greater risk than the child who has a career goal.

4. The manner in which the child is able to deal with errors, defeats, and frustrations. For example, parents should avoid the temptation to totally insulate children from the realities they must eventually face.

As a guide for parents on how to build positive self-esteem in their children and to be involved in the prevention process, the booklet, "Drug Abuse Prevention, A Guide for Parents" was developed for the Federal Office for Substance Abuse Prevention. This guide concludes with the following checklist for parents who want to make substance abuse prevention a positive process in their families:

Learn as much as you can about drugs and alcohol.

Talk with your children about the dangers of using drugs and alcohol. Tell your children you want to hear what they know about drugs and alcohol.

Communicate with your child by using listening skills.

Love your children and help them develop a good self-image.

Be a good role model for your children.

Be honest in expressing your feelings and in stating your own values and preferences. Encourage your children to develop strong values.

Encourage your children to value their individuality.

Teach your child assertiveness when dealing with peer pressure.

Set clear rules and limits for your child and enforce them.

Be calm, firm, and consistent when talking to your child about substance abuse. Remember that you're sharing ideas and information. Don't put your teenager on the witness stand or demand a confession.

Encourage your children to become involved with alternative activities such as hobbies, sports, music and recreation.

Join together with other parents to implement drug abuse prevention strategies in your community.

Resources for Parents

Cambridge Hospital, Cahill 3, Family Treatment Program, 498-1417

CASPAR, INC., Business Office - 628-3850, Alcohol Education - 623-2080

Area Clergy

Adult Children of Alcoholics Support Groups, Al-Anon, Alateen - 843-5300, Alcoholics Anonymous - 426-9444

Mt. Auburn Prevention and Training Center trains parents as facilitators of parent groups, has a self-study guide for parents of elementary school-aged children, provides workshops on parenting skills - 893-0111.

Mt. Auburn Hospital, Center for Alcohol Problems, 499-5051

Concilio Hispano, Addictions Program, 661-8000

North Charles Institute for the Addictions, family counseling, 661-5700

Counseling and Mental Health Agencies:
Cambridge Family and Children's Services, 876-4210
Cambridge Youth Guidance Center, Inc., 354-2275
Cambridge Somerville Catholic Charities, 625-1920
The Family Center, Inc., 628-8815
Adolescent Consultation Services, 494-0135

Identified Problems

Some parents lack knowledge and information to deal with drug-related issues in their families.

Lack of culturally-appropriate parent training on issues of substance abuse.

Lack of early-intervention to at-risk families.

Use of substances by parents causes them to be conflicted about their children's use. Some parents condone or ignore drug use.

Youth receiving substance abuse services are sometimes returning to the same dysfunctional family unit.

Service providers often have difficulty getting parent involvement in programs.

Economic pressures affect parents' abilities to attend to their children's needs.

Lack of a community network that supports parents.

Recommendations

1. Provide culturally-appropriate Parent Training that will enable parents to deal with situations in their own households and also train parents to outreach other parents.

2. Develop Early-Intervention Services for At-Risk Families, prioritizing families with a chemically-dependent parent(s).

A. STUDY BY HEALTH AND ADDICTIONS RESEARCH, INC.

The following research has been conducted by Health and Addictions Research, Inc. under contract with the Massachusetts Executive Office of Human Services, Department of Public Health, Division of Drug and Alcohol Abuse Services. In the fall of 1987, the Division completed a cross-sectional study of 2,283 randomly selected seventh through twelfth graders from 100 schools in 74 communities across Massachusetts. A similar statewide cross-sectional study was carried out in the Fall of 1984 and provides a basis for comparison and trend analysis. The Division has also initiated a study that collects data on 942 sixth grade students from 26 schools in 12 communities over a 7-year period. For the purpose of interpreting this research, lifetime use is defined as ever having used a substance and current use is defined as having used an identified substance within the past 30 days. Some of the key findings are as follows:

ILLICIT DRUGS

**The overall lifetime and current use of illicit drugs decreased between 1984 and 1987. The declines were evident for all ages. Lifetime use dropped from 59.7% of the students in 1984 to 50.8% in 1987. Current use declined from 31.5% of the students in 1984 to 24.5% in 1987.

**Lifetime marijuana use dropped from 51.2% of the students in 1984 to 42.6% in 1987. Current marijuana use dropped from 27.7% in 1984 to 21.2% in 1987.

**Lifetime cocaine use dropped from 17.4% of the students in 1984 to 12.2% in 1987. Current use dropped from 7.4% of the students in 1984 to 4.7% in 1987.

**Perceived difficulty in obtaining illicit drugs increased between 1984 and 1987. The perceived difficulty in obtaining marijuana increased from 17% in 1984 to 23% in 1987. The perceived difficulty in acquiring cocaine increased from 54% in 1984 to 59% in 1987.

TOBACCO

**Lifetime cigarette use declined slightly from 68.7% in 1984 to 66% in 1987. Current use declined from 33.6% in 1984 to 31.8% in 1987.

ALCOHOL

**Alcohol is the drug that Massachusetts' adolescents are most likely to use. In contrast to the use of other illicit drugs and cigarettes, which declined in the three year period between the 1984 and 1987 statewide surveys, alcohol use increased slightly.

**Of the high school seniors in the study, 95% reported using alcohol at least once in their lifetime and 71% drank within the month prior to the survey.

**Lifetime use increased each grade; the greatest percent change occurred between grades 6 and 7 (110%).

**Adolescents tended to begin alcohol use by drinking wine (mean age first use = 11.8 years).

**In the month prior to the survey, almost half (47%) of the 9th grade students and 71% of the 12th graders drank alcohol.

**One in 10 (10%) of the 7th graders and half (47%) of the 12th grade respondents reported drinking five or more drinks at one time within the two weeks prior to the survey.

**Over half of the sophomores (53%) and seven out of 10 of the juniors (68%) and seniors (72%) reported that they drank to get high at least once or twice in the year prior to the study.

**About 11% of sophomores, 13% of juniors, and 14% of seniors stated they had been drunk in school at least once or twice in the last year.

**Alcohol is readily available: 7th through 10th grade students tended to acquire alcohol at home, at parties, or at friends' houses; one-third (32%) of the seniors purchased alcohol from liquor stores.

**One in four (25%) of 12th grade drivers reported driving after consuming five or more drinks.

**The lifetime prevalence of alcohol use by Massachusetts adolescents is higher than the national average.

B. OTHER STATISTICAL INDICATORS

**According to an article in the Cambridge Tab on 2/14/89 entitled, "The Drug Abuser Blues," an estimated 1,000-1,200 people are now on waiting lists throughout the state to get into detox centers and halfway houses. However this does not include those programs with no waiting lists that are forced to turn people away. For example, one facility in Waltham reports turning away 45 people a month.

**According to staff members at CASPAR, 1 out of every 3-4 children in the Cambridge/Somerville area has a parent(s) with a substance abuse problem.

**In a 1988 survey by the U.S. Conference of Mayors on the status of children in 52 American Cities, substance abuse was the most frequently identified problem of all children and of low-income children.

**In a Boston Globe article on 7/22/88, it was reported that 2,070 more cases of child abuse and neglect were reported to the State Department of Social Services between March-May, 1988 than in the same period of 1987. Workers and officials say that drug and alcohol appear to be the leading causes of family disruption, child abuse and violence in 55% of the cases that they investigate.

**The American Cancer society provides the following information on Teenagers and Smoking:

-Two-thirds of all smokers begin before the age of 18.
-The overall decrease in the teenage smoking rate has not affected 17 and 18 year-old girls. Approximately one out of every four girls in that age group smokes.
-Of girls between the ages of 13-17, 1.7 million-12.7% of the age group population-are smokers.
-Of boys between the ages of 13-17, 1.8 million-10.7% of the age group population-are smokers.

**The following statistics are the result of a recent survey of Somerville High School students conducted by an independent researcher associated with Tufts University Medical School. As a neighboring community to Cambridge, this data may offer some insight as to drugs being used by area youth:

-More males said they were regular drinkers than females with a ratio of almost 4 to 1.
-26.3% of females said that they were regular smokers compared with 19.6% of males.
-45% of all students described themselves as an occasional drinker; 30.6% said they experimented with smoking.
-One-third of the students said they have used marijuana.
-11& of males said they have used crack compared with 1.8% of females.
-Cocaine has reportedly been used by 13.3% of the students, speed by 13.2% and downers and angel dust by approximately 8% each.
-Almost one-third of the respondents said they drove after the use of drugs or alcohol.

CITY OF CAMBRIDGE POLICY FOR CHILDREN AND YOUTH

REPORT OF THE

STUDY COMMITTEE

ON

MENTAL HEALTH

January, 1990

INTRODUCTION

As part of the City of Cambridge initiative to develop a comprehensive Policy for Children and Youth, this study committee met to discuss the areas of Mental Health and Safety and Violence. The committee held five two-hour meetings, beginning in October, 1989.

Members of the group came from a number of different professions, and brought a variety of experience and points of view to the process. This report attempts to represent the essential findings of ten hours' intense discussion. In addition, members of the committee furnished data and materials from a wide range of sources, a selection of which will be found in the Appendix.

The work-plan focussed on the following steps:

Defining the Issue

Analyzing the Need

Analyzing the Resources

Identifying the Gaps & Barriers

Recommendations

Working on this project during a time of financial crisis and cutbacks in all human services was challenging. At each meeting, there was more bad news--of colleagues laid off, of growing waiting lists, of ever-narrower criteria for services. In the face of this demoralizing vista, the committee nevertheless continued the work of defining what Cambridge children and their families need in terms of mental health services. It is the hope of all who worked on this project that, having begun to define what a good mental health system for Cambridge children and families would look like, these findings will help decide how resources, when they again become available, will best be used.

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This report prepared by Geraldine Zetzel
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GOAL STATEMENTS

- ALL CHILDREN AND PARENTS IN CAMBRIDGE SHOULD HAVE THE BENEFITS OF TIMELY AND APPROPRIATE MENTAL HEALTH CARE.

- ALL CHILDREN SHOULD HAVE THE RIGHT TO GROW UP IN SAFETY, PROTECTED FROM VIOLENCE, ABUSE OR NEGLECT.

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I. DEFINING THE ISSUE

I.1. Background: What Are Children's Mental Health Needs?

The Committee, realizing that the mental health needs of children and youth cannot be narrowly defined, looked at the issues in as broad and inclusive a manner as time would allow. It became clear that, even among those in the field, there is no easy agreement about definitions of childhood disorders, but rather a range of conditions that can present themselves and be described in a number of different terms. Children may be seen as "troubled", "emotionally or behaviorally disturbed", having "adjustment difficulties". If their symptoms are more severe, they may be diagnosed as "seriously emotionally disturbed". Many children have a mixture of problems--for instance, school-age children with learning disabilities often show some degree of emotional disturbance.

Just as the terms and the possible causes for children's mental health problems are many, so are the possible interventions and outcomes. Some problems may stem from the child's reaction to

specific stresses; these often respond to timely short-term treatment. Many problems, such as school phobia, are common developmental issues which, if identified and treated, can be readily remediated. At the other end of the spectrum are the more severe but much rarer disorders, such as autism, which are clearly organic and chronic. These individuals can usually be helped to become more able to function, but they will always have some degree of handicap and they, as well as their families, will need long-term supports. In the middle range of severity are the majority of children whose emotional problems show up in their behavior, such as the toddler who doesn't learn to speak, the "off-the-wall" school-child, the depressed teenager. Often it is difficult to find one single cause for their difficulties. Although they are less severely impaired, these children and their families need timely and appropriate help to prevent such problems from becoming worse or more disabling.

Mental health issues in children, whatever their etiology, are seldom self-limiting--like the measles, or curable with a simple course of medication--like an ear infection. Rather, they tend to be complex and persistent, and their manifestations in the child's behavior tend to change as he or she passes through the developmental stages. Individual problems become social problems if not attended to, resulting in greater suffering, as well as a greater burden to the community's resources. And children quickly grow up to become parents themselves, thus affecting the next generation.

In every case, the child's environment--his/her situation in the family, at school, in the neighborhood--plays a vital role. Interventions must correspondingly address the different aspects of a

child's needs in the different settings. Thus each child with his/her family often requires more than one kind of service, one program, one therapy or one agency. And to be really effective the help has to be consistent and coordinated rather than fragmented.

I.2 How does violence affect the mental health of children?

The Committee considered at length how questions of safety--and the lack thereof--impinge on the mental health of children. Many of our children grow up in circumstances that are unsafe, where they become the victims of various kinds of violence. They learn that life is dangerous and unpredictable, and they in turn become violence-prone. Within the family, children may suffer physical abuse, neglect, rape or incest. They may witness violent behavior between their parents or on the street. Even in school, which should be a safe place, there is concern about knives and guns, and the possibility of violence. Among the increasing numbers of children who come to Cambridge as new immigrants, there are many who have been traumatized by what they and their families have experienced under conditions of war and social disruption.

As a result of these various kinds of violence, the Committee found, there is a serious increase in children and youth who have been emotionally damaged. It is also a fact that children who have been victims of violence often themselves become the perpetrators of violence against others. An increasing number of disturbed and disaffected youth who are on their own--at increasingly young ages--without families, are found to have themselves been the victims of earlier abuse and multiple trauma. When such teens, as a result of their acting-out behavior, end up in the custody of Department of

Youth Services (DYS) it may be too late for effective mental health treatment, since delinquent teens are harder to treat. Department of Social Services (DSS) is the public agency providing supportive services to families, however its mandate limits it to intervening only in situations where there is actual or potential neglect or abuse. Bridge Over Troubled Waters and other private organizations attempt to reach out to youth who are on the streets.

Training in dealing with issues of violence is needed, and DSS has done some training of school personnel. Other steps the City has taken include: a "Domestic Violence Intervention Program" for the highschool level, and the development of a School Department policy on "Child Abuse, Sexual Harassment and Sexual Assault". Further school-based preventive education is needed. Additionally, few agencies have the resources or the setting where violence-prone families can be safely treated. There is also a shortage of trained workers and safe settings for treating children who continue to live in abusive families. It is significant that in some neighborhoods, conditions are such that workers themselves feel it's unsafe to make a home visit.

I.3. What Groups Are at Especially High Risk?.

The Committee considered some specific populations in the City and some societal problems which either predispose or directly lead to emotional disturbance in children and youth. Identified special at-risk populations include children who...

...grow up in families where there is adult mental illness or substance abuse

...are themselves involved in substance abuse

...live in families with multiple high-risk factors
e.g.poverty, joblessness, isolation, etc.
...live in an unsafe environment, without adequate supervision
...have been abused (physically, sexually or emotionally)
...have been victims of (or exposed to) family violence, rape or incest
...are homeless or living on their own as minors
...are themselves teen parents or the children of teen parents
...are refugees or undocumented aliens
...are school-age immigrants with no previous schooling

In addition, the Committee members agreed in their analysis of certain alarming trends in the mental health of children. All providers are now seeing younger and younger patients who are in more serious trouble: it is now routine, for instance, to see 7 and 8-year-olds who are dangerous or suicidal. Not only are more children more disturbed, their problems are more severe and they are much harder to work with in therapy than five years ago. It was felt that by ages 8 or 9, more children are already "lost"--unreachable by adult intervention--and the estimate is that at the elementary school level, 70% of these are boys, but by high school age, the ratio of boys to girls is 50/50.

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II.RESOURCES

II.1. Background: What Agencies Are Responsible for Providing Services?

A number of agencies provide direct services that address the the mental health needs of Cambridge children and their families. Each defines its responsibilities according to its mandate, within which the guidelines and policies may change from time to time. As will be seen, such changes have serious impact on who gets help and who doesn't, especially in times of scarce resources.

The following is a brief outline of public agencies and their functions as regards mental health needs of children:

Early Intervention program:(under Mass. Dept. of Public Health with suuport from DMH)

Birth to age 3, children who are identified & referred

-not an entitlement, numbers served limited by funding

Dep't of Social Services (DSS)

Birth to 18. Child protection:

-provides family supports, daycare, foster placement

-provides voluntary services to families on request

-services limited to families with abuse/neglect issues

-special unit (new) for families with substance abuse

Department of Mental Health (DMH)

Serves those children & adolescents diagnosed as seriously emotionally disturbed (i.e. with a history of psychiatric hospitalization or at risk for being hospitalized)

Department of Mental Retardation (DMR)

Provides respite care to families with developomentally disabled children, including some with mental illness

Cambridge Youth Guidance Center in (partnership with DMH)

Outpatient services to children & families;multicultural/lingual

-treatment; community consultations; emergency services

-adjunct services (Companion-Tutor & camping)

Cambridge Hospital

Emergency services; referral;limited ambulatory care

12 bed inpatient Child Assessment Unit

Neighborhood Health Centers

Teen Health Center

Cambridge School Department (Bureau of Pupil Services)

Serves children 3 to 22 under Chap. 766 Special Education

-provides CORE assessment & Individualized Ed.Plan

-focusses on educational (not treatment) needs

Court Clinic & Adolescent Consultation Services

Serves court-involved children & youth

Other providers:

-Private therapists; HMO's; other area hospitals

-Cambridge Family & Children's Services, Catholic Charitable Bureau, The Family Center & other private agencies

-Office for Children (OFC)
provides information, referral & case advocacy

II.2 Access: How Is the System Used?

The Committee discussed how children with mental health problems are identified and referred for help, using a hypothetical case of parent who moves to Cambridge from out-of-state and needs mental health services for her children. It became clear that there is no reliable point of entry, that the system is confusing, even to those familiar with it, that it often takes many phone calls and many hours to locate help, and that there are a number of pathways by which such a parent might (or might not) find the appropriate services.
With a child under the Kindergarten entry age, there is no sure way that a psychological problem will be identified except by the parent. If the parent does not identify an issue, a health care professional may notice something amiss and make a referral.
However, many young children in Cambridge do not have regular health providers or check-ups, so problems may not be identified early. A family day-care provider or the staff at a pre-school program might be the first to identify the child's need.

The surest way for a child over the age of 5 to be identified as having mental health needs is through the school system, where a teacher or school nurse is the most likely to notice the problem and initiate the evaluation process. Chapter 766, the special education

law, is in fact the only entitlement program which ensures services to all children whose disability affects their educational progress. An older child whose behavior leads to police involvement may become court involved and be referred for help through the Court Clinic.

III. GAPS & BARRIERS

III.1. What Is Missing?

The Committee found that, while the City has a good variety of services, it lacks a comprehensive mental health system for all children and families. Also lacking is a continuum of services, ranging from the least to the most intensive without major gaps. Services that exist are overburdened, lacking the resources to respond to the numbers of children and families who need help. In addition, Cambridge falls short in providing certain needed mental health services. In part, these gaps reflect the oft-cited social changes and stresses which result in more parents who are struggling, fewer community supports, and an increase in disturbed children and adolescents. For the younger ages, providers agree, where has been a sharp increase in children showing more serious and difficult-to-treat levels of disturbance, resources of all kinds are lacking or insufficient. Affecting all ages, there exists a climate in which preventive services are not a priority, so that existing resources are primarily used for the most costly kinds of intervention.
The Committee identified a need for the following specific services to address some of the gaps in the current system:

-after-school options for children with special needs, meaning--
therapeutic activity programs with trained staff
mainstreaming of those children who could be integrated

-day treatment center for youth
who cannot attend school but don't need residential

-short-term alternative placements in Cambridge
for children & adolescents who can't return home
after hospitalization or during crisis

-home-based services (therapy, activities)
for seriously emotionally disturbed children

-additional programs for emotionally disturbed 9-12 year olds
community-based intervention
both long- & short-term placements
substance abuse treatment

-more bilingual, culturally appropriate mental health services
for new immigrants & refugees
for members of linguistic minority groups

-more ambulatory services for children & families
individual pscyhotherapy
broad array of supports (e.g. daycare, parent groups)

III.2.How Well Is the Existing System Actually Working?

The Committee considered not only actual gaps, but also barriers that prevent access to existing services. It found that, in this era of cut-backs, the impact is on mental health services to children is pervasive. It causes widespread pain--among providers who are demoralized by being unable to respond as well as among children who must wait. While the impact is felt in many areas, it is particularly destructive in areas which target the very young and on services which are preventive. For example, although it is obvious that early identification and treatment for children with emotional problems at a critical period in their development can prevent more severe later dysfunction, the Early Intervention program, serving children from 0 to 3, has a growing waiting list.

There are other needed programs which exist in theory, while in fact services are increasingly limited because of budgetary constraints. Due to lack of funding, personnel and space, they are not available to many of those who are eligible. The system is overburdened, and cannot respond. Thus there are harmful delays, as waiting lists grow and the children who need help grow older and harder to treat. An example would be the existing special needs afterschool programs, which serve only a fraction of the children who require carefully structured and supervised activities with trained personnel when their school day is over and during vacations.

Another way in which access to services is limited is by the narrowing of eligibility requirements: as criteria for services get more and more strictly defined, agencies serve fewer children and

families. The general tendency is for the "sickest" (but not necessarily the most treatable) clients to get most services, while the less acute cases get less attention. For example, the assaultive youngster will get help sooner than the depressed one, the very atypical child will be placed in a self-contained classroom while the withdrawn, quiet child one may be mainstreamed without needed supports.

Policy changes also re-define who gets what kind of help. For instance, in the school system, although the number of emotionally disturbed children is growing, fewer are currently being placed in special needs classes or private special needs schools. Yet for these students to be maintained in regular classrooms without detriment to themselves or their classmates, regular teachers must have more specialized support and training, for which resources are also scarce. Another example is the changed policy of DSS. The agency provides supports, such as day-care, homemaker services and counselling, for abusive or neglectful families, but it currently lacks the ability to offer such supports as preventive measures to families which are on the verge of falling apart.

Mental health services are usually governed not by clinical considerations, but by the limitations of reimbursement. If the family lacks the ability to pay, or has no insurance coverage, or if the type and amount of coverage is limited, the result is that the child and the family will not get appropriate help. This means, for instance, that therapy may be terminated when the coverage runs out, regardless of clinical considerations. Or that home-based intervention--which may be clinically the best way to help a mother

and child with mental health problems--is not feasible because a clinic visit is the only kind of treatment that is reimbursable. Agencies struggle to stretch their services, but the options for free care are increasingly limted; as Medicaid tightens its regulations, covered services are reduced.

The Committee identified another type of barrier: lack of information. All those who come into contact with children need to be fully informed about how to know when a child or family is in trouble, when to make referrals to mental health and supportive services, and where to find the right kind of help. It is critical that providers from different agencies know how to collaborate around cases, particularly when there are multiple problems in a family. It is essential that families, already under stress from dealing with a problem, be able to find the help they need.

The lack of a regular point of entry into the mental health system for children to be a serious problem. Especially in the preschool age group, too much depends on a hit-or-miss identification, which can lead to delayed referral and treatment at a critical age. Workers in one agency often do not know enough about resources available elsewhere. Likewise, teachers, community agencies, churches, even pediatricians may lack the necessary knowledge. All of these difficulties are compounded for linguistic minorities and new immigrants. There are various directories, but little training and not enough distribution or dissemination of information. The City, specifically, lacks the ability to function as a resource to those seeking information about mental health services.

Since it is difficult to treat a child without also working with a family, another type of barrier occurs when the families either resist help or when there is no viable family to work with. There can be many reasons for this--among those identified were some which could be easily addressed through education, such as lack of knowledge about mental health. Other barriers, such as family dysfunction, are much more deep-seated, multifaceted and difficult to change. The perception among providers is that the old model--of seeing the child and the family for therapy at regular appointments in a clinical setting--just doesn't work for an increasingly large number of cases.

IV. STRATEGIES & RECOMMENDATIONS

IV.1.The Committee's recommendations flow from the issues that were identified and discussed in the course of its work. In order to begin to reach the goals as stated, the real and urgent needs of children and families in Cambridge must be addressed in a broad and comprehensive fashion. Although most remedies cost money, some of them depend even more on changes of attitude and a heightened awareness about children's mental health issues among all sectors.

IV.2. School-Based recommendations--since the school system is the one agency through which the majority of Cambridge children with mental health needs get access to help, the following recommendations were made:

-improved collaboration & networking between school & agencies
at the elementary level as well as at high school
-consultation, training & support re mental health issues
to teachers, beginning at the pre-school level
around ED students who are mainstreamed
-systemwide training for school personnel
for crisis intervention (e.g. weapons, suicidal students)
-school-based comprehensive programs (modeled on Headstart)
-expand & support preventive programs (such as Winning Edge)

IV.3 Community-Based ways in which we can foster better mental health in children:

-family supports, accessible via places where parents are:
-through daycare, schools, church, cultural organizations & neighborhood centers
-parent training, beginning at the prenatal period
including programs adapted to the needs of:
-teen parents
-families with multiple risk factors
-support to generic programs (Y, Scouts etc.)
for integration of ED children into activity groups
-expanded afterschool options for ED children
& supports to workers in regular after-school programs
-increased consultation & support to daycare providers
-both family- & center-based
-for early identification of children with m.h. needs
-dissemination of information about mental health in children
to lay people in the community:
-about issues of abuse/neglect & DSS 51-A process

-about services & agencies

-about making referrals

-increased services to ethnic & linguistic minorities

-more bilingual workers in all agencies

-provide culturally sensitive education
around mental health issues

-specific services targeted for:
new immigrants & refugees
undocumented aliens
older school entrants without prior formal education

IV.4.The Mental Health System must provide a continuum of care and close the serious gaps which now exist:

-DMH Residential system must be adapted
to treat youth without viable families
to provide adolescent day treatment services
& halfway houses
to provide long-term residential treatment for ages 9-12

-improve early identification and treatment (1 to 5 year-olds)

-expand preventive services around abuse, neglect & violence
-training of teachers, daycare providers & others

-provide short-term living alternatives for latency age & teens
-to avoid major disruption during crises

-build in expectation of interagency collaboration

-research & implement alternative treatment modalities

-for keeping children in own family

-for treatment of hard-to-treat cases

-work to modify reimbursement models

-for ability to provide home- & community-based treatment

-expand all programs for 9 to 12-year olds

-afterschool options

-substance abuse prevention & treatment

-community-based supports

-improve supports to identified ED children

-including those with other disabilities & with parents who are mentally handicapped

IV.4. The City of Cambridge--some initiatives that could be taken:

-provide space

-for alternative living settings within the City (to enable children who can't live at home to maintain school & community ties)

-for therapeutic after-school programs

-expand Neighborhood Health Centers

increased space

enhanced ability to deal with mental health needs

-provide resources

-personnel from Human Services to do research & networking

identify promising practices from other cities

-information & referral telephone service at City Hall

-develop information packet for all Cambridge parents re health & mental health services

-provide leadership

-link up officially with statewide Children's Caucus

-use "Common Ground" newsletter to identify resources

-foster linkages with universities (Children's Law Project at Harvard, etc.)

mobilize the private sector to take more active role

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APPENDIX

Selected Indicators

Note: Children in need of mental health and related services frequently may be getting different services from several agencies. The data below, therefore, do not provide information on the total number of children currently receiving services within the city.

The numbers below refer to data gathered as of November, 1989.

A.SCHOOL-AGE CHILDREN RECEIVING SERVICES UNDER CHAPTER 766

The estimated total of children in classrooms identified as for children who are Emotionally Disturbed is 43. In addition, 53 students with the diagnosis of Learning Disability, or other problems

that have an emotional component, are served in classrooms within the system.

-Prototype 0.4, students in"substantially separate" classrooms:

-elementary grades: 30 children

-high school level: 26 emotionally disturbed

24 other

An additional 135 students receive their education out of district or in private specialized settings. Approximately 70% of these are identificed as having social/emotional disabillities ranging from autism to severe emotional disturbances.

-Prototype 0.5 :students in specialized private day schools and 0.6, residential placements

B.THERAPEUTIC, CLINIC-BASED SERVICES

Cambridge Youth Guidance Clinic provides multicultural clinical services for children and their families both on an on-going basis and in emergencies. They receive emergency cases during the hours the clinic is open; at other times, Cambridge Hospital provides coverage.

-Open cases: 325 families--720 clients seen

about 66% from minority groups

-Of new cases, July 1988 to June 1989

11 cases required hospitalization

-From July 1989 to December 1989, 27 emergency child cases were seen, of which 7 were placed out of home, 2 in hospitals, 2 in ShortStop (shelter) and 3 in community intervention.

Cambridge District Court Clinic provides therapeutic and consulting services to children, and their families, who are court-involved.

-Approximately 400 clients are seen each year

-in 1989,Adolescent Consultation Services

70 % of youth had families with alcohol abuse (up 33 %)

in 88% of families there was abuse, neglect or violence

60% of clients showed serious learning deficits

71 % of clients (compared to 53% in 1988) were minorities

the largest increase was in the Portuguese/Latino group

Harvard Community Health Plan is a HMO that provides health services, including mental health, for many Cambridge families. The figures below, for the Cambridge center, are not broken down by community.

-Approximately 500 child mental health cases per year

of which over half are in active treatment

C. HOSPITAL-BASED SERVICES

-Emergencies

Cambridge Hospital sees approximately 2.5 cases per week (These data do not represent the number of children served, since some may have multiple admissions)

-In-patient treatment

The Child Assessment Unit serving Cambridge & surrounding communities opened December 1989. Time limited (average 4 to 6 weeks, maximum of 8), the unit will serve children ages 5 through 15 but focus on ages 7-12

D. DEPARTMENT OF MENTAL HEALTH SERVICES

-Case managements services for approximately 25 children
most have been hospitalized
-Residential services at Gaebler Children's Center, at state hospitals & in contracted residential treatment facilities

-Gaebler Children's Center: 7 admissions
-Metropolitan State Adolescent Unit: 6
-Other DMH facilities: 3
-Long-term contracted residential programs: 4
(5-6 awaiting beds)
-Short-term contracted residential programs: 19 in last 14 month period

E.DEPARTMENT OF SOCIAL SERVICES

The number of open cases and 51-A (abuse and neglect) reports do not necessarily translate into numbers of children with emotional disturbances. However, since a significant proportaion of the open cases and 51-reports screened in show need for therapeutic interventions, the data below provides some indication of the total number of Cambridge children in the DSS system.

-DSS open cases in the Somerville/Cambridge area: 553
approximately 50% are Cambridge families
-Reports: during a five-month period
average of 88 cases reported to Intake Unit
of which 62 cases were screened in for investigation
of those 62 cases, average of 31 were supported

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CITY OF CAMBRIDGE POLICY FOR CHILDREN AND YOUTH

REPORT OF THE

HEALTH CARE AND NUTRITION STUDY COMMITTEE

June, 1989

INTRODUCTION

As part of the City of Cambridge initiative to develop a comprehensive, citywide Policy for Children and Youth, the Health Care and Nutrition Study Committee was called together and held four two-hour meetings during February, March and April, 1989, to consider issues concerning children's health and nutrition in Cambridge. A final meeting was held in June, to discuss the Committee's recommendations.

Members of the group came from a number of different agencies and brought a rich fund of first-hand experience and insight to the discussions. In addition, they helped collect useful materials from many sources and much relevant data. The work-plan was an ambitious one, moving from a Goal Statement through the following steps:

Defining the Issue
Analyzing the Need
Analyzing Resources
Identifying the Gaps
Making Recommendations

Considering the contraints of time, an impressive amount was accomplished. The Committee was greatly helped by the concurrent research done by two Kennedy School students, Elise Fong and Chris Collins. The sections of Ms. Fong's report which analyze the resources for children's health care and nutrition in Cambridge are particularly relevant to this Committee's work, and the two reports should be considered side by side.

In its discussions, the Committee focussed mainly on issues of children's health and nutrition. However, the reality is that children depend on parents and parents depend on the social fabric. Thus, while trying to think about the needs of Cambridge families and children from all socio-economic and ethnic backgrounds, and aware of the broad task of setting citywide standards, it was also clear that the needs of children

living in poverty, with all its ramifications, are the most urgent. Similarly, while not dealing specifically with such social issues as child abuse, teen pregnancy, drop-out, HIV infection, alcohol and drug abuse,the Committee always remained mindful of the fact that raising healthy children is not simply a matter of providing adequate medical care.

In order to study how a child's health and nutritional needs are met as he or she grows up in Cambridge, the committee tracked a hypothetical individual from birth to age 18, noting the various points at which this child would probably come into contact with the health care system, the situations under which child or family might fail to receive needed services, the various pathways by which children are or are not helped to grow up healthy. For purposes of the report, it has seemed useful to group the Committee's findings under six headings:

I. MOTHERS, INFANTS & TODDLERS

II. PRESCHOOL & SCHOOL-AGE CHILDREN

III. FAMILIES NEEDING SUPPORT

IV. LINGUISTIC & ETHNIC MINORITIES

V. ACCESS & UTILIZATION OF EXISTING SERVICES

VI. ADDITIONAL SERVICES NEEDED

In summary, the Study Committee, found that the health and nutrition service network in Cambridge is basically sound and that the City is "service-rich." It identified, however, a number of weaknesses and pinpointed areas in which there is cause for concern. The Committee's recommendations focus on ways in which existing services can be improved, problems of access, the need for outreach, and specific gaps where new services are needed.

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GOAL STATEMENT

ALL CHILDREN IN CAMBRIDGE SHOULD HAVE THE BENEFITS
OF GOOD NUTRITION, ONGOING PREVENTIVE HEALTH CARE AND TREATMENT.

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I.MOTHERS, INFANTS AND TODDLERS

BACKGROUND OF THE ISSUE.

A good start is essential if our children are to grow up healthy. The Committee recognizes that good prenatal care and supports to mothers and babies in the first weeks of life are crucial. The postpartum period is a critical one, yet too many mothers are forced to go back to work too soon; too many are isolated and in need of support, especially in the early months. We need a system that assures all babies and young children a healthy and safe early environment. New parents are at a critical stage for learning about normative child development, the importance of good early nutrition and regular preventive health care. At present, the system for tracking births to Cambridge families is inadequate: not all infants and mothers can be reached in a timely fashion for regular preventive health care and parenting advice, or early identification and treatment of health problems.

RESOURCES IN CAMBRIDGE.

Depending on income level, preference, and type of health insurance, mothers and babies may receive health care through Cambridge Hospital, other area hospitals, the Neighborhood Health Centers, HMO's and private providers. There is a free care pool for those who lack health insurance (about 40% of families seen in the Cambridge Hospital system) and are over income for Medicaid. Adolescent mothers and their babies are

also served through the Teen Health Center and the Adolescent Parenting Program at Cambridge Rindge & Latin School.

Programs targeted at specific populations that are identified as needing extra help--such as Women, Infants & Children (WIC), Visiting Nurse Association Maternal & Child Health (VNA), Early Intervention--provide services to mothers, babies and young children identified as socially, nutritionally or medically "at risk." At age 3, if identified as having possible special needs, or otherwise upon regular school entrance at age 5, children must have their immunizations up to date and are screened for developmental and health problems.

IDENTIFIED PROBLEMS.

-Maternity stays are brief (2 to 4 days), so there is not enough time for new mothers to learn about infant care. Postpartum home visits--which provide support, instruction and care in the optimum setting and at the critical time for learning--are limited to "high-risk" mothers & babies. Safer postpartum discharges and continuity of care are needed if we are to prevent poor outcomes, especially for the most vulnerable mothers and babies.

-Short maternity leave from work (average--6 weeks) has a negative impact on mother-child outcomes, resulting in stress, mothers choosing not to breast-feed, babies put into day care at a vulnerable age, etc.

-Many babies & preschool age children are not seen by health care providers except in emergencies--they don't get preventive & regular care, check-ups or shots--there is no systematic way to assure timely care & identification of health problems. Many insurance policies lack coverage for well-baby, well-child visits.

-Lack of transportation or adequate child care (for siblings) prevents parents from bringing in their babies and young children for regular medical care.

-Other barriers:

Lack of follow-up for births taking place outside of Cambridge prevents follow-up for infants & early identification of health problems.

Lack of information about good early nutrition, beginning with the advantage for infants of breast-feeding.

Lack of family planning--babies born too close together--parents overwhelmed.

Underfunding of WIC program--currently serves less than half of those eligible

Lack of good prenatal care: babies born at low birth weight or premature or with preventable health problems. Babies born drug-addicted--fetal alcohol syndrome--birth defects--AIDS.

PROPOSED STRATEGIES.

-Advocate for longer maternity leaves & increased funding of WIC and other proven mother/child support programs such as Neighborhood Support System for Infants.

-Advocate for insurance coverage for well-baby, well-child visits.

-Offer two free pediatric health visits to every Cambridge child.

-Provide better postpartum supports: home visits to all Cambridge mothers, & more extended home visits to at-risk infants & mothers, to teach parenting skills, nutrition & child care.

-Provide better early nutrition by educating mothers-to-be & new mothers about the benefits of breast-feeding & supporting nursing mothers.

-Improve tracking of all births to Cambridge residents so as to link mothers & babies up with a regular health care provider.

-Provide follow up care to all teen mothers.

-Provide education for parents (& future parents)--in culturally & linguisticaly sensitive forms--about family planning, child development, regular health care & good early nutrition.

II. PRESCHOOL & SCHOOL-AGE CHILDREN

BACKGROUND OF THE ISSUE.

The healthy development of children requires the knowledgeable support of their families, and also--more and more frequently--of the other people that are responsible for their care. Young children whose parents work are looked after by baby-sitters, family- or center-based day care providers. Since good child care is scarce and all child care is costly, there is a great variability in standards of safety, health care and nutrition among different settings. Thus, many of our poorer children are spending critical early years in unsafe environments, lacking the care and nurturance they need. The resultant health problems, ranging from poor eating habits and untreated ear infections to anemia, lead poisoning and accidents, have far-reaching and costly consequences for later health and development.

Preschool programs, either private, or for those eligible, public ones such as Headstart, provide access to health care and nutritious food. Once children are of school age, teachers and other school staff can monitor their well-being, but after school hours and during vacations, children continue to need supervision, activities, safe and appropriate places to be, healthy food to eat. So-called "latch-key" children and teens are at risk for a number of problems, from depression and obesity to accidents, delinquency and substance abuse.

RESOURCES IN CAMBRIDGE.

Pediatric services are provided through hospitals, clinics, HMO's and private physicians. Certain programs, such as WIC, licensed day care centers, and preschools require regular physicals. In the public school system, at the elementary level, four school nurse practitioners, two school nurses and three health aides provide services for students and referrals to other services as necessary. The Department of Pediatrics works with the School Health Services to carry out state-mandated immunizations, physicals, and screening for vision, hearing and scoliosis. Interval health screening is done at the 1st, 4th and 9th grade levels. At the secondary level, the Teen Health Center offers school health services

to students as well as primary health care, health education and counselling to all Cambridge teenagers.

Children whose families are eligible receive Medicaid coverage for health care, food stamps; they may qualify for free or reduced-price school meals. DSS offers supportive services to families, mostly around protective issues. The Welfare Department and the City's food pantry network provide emergency vouchers and food to families in need.

The school system offers a good range of afterschool and school vacation programs; other agencies, such as the "Y" and neighborhood centers also offer activities at low cost. Transportation from school to afterschool programs is available in most situations, but transportation home afterwards is not provided. The Recreation Department, Cambridge Camping Association and some other agencies offer summer camp programs.

IDENTIFIED PROBLEMS.

-Lack of appropriate care & nurturance: parents don't know about preventable conditions & environmental hazards, leading to childhood accidents & illnesses. Children are poorly supervised, left on their own or in makeshift arrangements, without adequate & supportive adult care.

-After-school programs are not seen as a priority by parents who don't understand the value to their children of healthful activity & adult supervision. Costs & lack of transportation are further barriers to enrolling children in available programs.

-There is a dearth of afterschool & vacation programs for children with special needs. There is no child care for sick children.

-Older children & teens lack places to be that are safe, inviting & appropriate.

-Hunger & malnutrition among Cambridge children is on the increase. Because government eligibility criteria for school feeding programs are rigid & forms are daunting, many eligible children are not getting school meals.

-Nutrition education is not taught in the school curriculum. Non-nutritious foods are too easily available near school sites. Many children are growing up in families with poor nutrition habits.

-Many teens are essentially on their own, but lack the skills & information needed to take care of their health, eat properly, etc.

-Depression & depression-related symptoms (headaches, obesity) are frequently-seen complaints among school-age children & adolescents. There is a lack of mental health services for children.

-Medications, eyeglasses etc. are not usually covered by health insurance.

PROPOSED STRATEGIES.

-Advocate for greater flexibility & simplified application procedures for school meals eligibility; for better insurance coverage for pediatric health maintenance; for coverage of medications, eye-glasses, etc.

-Advocate for affordable, quality child care for all ages, including sick-child care.

-Provide health & nutrition education to children & teens--for better eating habits, self-care & understanding of own health needs.

-Educate parents--for awareness of preventive health care for children, for healthy & safe child care (in & out-of-home), value of afterschool programs & good supervision for their children.

-Improve range of afterschool/vacation programs--including transportation. Provide programs for children with special needs.

III. FAMILIES NEEDING SUPPORT

BACKGROUND OF THE ISSUE.

All parents need some support from family and community in raising healthy, well-functioning children. Some parents, because of social, personal, economic or environmental stresses, need extra support in order to provide for their children's physical and emotional health.

Working class parents who are struggling to make ends meet have little energy or money or time to deal with their children's non-emergency health needs. Many working families are struggling to put food on the table. Adolescent or single mothers, young parents who lack maturity or parenting skills, parents who are overwhelmed with social problems such as family violence, substance abuse, illness, poverty and dislocation, are unable to provide good care for their children. Children in dysfunctional families are at risk for neglect and abuse, as well as for a multitude of disabling health conditions--most of them preventable, all of them with long-term consequences that are costly in both human and financial terms.

Whatever the causes of such families' problems, their situation is often so overwhelming that they rarely are able to make regular use of the existing services--therefore the system has to reach out to them, engage them and keep them engaged over time.

RESOURCES IN CAMBRIDGE.

Agencies in Cambridge offer a wide range of resources for indentification, referral and services to families. Help is available through the hospitals and the Neighborhood Health Clinics, through city agencies such as Cambridge Economic Opportunity Committee (CEOC) and the Department of Human Service Programs. State and federal agencies that offer help at the local level, ranging from direct services to referrals, include the Departments of Public Health, Social Services, Mental Health, and the Office for Children. Agencies, such as the Cambridge Youth Guidance Center, the Preschool Unit, Cambridge Family and Children's Services, Catholic Charitable Bureau and others supply a network of family support services. The school system works to identify troubled families and assists them around problems which affect their children's ability to function well in school.

IDENTIFIED PROBLEMS.

-Some families need extra supports. The pressures of poverty & social stresses--the difficulties of meeting basic needs prevent them from being able to focus on their children's health needs.They are unable to access available services or follow-through on medical recommendations.

-Other stresses cited are:
unemployment--inadequate income--inadequate health insurance
substance abuse--family violence & disruption
frequent moves--homelessness
illness & mental health problems
disorganization--inability to plan--lack of motivation
lack of time off from work--lack of transportation
chaotic & overcrowded living situations

-Such problems are intensified for teen mothers--single mothers--mothers of children with demanding health & developmental problems--families who are isolated.

-The service system compounds the problem: services are fragmented --access can be difficult & time-consuming & frustrating--there is lack of information & coordination among service providers.

PROPOSED STRATEGIES.

-Advocate for <u>better insurance coverage</u> for pediatric services.

-Identify & contact at-risk families through <u>outreach</u>; provide <u>supports</u>, <u>case management</u> & <u>comprehensive social services</u> to families. Provide a <u>single point of entry</u> to family support system.

-Make <u>services less fragmented</u> & strengthen <u>provider information network</u>.

-Cut <u>teen births</u> in Cambridge by 50%, track all teen births & provide comprehensive services.

-Teach <u>family life skills</u> in school, including family planning--home & budget management--parenting skills.

-Increase <u>public awareness</u> of children's health needs & of available medical & other support services--use media campaign.

IV. LINGUISTIC & ETHNIC MINORITIES

BACKGROUND OF THE ISSUE

Cambridge is a city with a diverse population: families from at least 40 different cultural and linguistic backgrounds, and a steady influx of new immigrants, many of them from underdeveloped countries. The Cambridge population is estimated to be 62% white, about 19% Afro-American, 10.6% Hispanic, 9.2% other non-white. 926 students are enrolled in the school system's bilingual or English as a Second Language (ESL) classes, while many other ethnic minority children attend private or parochial schools.

It is clear to providers that health services available in the City are under-utilized by families from many of the cultural sub-groups. There seem to be a number of reasons for this, but the result is that these children are at risk for not getting regular health care and good nutrition.

RESOURCES IN CAMBRIDGE

Cultural organizations--such as Cambridge Organization of Portuguese Americans (COPA), Cambridge Haitian-American Association (CHAMA), Concilio Hispano, Centro Presente and others--offer information and referral to help people access the system. Health care providers in Cambridge are well aware that their services should be responsive to the needs of this population, however, only a few programs and agencies have bicultural, bilingual staff. The programs that do have such workers--such as some of the Neighborhood Health Centers, the Midwifery Service at Cambridge Hospital, and the Cambridge Youth Guidance Center,--or that have a "magnet person" who can act as a resource to a particular group are typically <u>over</u>-utilized, which demonstrates the need.

IDENTIFIED PROBLEMS

-Language barriers are the most disabling. Parents who don't speak English, or speak it poorly, many of whom also can't read, have great difficulty accessing health services for their children.

-Cultural attitudes about health & illness do not include "taking the child to the doctor" on a preventive, non-emergency basis; this leads to lack of regular health care & over-utilization of emergency rooms.

-Culturally-based customs about diet may lead to poor nutrition: it is difficult & expensive to buy familiar foods; foods substituted may be non-nutritions; providers mostly lack information about healthful "American" substitute foods to recommend.

-Many parents prefer using traditional remedies for non-critical illnesses, thus don't bring their children in for routine medical help.

-Newcomers or undocumented families fear involvement with the system: although their children are eligible for city & some state programs, they are not enrolled because parents are afraid of jeopardizing their status.

-Further barriers are: lack of information about the health care system--services difficult to access (filling out forms, etc.)

PROPOSED STRATEGIES

-Recruit & train more bilingual & bicultural workers, at all levels & in all social services, not only health services.

-Educate providers about traditional remedies, foods, child-raising customs & health care practices.

-Provide outreach & education: using existing cultural organizations, community networks (churches, ethnic events, bilingual classroom staff) to reach and educate parents.

-Adapt & disseminate information--culturally & linguistically appropriate food charts, child health care advice, normative child development. Create teaching materials, such as cassette tapes, to reach parents with limited reading skills.

V. ACCESS & UTILIZATION OF EXISTING SERVICES

BACKGROUND OF THE ISSUE.

Cambridge is a city which is rich in services that support the health and nutrition needs of children. The fundamental structure of the system is sound. Nevertheless there remain populations which are unserved or underserved. By definition, it is hard to document the need, since it refers to children who are NOT being seen in the system. It is only by noting the many children who reach school entry age without having had regular check-ups and whose immunizations are not up to date, children who are found to be suffering from preventable conditions such as lead poisoning or anemia or hearing loss that one can infer that existing services must be better coordinated, publicized, and made more accessible, if they are to be used by all families who need them.

RESOURCES IN CAMBRIDGE.

In addition to the provider agencies already cited in other sections of this report, the schools, the housing authority and various departments of the city government that come into contact with families can serve as a link to needed health services. The Office for Children, through its area Help for Children Unit, provides advocacy, information and referral for parents and others who request help in accessing the system on behalf of a child. Cambridge Community Services publishes and sells a directory of human services agencies in the city. Other directories have been available from time to time from various sources. There is great potential for raising awareness about preventive health care through the media, especially cable TV, radio, poster campaigns.

IDENTIFIED PROBLEMS.

-There is a lack of coordination among agencies & programs, which results in fragmentation of services. Parents seeking help are referred to multiple agencies, each with a different mandate, often in different parts of the city, for different needs, requiring different forms & documentation. Parents may hesitate to apply because benefits have been denied or because of the stigma attached.

-Several essential programs are underfunded, can't serve all those eligible.

-Providers feel they lack sufficient knowledge about other agencies & programs. There is no source of regularly updated information.

-Other barriers cited:
pressing economic & social needs--poverty
lack of insurance coverage or under-insured
lack of knowledge about preventable health conditions
lack of transportation & child care

PROPOSED STRATEGIES.

-Inter-education of providers: increase linkage between agencies--involve private & HMO providers--use meetings, publications, directories, a Human Services Fair to disseminate information.

-Advocate for increased funding of programs (WIC, Medicaid, Neighborhood Support Services for Infants, etc.

-Advocate for improved insurance coverage for regular pediatric visits.

-Use all points of contact with children to link them up with health care system--at time of birth, upon entering any kind of day care, preschools, camps, etc.

-Improve transportation: provide van service to help parents get children to regular medical services--to ease access to other services.

-Counteract the effects of bureaucracy: coordinate services wherever possible--simplify procedures & forms--build in staff time & training so that families can be offered more comprehensive help, including social needs such as budgets & planning.

VI.ADDITIONAL SERVICES NEEDED

BACKGROUND OF THE ISSUE.

There are gaps in the system. A truly comprehensive health network for children would include dental care, both prevention and treatment. It would provide systematic reduction of common preventable accidents, illnesses and conditions. It would support parents, through outreach andeducation and by easing transportation and making child care more available, flexible and safer in their efforts to take better care of their children's health and nutrition. It would assure that no child is left out of the system because of poverty, lack of insurance coverage or other economic or social factors.

RESOURCES IN CAMBRIDGE.

All of the agencies and programs cited in other sections of this report are potential providers of the missing services. In addition, the private sector could be tapped and become involved. The city government could take an active role in creating coalitions and finding the dollars that are needed.

IDENTIFIED NEEDS.

-Many children lack dental care. Screening & hygiene, as well as treatment for dental problems, is essential. Many parents do not seek dental care for their children: it is not seen as a priority.

-Most health insurance policies do not cover pediatric dental care, eye care, hearing aids, vitamins or medications.

-The Neighborhood Health Centers cannot meet all the health needs of children, but when referrals are made to specialists or other services, lack of transportation is the barrier which most often prevents the parent from following up on such referrals.

-Lack of adequate, affordable child care affects the quality of children's health. In addition to the need for generic child care, there is the need for care for sick children, for children with special needs, for infants. Also, parents who work shifts need flexible hours.

-There is a lack of awareness about safety issues: use of car-seats--household & other environmental hazards

PROPOSED STRATEGIES.

-Provide dental care for children, including screening & prevention/hygiene, checkups & sealant coating. Advocate for better insurance coverage for dental health.

-Provide transportation to medical appointments: a van (as for elders & handicapped).

-Improve child care:for infants--nursery facility for sick children--for special needs.

-Advocate for parental leave for sick-child care--more flexible day care schedules.

-Provide comprehensive health & nutrition curriculum in the schools.

-Educate parents & other caregivers around safety issues, including: use of car seats--preventable houshold accidents--how to make environments safe for young children.

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APPENDIX

I.MOTHERS, INFANTS & TODDLERS

▸The estimated total number of children in Cambridge (0-18) is 13,000. Of these, about 4500 are under the age of 5.

▸In 1987, the number of births to Cambridge residents was 1103. Breakdown by race:

62% white/non-Hispanic
16.7% Black
10.6% Hispanic
9.2% other

▸Of this number,it is estimated that fewer than half were born at Cambridge Hospital, permitting continuity of follow-up care--the remainder were born elsewhere. Birth certificates for other hospitals are often not filed in Cambridge until many months later, thus preventing necessary follow-up care.

▸The infant mortality rate (1987) was 8.2 per thousand in Cambridge compared to 7.2 % statewide; down from 10.3 per thousand live births in 1986.

▸Low birthweight babies (2,500 grams or less) are at increased risk for health problems. In 1986, Cambridge had a LBW rate of 6.0% compared to 5.6% statewide.

II. PRESCHOOL & SCHOOL-AGE CHILDREN

▸This semester, 926 children in the public schools get free or reduced-cost meals. The application guidelines are set by the federal government and are strict.

▸It is estimated that 1 out of 4 children in Cambridge are living in poverty.

▸See Elise Fong's report regarding child care needs in Cambridge.

III.FAMILIES NEEDING SUPPORT

▸Approximately 1000 families per month request emergency food assistance. Many of these families are the working poor and are already receiving supplemental food. The incidence of hunger in children is growing alarmingly: it is estimated that 1 in 5 Cambridge children suffer from hunger part of each month.

▸DSS reports (for Cambridge & Somerville combined) 371 ongoing cases of abuse or neglect; of these, 710 reports were substantiated.

▸In 1988, 23 children were treated for lead poisoning at Cambridge Hospital. Five babies were admitted for failure-to-thrive.

▸There were 55 births to teens (under 20), in 1988, or 5.3% of all births. Adolescent mothers and babies need many supports, especially if the mother wants to finish school.

▸The Preschool Unit gets an average of 12 new referrals per month. The Unit works with over 200 Cambridge families per year, in its Early Intervention and Project H.E.L.O. programs.

IV. LINGUISTIC & ETHNIC MINORITIES

▸See Chris Collins' report on demographic breakdown, new immigrants, etc.

▸There are 926 students in bilingual or ESL classes, from the following linguistic groups, in order of numbers:

Portuguese, Spanish, Haitian Creole,
Chinese, Indian, Vietnamese, Korean

▸The Teen Pregnancy Prevention Coalition reports (1988) that 71% of students in the Adolescent Parenting Program are of minority background.

V. ACCESS & UTILIZATION OF SERVICES

▸WIC has been shown to be one of the most effective programs for poor, at-risk babies, young children and mothers. Currently, the number of mothers & children served by WIC program is 2125, or about 48% of those eligible.

▸By age 2, children should have completed their immunizations; however, upon enrollment in early childhood programs, about 40% of Cambridge 3- and 4 year-olds' immunizations are found to be not up-to-date

▸Roughly 40% of those seen at the hospital and in the neighborhood clinics lack health insurance.

▸About 3646 individuals in Cambridge get food stamps, although it is estimated that 21% of the population is at or below 125% of the poverty level; thus about 18,523 would be eligible.

▸See Elise Fong's report for under-utilization of Headstart and other early childhood programs.

RECOMMENDATIONS

of the Health Care & Nutrition Study Committee

I. MOTHERS, INFANTS & TODDLERS

♦ Recognizing that the postpartum period is critical to healthy development, offer Home Visits to all Cambridge mothers and newborns, by trained health care workers, to teach parenting skills, nutrition, and child care. Provide more Extended Home Visits and social service supports to identified at-risk infants and mothers.

♦ Institute an efficient system for Tracking Births to all Cambridge mothers, whether they take place in or out of the Cambridge hospital system, so as to be able to identify at-risk mothers and babies, and provide regular check-ups, immunizations and pediatric services in a timely fashion. Make tracking of all births to Cambridge Teen Mothers a priority.

II. PRESCHOOL & SCHOOL-AGE CHILDREN

♦ Since many children and teens are partly or wholly responsible for making choices about their own health and eating habits, provide Health and Nutrition Education as part of the school curriculum.

♦ To enable children, during the hours after school and during vacation times, to be in safe, healthy and nurturing environments, with good adult supervision, improve the range of Afterschool and Vacation-time programs. Educate Parents to understand the value of enrolling their children in such activities. Offer Transportation to and from program sites. Provide appropriate programs--mainstreamed or specialized--for Children With Special Needs.

III. FAMILIES NEEDING SUPPORT

♦ Provide Outreach to identify, serve and keep contact with families with multiple risk factors. Offer Case Management to help coordinate families' utilization of medical and social services. In order to streamline access to services, develop a "one-stop" Point of Entry to all components of the system.

♦ Given that babies born to teen mothers face many risks to healthy development, Cut Teen Births in Cambridge by 50% and provide Comprehensive Services to teen mothers and their babies.

IV. LINGUISTIC & ETHNIC MINORITIES

♦ Recruit and train more Bilingual and Bicultural Workers at all levels, in all agencies that deal with parents and children. This will provide the essential link to services for immigrant families, for both prevention and treatment of health problems.

♦ Make health and nutrition Information Available in Culturally and Linguistically Appropriate forms. Translate and adapt materials, create teaching materials that will reach non English-speaking or non-literate parents. Disseminate information through all available means, including the media, bilingual education classes, religious and social organizations.

V. ACCESS & UTILIZATION OF EXISTING SERVICES

♦ Improve and support the Inter-education of Providers, so that workers having contact with children and families through different agencies can make appropriate referrals, know more about other services, be more helpful in guiding families to other resources. Improve utilization by providing a regularly updated, free Resource Directory.

♦ Eliminate Transportation Barriers by providing van service to enable parents to take children to medical appointments.

♦ Utilize All Points of Contact to reach children and link them with the health care system: at birth, day care entry, preschool enrollment.

VI. ADDITIONAL SERVICES NEEDED

♦ Provide Comprehensive Dental Services to all Cambridge children, including hygiene, check-ups, prevention and treatment. Educate Parents about the necessity for dental health care for their children.

♦ Improve Child Care availability and affordability, including care for infants and nursery for sick children. Advocate for Parental Leave from work to care for sick children and greater Flexibility in Daycare Schedules to accommodate the needs of working parents.

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Geraldine W.K Zetzel
June, 1989

Creating partnerships between local governments, schools

by Alice K. Wolf

It is often said that "children are our most precious natural resource" or "children are our future." However, much more work is needed to preserve that resource and invest in that future.

Communities and municipal governments, along with families, can work toward that goal by fostering partnerships with schools and school districts to support children.

There are several ingredients for developing such partnerships:

1. Focus on the existing conditions in the community that make it ripe for a partnership effort.
2. Look at how to utilize existing responsibilities and relationships.
3. Assess the formal governance structure that does or does not bind the local government and schools.
4. Develop the political leadership that puts children on the front burner.

Several existing conditions in many communities make them green pastures for coalescing local governments and schools around kids.

Local governments already have programs and responsibilities for some facet of children's lives—in the local recreation department, library, teen center, police department. Some communities run welfare, health, and child care programs. Children are part of the agenda of local governments already.

The high cost in community comfort and dollar terms of not acting has become clear. The kids hanging on the corner, the crime rate and drug use, and concerns about meeting industry's future employment needs and individual's take-home-pay needs are understood as serious community issues. We meet the needs now or pay much more later.

In an era of scarce resources, a major community investment—the school building—often lies empty many hours a week; it is a resource waiting to be used. Focusing services for children there makes enormous sense.

And programs like child care, after school care, and teen employment, are often local government activities. To be effective, it only makes sense that they coordinate with the education system around the child. It is at the child's peril that such coordination does not often happen now.

Utilizing existing relationships

Thus, there are conditions in place that we can utilize to build partnerships between local governments and schools. Even though the potential for developing these existing relationships and responsibilities into a dynamic partnership has been underutilized in many cities and towns, the seeds have been planted.

Take Seattle. Seattle has had a KidsPlace project for a number of years—a project in which a variety of programs for kids were developed through a public private partnership. Several years ago, a children's commission was established by the city to implement its children's policy.



Mayor Alice Wolf

This year, newly-elected Mayor Norman Rice has focused this interest in children on the schools. From his first day in office, he worked to plan an Education Summit. Bringing together city, school, and community people and energy, the Education Summit has had dramatic results. First, the Summit resulted in new field trip opportunities for students, management training for school personnel, comprehensive student health planning, and early childhood efforts funded by such diverse groups as the Transit Authority and the business community. These needs were identified during the Education Summit and a million additional dollars for students were made available immediately. In addition, the family support worker program, bringing human service programs for children into the schools, was put in place by the city, the schools, and the United Way.

Most recently the most dramatically, Seattle voters on November 6 approved a multi-million dollar ballot initiative to fund children's services—services such as early childhood programs, educational enrichment, and student health programs—from the property tax. This vote, coming at a time of taxpayer revolt in all parts of the country, shows the strength of a united front for children.

In Minneapolis, Mayor Don Fraser has been working on children's issues for several years. As he tells it, like many people, he used to think that the city should pave streets and run the fire and police departments.

Over time, Mayor Fraser came to realize that city government could and must do much more. He has given special attention to children. He developed a Youth Coordinating Board that includes the Mayor, representatives of the City Council and School Board, and representatives from all other levels of governments that impact children. This group has the clout and resources to coordinate activities around children. They all had responsibility for children before, but now the attention of these elected leaders is riveted on children, and these efforts are coordinated.

Many programs have spun off from this effort, including youth employment, a neighborhood-based service center (including a newborn baby home-visitor program), long-term planning for children's needs, and enhanced coordination between early childhood programs and schools. Interestingly, like Seattle, Minneapolis has just passed a referendum allocating many millions of dollars for children's programs like early childhood education and teacher training.

In Cambridge, Massachusetts, a number of partnership efforts have thrived. In dealing with drugs, teens' health, AIDS, and human services, there has been active city government and school collaboration. In each case, this involved bringing together people from existing city agencies and the schools to focus their attention on a specific, vital issue. Collaborative efforts with community members—businesses, universities, and citizens—have resulted in strong support in the schools, and, most recently, for youth employment.

In addition, for some time, I have been working with others to expand the commitment to the city's children. Soon I expect to present a proposal for a children's commission that will focus and expand the kind of collaborations I have described. We are also working on a concept for a school-based family center that will allow intense collaboration for the benefit of the child.

To be successful, these efforts will require the cooperation of the Mayor, the City Manager, the City Council, the School Committee, and the Superintendent of Schools, along with the broad community of citizens, institutions, nonprofits, and businesses.

Structure of government

In the context of who needs to be involved, the way government is generally structured does not make it easy to collaborate. While school governance and its relationship to the municipal government and other government entities varies from state to state, it is generally true that school boards are separate entities. There are no, or only tenuous, formal links with other facets of government. So, generally the links have to be created.

This isolation of schools runs counter to the idea that we are all responsible for children. Only people who have a direct concern—like parents and teachers—feel responsible. I saw this many times as a School Committee candidate when I tried to convince others to concern themselves with school board elections. We should remember also, and take advantage of, the fact that many elected officials get their start on school boards.

In Cambridge, the Mayor is elected by the City Council and chairs the Council. The Mayor also chairs and is a voting member of the School Committee. This provides a valuable link between the city government and the schools. The importance of this link has increased since 1980 when the schools in Massachusetts lost "fiscal autonomy." Previously, the School Committee passed its own budget, and the city had to appropriate the funds. Now, the bottom line of the school budget is determined by the city or town government.

In creating models for partnerships between local governments and schools, we need to assess the impact of the various types of formal structures and to consider ways in which formal links can be created.

Political leadership

From my specific examples, I believe you can see that, even with structural weaknesses, it is possible to create models for partnerships between local governments and schools. You can start almost anywhere, but you must start somewhere. It is vital to bring in the broad community as a player as well.

One key ingredient in the creation of successful partnerships is political leadership. That leadership can come from a variety of places. It should come from the elected leaders, but it can come as well from an active citizenry.

In the cities I have mentioned here, the leadership has come from the mayors. There is no doubt that the leadership of these mayors has been key to developing and enhancing the relationship between city governments and the schools in their cities.

If leadership from elected officials is lacking, however, I would not give up. Coming from a base of citizen participation, I believe that political leadership can arise from the community, and it must.

It is critical to the future of our communities that we focus on children and schools. We must provide the political leadership to take the relationships and opportunities we have and to create new models for effective partnerships between local governments and schools. □

Alice K. Wolf is the Mayor of Cambridge, Massachusetts and Vice-Chair of NLC's Task Force on Children and Education. This article is based on remarks she delivered at the National Civic League 96th National Conference on Governance, Baltimore, MD, November 17, 1990.

Track Workshops

Track workshops for this year's Congress of Cities were organized around eight issue areas which dominate current interest. Policy Leaders, Environment, Technology, Finance, Economic Development, Housing and Community Development, Public Safety, and Education, Health and Human Services are track headings, each with several workshops. Further, this year workshops have been arranged to eradicate scheduling conflicts between workshops in the same time slot. In this way, a delegate can follow specific tracks of interest all the way through.

Workshops designed to specifically address the issues of interest to small cities and focus on their unique needs are designated throughout the program by a circle with (sc) inside. Sessions on Balancing Public and Private Demands; Streamlining Council Meetings; Turning Around Downtowns; and Community Health Care are just a sampling of workshop titles that will appeal to elected officials from small communities.

Delegates will find, however, that almost all other workshops at the Congress of Cities are designed to appeal to officials from cities of all sizes.

OFFICE OF THE MAYOR

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Alice K. Wolf
Mayor

There is a wonderful African proverb: "It takes a village to raise a child." It is my experience that it also takes a village to develop strong policy. It is no accident, therefore, that this policy plan for children, youth, and families is the fruit of many people's labor.

In 1989, I convened an advisory group to develop a comprehensive policy for our city's children. This advisory group included service providers and parents, a family policy expert and a pediatrician, city employees and school department staff. What these diverse individuals had in common was a commitmment to Cambridge's families, and the willingness to contribute an enormous amount of work towards the realization of this policy. I am grateful for the efforts of all advisory group members. I would like especially to commend Geraldine Zetzel who contributed many hours of volunteer service to nurture the idea and coordinate several study groups; Olivia Golden who chaired the advisory group and moved us forward; and Gloria Palladino who contributed tremendously to virtually all endeavors.

The group talked with many people from across the city to get a clear picture of our children's needs. In creating this policy, we developed twelve long-range goals for our city's children. We researched and compiled a series of study reports on healthcare and nutrition, substance abuse, and mental health.

We didn't stop there. We sought the input of approximately 250 groups and individuals in reviewing the proposed policy plan and ordinance to create the Kids' Council. We sent it to parents and principals, service providers and business leaders, and a range of activists in the fields of healthcare, early childhood, social services, childcare, and education.

The policy plan and ordinance received the full support of the Cambridge School Committee. On April 1, 1991, the City Council voted unanimously to accept the Kids' Council Ordinance.

I am delighted to present this ordinance and the policy that supports it, and acknowledge everyone in our village who contributed to its birth.

Alice K. Wolf, Mayor

Children and Youth Advisory Group

Alice Wolf, Mayor
Olivia Golden, Chair

Steven Brion-Meisels
Lynn D'Ambrose
Marie Esposito
Deborah Lerme Goodman
Bridget Hanson
Patty Hnatiuk
Neal Michaels
Claire Murphy
Gloria Palladino
Sandra Spooner
Hap Tierney
Janie Ward
Rick Weissbourd
Geraldine Zetzel

Teresa Sommer, Kennedy School of Government
Policy Analysis Intern

City of Cambridge
Children, Youth and Family Policy Plan

I. BACKGROUND

This policy launches a ***comprehensive*** effort to respond to the needs of children, youth and families in Cambridge. For over a decade now Americans have been alerted, upbraided, and prodded to do something about the state of their children. Numerous reports and studies have documented the disproportionate negative impacts on poor children in general and children, youth and families of color in particular. One in five children now lives in a family with income below the federal poverty line. The number of these children who are unhealthy, malnourished, undereducated and who may be unemployable in the future is high and on the rise. The prospects of middle and upper class children, too, have been undercut during this time. High and climbing rates of divorce and mobility, widespread alcohol and other drug abuse --among many troubles--have left a wide range of children vulnerable, stranded, unprepared for adult life.

These problems are national problems demanding national solutions. But they are also problems of state and local governments, and of individual citizens. Over the last decade numerous cities have assumed responsibility for counteracting the problems besetting children. For example, Seattle has made children a high priority, focusing the efforts of city agencies on children and spurring a wide range of innovative programs for youth. Hartford has drawn together an impressive array of community interests and resources in driving down a high rate of infant mortality. Minneapolis has established a Youth Coordinating Board to enhance and promote the healthy, comprehensive development of children and youth through collaborative action. Cambridge, through a community meeting process, has established long-range goals for its children (See Attachment A).

What warrants such a policy now? The circumstances of Cambridge children are not as dire as those of children in many other cities. Cambridge has great strengths. More than 140 non-profit and public service organizations provide educational and human services to Cambridge residents. Fifty-two organizations devote all or part of their work to youth alone. For many years schools and community organizations in Cambridge have worked together closely and effectively, allowing students access to a wide array of resources.

Yet, as in other cities, large and growing numbers of Cambridge children are undermined by poverty, drugs, illiteracy, threats to health,

abuse and neglect. While Cambridge expanded economically over the last decade, the poverty rate among children continued to climb. By 1986, almost one in four children in the City were living in poverty, significantly above the national average. The Cambridge Food Pantry network estimates that one in five Cambridge children suffer from hunger part of each month, and approximately 1,800 families per month request emergency food assistance. Escalating and unaffordable housing costs continue to strain Cambridge families. According to a 1987 study conducted by Abt Associates, 36% of Cambridge renters pay more than 40% of income for housing. This percentage has likely increased since the study was released. Twenty-five percent of Cambridge teen mothers receive inadequate or no prenatal care--markedly higher than the state average of 10.9%. Cambridge School Department officials report a school drop out rate of 22%.

Mental health problems are reported to be afflicting children at increasingly younger ages, and the number of seriously dysfunctional families, mental health workers report, has seriously climbed. Child care has also become prohibitively expensive for many Cambridge families, forcing parents to choose between placing their children in unlicensed care or leaving their jobs.

Further, while Cambridge is rich in services, the service-delivery system does have some weaknesses:

* **Services often function independently of each other:** Clients can find themselves lost in a maze of valuable but disconnected programs.

* **Cambridge lacks adequate preventive services:** Like other cities, services tend to be crisis-oriented, responding to problems after they have become difficult, if not impossible, to reverse.

* **Residents lack access to services:** As community life becomes more impersonal, some residents simply lack information about existing services. Many are obstructed by language barriers or are denied access because of inadequate transportation.

* **There are only a few comprehensive efforts involving many sectors of the community:** A comprehensive effort should include local government, community leaders and organizations, school administrators and staff, health professionals, and parents.

In addition to mounting problems among children and these service limitations, children's services have fallen victim to downturns in the national and state economies. The result is that the system of services, which has taken decades to build, is chipped away, leaving children at greater risk than ever before. Children need and deserve a firm commitment of public support that does not fluctuate and erode according to economic times. This policy puts forth such a commitment for children and their families in Cambridge.

II. STRATEGY/APPROACH

This policy begins to address the above-mentioned problems and issues through several strategies and approaches:

Strategies

* **Prevention:**
  First and foremost, it is a prevention policy. It sets forth goals and creates a framework for greatly reducing the number of Cambridge children who will at some point develop serious difficulties. In keeping with its prevention focus, it seeks initially to direct resources and energies toward prenatal, newborn, and early childhood (age 0 - 8) years.

* **Coordination and improving access:**
  It suggests ideas for better coordinating and improving access to services. Recognizing the outstanding array of services in Cambridge, the Policy Plan seeks to harness the expertise and participation of all providers.

* **Building a framework:**
  It seeks to build an improved framework for responding to those children who already have pressing problems - children who now require services.

* **Increasing opportunities:**
  It is not focussed solely on children's problems, deficits and needs: rather, it seeks to generate activities that create opportunities for all children, that affirm children's strengths, that enhance the sense of safety and security of all children, and that give children real hope for the future.

* **Generate ideas:**
  It generates ideas for tending to the needs of all Cambridge children regardless of economic status and ethnic origin -

recognizing that problems like alcohol and other drug abuse, teen pregnancy, and family violence are not problems of any one segment of Cambridge alone -- and seeks to foster a climate and opportunities that allow all Cambridge children to thrive.

The starting point in pursuing these strategies is a careful focus on the needs of the child. The strategies need to begin with and to return again and again to the needs of children themselves. These strategies should also have as a starting point the assumption that parents should be supported and strengthened in their efforts--not blamed--for their children's difficulties. Services need to reinforce and empower the natural strengths and resiliencies of parents. Children do best in a family that is healthy and thriving.

In addition, efforts on behalf of children should capitalize on the many strengths of Cambridge. Cambridge is astonishingly diverse--its students originate in 64 countries and speak 46 languages--and children in Cambridge have unique opportunities to learn about and build bridges between their own cultures and others. These efforts should draw on the capacity of its activist community to respond to community needs. These efforts should also tap the resources of Cambridge's universities, draw on the wisdom of the many experts on children's services and child welfare in Cambridge and the surrounding area, as well as draw on the knowledge of experts around the country. Finally, those pursuing these efforts should look to exemplary efforts in other cities.

Approaches

In implementing this policy, the approach is to encourage services to children, youth, and families in Cambridge that are preventive rather than reactive; coordinated rather than fragmented; innovative rather than driven by existing service structures; comprehensive, oriented to the needs of children and families seen as whole people; supportive of families, their choices, and their strengths; and responsive to the needs of all families as well as to the different needs of different families.

***Services that are preventive rather than reactive:**

Much research evidence suggests that preventive services to young children are the most cost-effective way to encourage healthy development and avoid bad outcomes later in life. For example, excellent programs for early childhood education have been shown to increase school completion rates and reduce rates of teen pregnancy and delinquency in adolescence. According to the General Accounting Office (1990), every $1 spent on pre-natal care saves $4 to $6 in

costs for hospital care of undernourished infants, welfare, food stamps, and special-education programs for children born unhealthy.

Many excellent programs in Cambridge already build on this foundation of research evidence. For example, the city's Head Start, Early Intervention, and Visiting Nurse programs reach young, at-risk children with excellent services. However, many children who need these services never get them, or get them later than they should because of long waiting lists.

Therefore, the policy implementation must emphasize strengthening and expanding a preventive approach to children's services with the initial focus on prenatal, newborn and early childhood years.

***Services that are coordinated rather than fragmented:**

When a family in Cambridge needs help with (for example) getting health care for an ill child, locating suitable child care, and finding an apartment that will take children, the parents may feel as though they are trying to find their way through a bureaucratic maze. Different services are provided by different public or private agencies, located in different buildings, staffed by workers with different specialties or expertise, and available to families and children based on different and confusing eligibility requirements. Studies of effective programs for children and youth at-risk suggest, not surprisingly, that these bureaucratic barriers pose the biggest problems to those families who need services the most - and that the programs that work best have staff who are willing to go the extra step and help families get through the maze.

Again, many excellent programs in Cambridge have made a start at this kind of coordination despite the formidable barriers posed by funding sources and regulations from higher levels of government. For example, the WIC program has co-located offices with community health services so that a mother with young children can take her children to the pediatrician and receive her WIC nutrition coupons in the same place. The Bigelow Street Family Shelter has coordinated with the city's Community Learning Center to provide literacy and basic education to homeless mothers during their stay at the shelter facility.

This coordination will be a key component of this policy implementation, taking coordination as far as it can go, challenging providers to link programs so that they best serve the families who need them. One possible approach to coordination, at least for some

families, might be a neighborhood service center which offers access to the services a family might need in one place.

* **Services that are innovative rather than driven by existing service structures:**

The world surrounding families and children is changing, and programs to support them are changing with it. The number of single parents has increased dramatically. Among single female headed households and married couple families, many more mothers now work while their children are young, requiring that both businesses and service providers consider what it means to balance the roles of parent and provider. Some businesses have responded to these changes with innovations such as parental leave, child care vouchers, and provisions for ill child care; schools have had to learn how to encourage and stimulate parent involvement when a parent is unavailable for parent-teacher conferences or classroom activities during the traditional school day; Head Start programs, which have traditionally provided excellent preschool programs for part of the day, have started to consider full-day programs.

Under this policy, the City would encourage innovative responses to this and other changes in the circumstances of families and children, innovations that so far as possible respond to the whole life circumstances of the family. Innovative responses does not necessarily mean creating new services but can be accomplished by augmenting existing services.

* **Services that are comprehensive, oriented to the needs of children and families seen as whole people:**

One special category of innovation that holds particular promise for many children and families is innovation to serve children and families in comprehensive ways. These innovative programs work precisely because they do not artificially isolate a health problem from an educational problem or isolate the mother or father's need from the child's need. Examples of such innovative programs include:

***PACE** (Parent and Child Education): Started in Kentucky, it is a program that combines an adult education program for mothers without a high school diploma with an excellent preschool program for the children. The program has been widely replicated; much of its appeal is the effect on the whole family when two members become excited and involved in education.

***Family Support Programs:** Based in neighborhood drop-in centers offer families a chance to pick and choose the services they would like - from parent support groups to play groups to counseling to drop-in child care - and to link up to a comprehensive range of services through referral. Several states are experimenting with such programs as an approach to supporting children and families comprehensively but not intrusively.

* **Services that are supportive of families, their choices and their strengths:**

Bringing up children today is hard for all families. Families in Cambridge struggle with how to keep a job and care for a sick child; how to find child care that is reliable and high quality; how to strengthen a child's ability to make responsible decisions about drugs; how to encourage a child to believe he or she can succeed in school; and in general how to bring children up to be healthy, responsible, and productive adults in a world that too often seems not to listen to parents or to children.

Under this policy, the City will recognize diversity and encourage programs that support the many different choices that families make about how to bring up happy and healthy children and that recognize the strengths of families as well as the burdens on them. For example, a parent caring for an emotionally disturbed child at home will need respite care to support them in their choice to be a primary caretaker. Other parents may seek out of home placement for their child and will need assistance in selecting the best option for their family.

* **Services that are responsive to the needs of all families, as well as to the different needs of different families:**

Under this policy, the City will encourage programs that respond to needs that <u>all</u> families experience - needs like open space for children to play in, affordable and high quality child care, and help talking to children about how to make responsible decisions about drugs and other issues. In assessing budget priorities, those that meet children's needs will be given high priority.

At the same time, the City will pay special attention in committing resources to the needs of those families who are bringing up children with the least support, social and economic, and

who are therefore most vulnerable and at risk. For example, the policy will encourage programs that reach out to families who are members of diverse racial, linguistic and ethnic communities; to low-income families; and to young mothers and their children. For example, one program recommended by a citizen study group would provide home visits through the Visiting Nurse Association to all teen mothers with infants in Cambridge.

III. IMPLEMENTATION

In order to implement and support the strategies and approaches identified in this policy plan, the City of Cambridge will create a Council called the "Coordinating Council for Children, Youth and Families (The Kids' Council)," charged with directing a comprehensive, local response to the needs of children, youth, their families and other caregivers.

Some of the specific duties of the Council will include: recommending children, youth and family policy to the City Manager, City Council, School Committee, and other appropriate committees; mobilizing and coordinating resources available to Council members and organizations they may represent to develop joint projects; reviewing and making recommendations regarding City expenditures affecting children, youth and families; enlisting the cooperation of a broad array of individuals and organizations to further the intent and purposes of the Council; mobilizing and coordinating other efforts in the City targeted at children, youth and families; conducting fundraising campaigns to support the priorities and projects of the Council; and creating opportunities for youth to provide input on issues affecting them.

It is proposed that the Council consist of twenty members including the Mayor, a member of the City Council, a member of the School Committee, the City Manager, the Superintendent of Schools, the Assistant City Manager for Human Services, the Commissioner of Health and Hospitals, a member of the philanthropic community, a representative from a State agency serving children, youth and families, one representative each from the corporate/business community and the university community, and a representative from the early childhood community. In addition, five members living in the City shall represent the community-at-large and/or active parents groups or other groups involved with children and their families. Three members with backgrounds in current Council priorities will serve shorter terms. The Council will have an Executive Committee comprised of a subset of the Council and including the Chairperson to enact the business of the full Council between meetings. The Council will oversee the efforts of an Executive Director.

The Council will have a Committee structure comprised of a mix of Council members and representatives from the community-at-large. Parents shall be represented on all Committees. The Chair or Co-Chair of each Committee shall be a Council member. Initially there will be a Public Policy Committee, a Program Committee, a Development Committee, and a Research and Evaluation Committee.

The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as different neighborhoods and will include in its membership, individuals with children who are consumers of services.

ATTACHMENT A.

THE CITY'S LONG-RANGE GOALS FOR ITS CHILDREN

It shall be the policy of the City of Cambridge to take a leading proactive role to enable Cambridge children to grow up to be well-functioning, healthy, productive, educated adults. The City shall develop a comprehensive response to the needs of children working towards the following long-term goals or rights of children that form a comprehensive framework:

PRENATAL AND NEWBORN CARE: All pregnant women in Cambridge should receive early, continuous and high-quality prenatal and newborn care.

HEALTH CARE AND NUTRITION: All children in Cambridge should have the benefits of good nutrition, ongoing preventive health care and treatment.

CHILDCARE: All families who need childcare should have access to quality, affordable care.

EARLY CHILDHOOD EDUCATION: All families with preschool age children should have access to quality early childhood education programs.

EDUCATION K-12: Every Cambridge child should have equal access to quality education from kindergarten through high school.

RECREATION AND ENRICHMENT: All children should be offered recreation and enrichment programming that fosters positive self-esteem, skill building, creativity, and develops good habits in current and future use of leisure time.

SUBSTANCE ABUSE: All children and youth in Cambridge have the right to an environment that promotes responsible decision making and supports them in their decision not to use or abuse alcohol and other drugs.

SEXUALITY: All children in Cambridge should have the knowledge and resources to make healthy decisions and responsible choices about his or her sexual behavior.

CAREER DEVELOPMENT/EMPLOYABILITY: All children and youth in Cambridge should receive the resources they need to make the transition from school to work and to achieve economic security.

MENTAL HEALTH: All children and their parents should have the benefits of timely and appropriate mental health care.

SAFETY/VIOLENCE: All children should have the right to grow up in safety, protected from violence, abuse or neglect.

BASIC NEEDS: All families in Cambridge should have access to a decent standard of living which includes an adequate income, affordable housing, and personal safety.

Chapter 2.84

COORDINATING COUNCIL FOR CHILDREN, YOUTH AND FAMILIES (THE KIDS' COUNCIL)

Established

There shall be established in Cambridge a Coordinating Council for Children, Youth and Families (The Kids' Council).

Function and Purpose

The Council will direct a comprehensive, local response to the needs of children, their families, and other caregivers, according to the guiding principles put forth in the Children, Youth and Family Policy Plan. These guiding principles are:

* To promote services and other activities that are preventive rather than reactive.
* To promote services and other activities that are coordinated rather than fragmented, and that result in improved accessibility.
* To encourage innovative responses to needs.
* To generate activities that create opportunities for all children, their families, and other caregivers.
* To support families, their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.
* To promote services and other activities that are comprehensive, oriented to the needs of children and families seen as whole people.

Membership-Appointment-Term

A. Council Members shall be comprised of the following offices, disciplines and interests:

* The Mayor
* A member of the City Council
* A member of the School Committee
* The City Manager
* The Superintendent of Schools
* The Assistant City Manager for Human Services
* The Commissioner of Health & Hospitals
* A member of the philanthropic community
* A representative from a State agency serving children, youth and families
* A representative of the corporate/business community
* A representative of the university community
* A representative from the early childhood community
* Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.
* Three members shall be identified to serve one year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

B. The Council shall have an Executive Committee comprised of a subset of the Council and including the Chair to enact the business of the full Council between Council meetings.

C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee Members shall be appointed by the City Manager with advice and recommendations from the Mayor. All other members shall be appointed by the City Manager with advice and recommendations from the Council. The Council shall consult with groups involved with children and shall advertise widely to obtain names of qualified candidates.

E. Selected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Member shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

Membership-Qualifications

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

Officers-Quorum-Adoption of rules and regulations-Committees

A. The Council shall meet as often as necessary to conduct its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chairperson from among Council Members.

C. Eleven members shall constitute a quorum for the purpose of conducting the business of the Council and all decisions shall be by majority vote of the Council Members present and voting.

D. The Council may adopt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws. (Ord. 1016(part), 1984: prior code Ch. 25 3(C).

H. The Council shall develop a committee structure. To broaden participation from the community, members of these committees will be a mix of Council Members and the community-at-large. Parents shall be represented on all committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified candidates. The committees will include:

* A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

* A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

* A Development Committee to assist the Council's grant writing and fundraising operations.

* A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that coincides with Council priorities will be formed to guide the Council.

Executive Director-Appointment

A. There shall be an Executive Director of the Council who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which he or she will receive administrative support.

Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Manager, City Council, School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

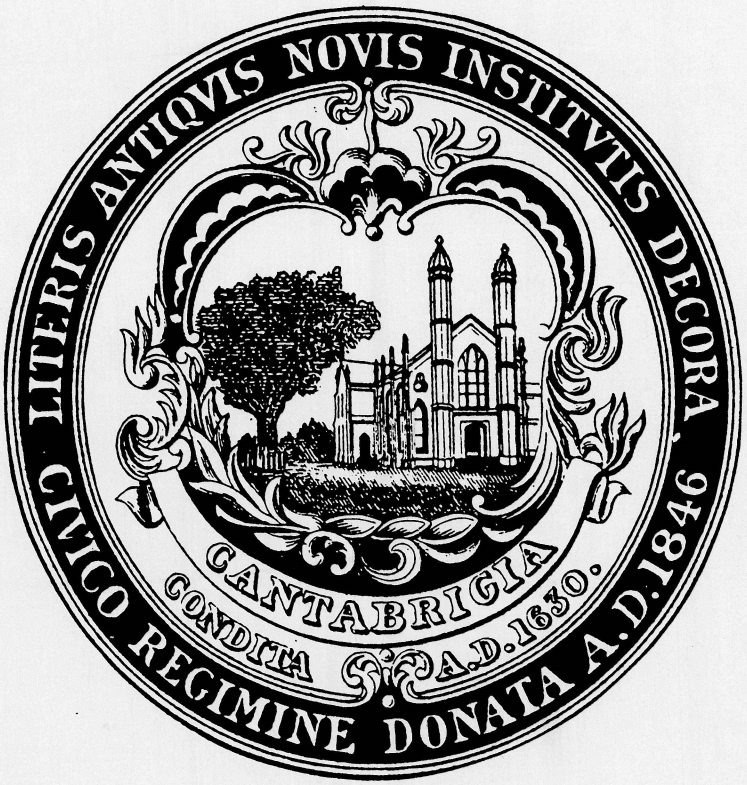
F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other groups and organizations to further the intent and purposes of this chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

CAMBRIDGE
POLICY AND ORDINANCE
FOR CHILDREN, YOUTH & FAMILIES



April 1, 1991

Mayor Alice K. Wolf
Vice Mayor Kenneth Reeves
Councillor Ed Cyr
Councillor Francis Duehay
Councillor Jonathan Myers
Councillor Sheila Russell
Councillor Walter Sullivan
Councillor Timothy Toomey
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Alice K. Wolf
Mayor

There is a wonderful African proverb: "It takes a village to raise a child." It is my experience that it also takes a village to develop strong policy. It is no accident, therefore, that this policy plan for children, youth, and families is the fruit of many people's labor.

In 1989, I convened an advisory group to develop a comprehensive policy for our city's children. This advisory group included service providers and parents, a family policy expert and a pediatrician, city employees and school department staff. What these diverse individuals had in common was a commitmment to Cambridge's families, and the willingness to contribute an enormous amount of work towards the realization of this policy. I am grateful for the efforts of all advisory group members. I would like especially to commend Geraldine Zetzel who contributed many hours of volunteer service to nurture the idea and coordinate several study groups; Olivia Golden who chaired the advisory group and moved us forward; and Gloria Palladino who contributed tremendously to virtually all endeavors.

The group talked with many people from across the city to get a clear picture of our children's needs. In creating this policy, we developed twelve long-range goals for our city's children. We researched and compiled a series of study reports on healthcare and nutrition, substance abuse, and mental health.

We didn't stop there. We sought the input of approximately 250 groups and individuals in reviewing the proposed policy plan and ordinance to create the Kids' Council. We sent it to parents and principals, service providers and business leaders, and a range of activists in the fields of healthcare, early childhood, social services, childcare, and education.

The policy plan and ordinance received the full support of the Cambridge School Committee. On April 1, 1991, the City Council voted unanimously to accept the Kids' Council Ordinance.

I am delighted to present this ordinance and the policy that supports it, and acknowledge everyone in our village who contributed to its birth.

Alice K. Wolf, Mayor

Children and Youth Advisory Group

Alice Wolf, Mayor
Olivia Golden, Chair

Steven Brion-Meisels
Lynn D'Ambrose
Marie Esposito
Deborah Lerme Goodman
Bridget Hanson
Patty Hnatiuk
Neal Michaels
Claire Murphy
Gloria Palladino
Sandra Spooner
Hap Tierney
Janie Ward
Rick Weissbourd
Geraldine Zetzel

Teresa Sommer, Kennedy School of Government
Policy Analysis Intern

City of Cambridge
Children, Youth and Family Policy Plan

I. BACKGROUND

This policy launches a ***comprehensive*** effort to respond to the needs of children, youth and families in Cambridge. For over a decade now Americans have been alerted, upbraided, and prodded to do something about the state of their children. Numerous reports and studies have documented the disproportionate negative impacts on poor children in general and children, youth and families of color in particular. One in five children now lives in a family with income below the federal poverty line. The number of these children who are unhealthy, malnourished, undereducated and who may be unemployable in the future is high and on the rise. The prospects of middle and upper class children, too, have been undercut during this time. High and climbing rates of divorce and mobility, widespread alcohol and other drug abuse --among many troubles--have left a wide range of children vulnerable, stranded, unprepared for adult life.

These problems are national problems demanding national solutions. But they are also problems of state and local governments, and of individual citizens. Over the last decade numerous cities have assumed responsibility for counteracting the problems besetting children. For example, Seattle has made children a high priority, focusing the efforts of city agencies on children and spurring a wide range of innovative programs for youth. Hartford has drawn together an impressive array of community interests and resources in driving down a high rate of infant mortality. Minneapolis has established a Youth Coordinating Board to enhance and promote the healthy, comprehensive development of children and youth through collaborative action. Cambridge, through a community meeting process, has established long-range goals for its children (See Attachment A).

What warrants such a policy now? The circumstances of Cambridge children are not as dire as those of children in many other cities. Cambridge has great strengths. More than 140 non-profit and public service organizations provide educational and human services to Cambridge residents. Fifty-two organizations devote all or part of their work to youth alone. For many years schools and community organizations in Cambridge have worked together closely and effectively, allowing students access to a wide array of resources.

Yet, as in other cities, large and growing numbers of Cambridge children are undermined by poverty, drugs, illiteracy, threats to health,

abuse and neglect. While Cambridge expanded economically over the last decade, the poverty rate among children continued to climb. By 1986, almost one in four children in the City were living in poverty, significantly above the national average. The Cambridge Food Pantry network estimates that one in five Cambridge children suffer from hunger part of each month, and approximately 1,800 families per month request emergency food assistance. Escalating and unaffordable housing costs continue to strain Cambridge families. According to a 1987 study conducted by Abt Associates, 36% of Cambridge renters pay more than 40% of income for housing. This percentage has likely increased since the study was released. Twenty-five percent of Cambridge teen mothers receive inadequate or no prenatal care--markedly higher than the state average of 10.9%. Cambridge School Department officials report a school drop out rate of 22%.

Mental health problems are reported to be afflicting children at increasingly younger ages, and the number of seriously dysfunctional families, mental health workers report, has seriously climbed. Child care has also become prohibitively expensive for many Cambridge families, forcing parents to choose between placing their children in unlicensed care or leaving their jobs.

Further, while Cambridge is rich in services, the service-delivery system does have some weaknesses:

* **Services often function independently of each other:** Clients can find themselves lost in a maze of valuable but disconnected programs.

* **Cambridge lacks adequate preventive services:** Like other cities, services tend to be crisis-oriented, responding to problems after they have become difficult, if not impossible, to reverse.

* **Residents lack access to services:** As community life becomes more impersonal, some residents simply lack information about existing services. Many are obstructed by language barriers or are denied access because of inadequate transportation.

* **There are only a few comprehensive efforts involving many sectors of the community:** A comprehensive effort should include local government, community leaders and organizations, school administrators and staff, health professionals, and parents.

In addition to mounting problems among children and these service limitations, children's services have fallen victim to downturns in the national and state economies. The result is that the system of services, which has taken decades to build, is chipped away, leaving children at greater risk than ever before. Children need and deserve a firm commitment of public support that does not fluctuate and erode according to economic times. This policy puts forth such a commitment for children and their families in Cambridge.

II. STRATEGY/APPROACH

This policy begins to address the above-mentioned problems and issues through several strategies and approaches:

Strategies

* **Prevention:**
  First and foremost, it is a prevention policy. It sets forth goals and creates a framework for greatly reducing the number of Cambridge children who will at some point develop serious difficulties. In keeping with its prevention focus, it seeks initially to direct resources and energies toward prenatal, newborn, and early childhood (age 0 - 8) years.

* **Coordination and improving access:**
  It suggests ideas for better coordinating and improving access to services. Recognizing the outstanding array of services in Cambridge, the Policy Plan seeks to harness the expertise and participation of all providers.

* **Building a framework:**
  It seeks to build an improved framework for responding to those children who already have pressing problems - children who now require services.

* **Increasing opportunities:**
  It is not focussed solely on children's problems, deficits and needs: rather, it seeks to generate activities that create opportunities for all children, that affirm children's strengths, that enhance the sense of safety and security of all children, and that give children real hope for the future.

* **Generate ideas:**
  It generates ideas for tending to the needs of all Cambridge children regardless of economic status and ethnic origin -

recognizing that problems like alcohol and other drug abuse, teen pregnancy, and family violence are not problems of any one segment of Cambridge alone -- and seeks to foster a climate and opportunities that allow all Cambridge children to thrive.

The starting point in pursuing these strategies is a careful focus on the needs of the child. The strategies need to begin with and to return again and again to the needs of children themselves. These strategies should also have as a starting point the assumption that parents should be supported and strengthened in their efforts--not blamed--for their children's difficulties. Services need to reinforce and empower the natural strengths and resiliencies of parents. Children do best in a family that is healthy and thriving.

In addition, efforts on behalf of children should capitalize on the many strengths of Cambridge. Cambridge is astonishingly diverse--its students originate in 64 countries and speak 46 languages--and children in Cambridge have unique opportunities to learn about and build bridges between their own cultures and others. These efforts should draw on the capacity of its activist community to respond to community needs. These efforts should also tap the resources of Cambridge's universities, draw on the wisdom of the many experts on children's services and child welfare in Cambridge and the surrounding area, as well as draw on the knowledge of experts around the country. Finally, those pursuing these efforts should look to exemplary efforts in other cities.

Approaches

In implementing this policy, the approach is to encourage services to children, youth, and families in Cambridge that are preventive rather than reactive; coordinated rather than fragmented; innovative rather than driven by existing service structures; comprehensive, oriented to the needs of children and families seen as whole people; supportive of families, their choices, and their strengths; and responsive to the needs of all families as well as to the different needs of different families.

***Services that are preventive rather than reactive:**

Much research evidence suggests that preventive services to young children are the most cost-effective way to encourage healthy development and avoid bad outcomes later in life. For example, excellent programs for early childhood education have been shown to increase school completion rates and reduce rates of teen pregnancy and delinquency in adolescence. According to the General Accounting Office (1990), every $1 spent on pre-natal care saves $4 to $6 in

costs for hospital care of undernourished infants, welfare, food stamps, and special-education programs for children born unhealthy.

Many excellent programs in Cambridge already build on this foundation of research evidence. For example, the city's Head Start, Early Intervention, and Visiting Nurse programs reach young, at-risk children with excellent services. However, many children who need these services never get them, or get them later than they should because of long waiting lists.

Therefore, the policy implementation must emphasize strengthening and expanding a preventive approach to children's services with the initial focus on prenatal, newborn and early childhood years.

***Services that are coordinated rather than fragmented:**

When a family in Cambridge needs help with (for example) getting health care for an ill child, locating suitable child care, and finding an apartment that will take children, the parents may feel as though they are trying to find their way through a bureaucratic maze. Different services are provided by different public or private agencies, located in different buildings, staffed by workers with different specialties or expertise, and available to families and children based on different and confusing eligibility requirements. Studies of effective programs for children and youth at-risk suggest, not surprisingly, that these bureaucratic barriers pose the biggest problems to those families who need services the most - and that the programs that work best have staff who are willing to go the extra step and help families get through the maze.

Again, many excellent programs in Cambridge have made a start at this kind of coordination despite the formidable barriers posed by funding sources and regulations from higher levels of government. For example, the WIC program has co-located offices with community health services so that a mother with young children can take her children to the pediatrician and receive her WIC nutrition coupons in the same place. The Bigelow Street Family Shelter has coordinated with the city's Community Learning Center to provide literacy and basic education to homeless mothers during their stay at the shelter facility.

This coordination will be a key component of this policy implementation, taking coordination as far as it can go, challenging providers to link programs so that they best serve the families who need them. One possible approach to coordination, at least for some

families, might be a neighborhood service center which offers access to the services a family might need in one place.

* **Services that are innovative rather than driven by existing service structures:**

The world surrounding families and children is changing, and programs to support them are changing with it. The number of single parents has increased dramatically. Among single female headed households and married couple families, many more mothers now work while their children are young, requiring that both businesses and service providers consider what it means to balance the roles of parent and provider. Some businesses have responded to these changes with innovations such as parental leave, child care vouchers, and provisions for ill child care; schools have had to learn how to encourage and stimulate parent involvement when a parent is unavailable for parent-teacher conferences or classroom activities during the traditional school day; Head Start programs, which have traditionally provided excellent preschool programs for part of the day, have started to consider full-day programs.

Under this policy, the City would encourage innovative responses to this and other changes in the circumstances of families and children, innovations that so far as possible respond to the whole life circumstances of the family. Innovative responses does not necessarily mean creating new services but can be accomplished by augmenting existing services.

* **Services that are comprehensive, oriented to the needs of children and families seen as whole people:**

One special category of innovation that holds particular promise for many children and families is innovation to serve children and families in comprehensive ways. These innovative programs work precisely because they do not artificially isolate a health problem from an educational problem or isolate the mother or father's need from the child's need. Examples of such innovative programs include:

*__PACE__ (Parent and Child Education): Started in Kentucky, it is a program that combines an adult education program for mothers without a high school diploma with an excellent preschool program for the children. The program has been widely replicated; much of its appeal is the effect on the whole family when two members become excited and involved in education.

*Family Support Programs: Based in neighborhood drop-in centers offer families a chance to pick and choose the services they would like - from parent support groups to play groups to counseling to drop-in child care - and to link up to a comprehensive range of services through referral. Several states are experimenting with such programs as an approach to supporting children and families comprehensively but not intrusively.

* **Services that are supportive of families, their choices and their strengths:**

Bringing up children today is hard for all families. Families in Cambridge struggle with how to keep a job and care for a sick child; how to find child care that is reliable and high quality; how to strengthen a child's ability to make responsible decisions about drugs; how to encourage a child to believe he or she can succeed in school; and in general how to bring children up to be healthy, responsible, and productive adults in a world that too often seems not to listen to parents or to children.

Under this policy, the City will recognize diversity and encourage programs that support the many different choices that families make about how to bring up happy and healthy children and that recognize the strengths of families as well as the burdens on them. For example, a parent caring for an emotionally disturbed child at home will need respite care to support them in their choice to be a primary caretaker. Other parents may seek out of home placement for their child and will need assistance in selecting the best option for their family.

* **Services that are responsive to the needs of all families, as well as to the different needs of different families:**

Under this policy, the City will encourage programs that respond to needs that <u>all</u> families experience - needs like open space for children to play in, affordable and high quality child care, and help talking to children about how to make responsible decisions about drugs and other issues. In assessing budget priorities, those that meet children's needs will be given high priority.

At the same time, the City will pay special attention in committing resources to the needs of those families who are bringing up children with the least support, social and economic, and

who are therefore most vulnerable and at risk. For example, the policy will encourage programs that reach out to families who are members of diverse racial, linguistic and ethnic communities; to low-income families; and to young mothers and their children. For example, one program recommended by a citizen study group would provide home visits through the Visiting Nurse Association to all teen mothers with infants in Cambridge.

III. IMPLEMENTATION

In order to implement and support the strategies and approaches identified in this policy plan, the City of Cambridge will create a Council called the "Coordinating Council for Children, Youth and Families (The Kids' Council)," charged with directing a comprehensive, local response to the needs of children, youth, their families and other caregivers.

Some of the specific duties of the Council will include: recommending children, youth and family policy to the City Manager, City Council, School Committee, and other appropriate committees; mobilizing and coordinating resources available to Council members and organizations they may represent to develop joint projects; reviewing and making recommendations regarding City expenditures affecting children, youth and families; enlisting the cooperation of a broad array of individuals and organizations to further the intent and purposes of the Council; mobilizing and coordinating other efforts in the City targeted at children, youth and families; conducting fundraising campaigns to support the priorities and projects of the Council; and creating opportunities for youth to provide input on issues affecting them.

It is proposed that the Council consist of twenty members including the Mayor, a member of the City Council, a member of the School Committee, the City Manager, the Superintendent of Schools, the Assistant City Manager for Human Services, the Commissioner of Health and Hospitals, a member of the philanthropic community, a representative from a State agency serving children, youth and families, one representative each from the corporate/business community and the university community, and a representative from the early childhood community. In addition, five members living in the City shall represent the community-at-large and/or active parents groups or other groups involved with children and their families. Three members with backgrounds in current Council priorities will serve shorter terms. The Council will have an Executive Committee comprised of a subset of the Council and including the Chairperson to enact the business of the full Council between meetings. The Council will oversee the efforts of an Executive Director.

The Council will have a Committee structure comprised of a mix of Council members and representatives from the community-at-large. Parents shall be represented on all Committees. The Chair or Co-Chair of each Committee shall be a Council member. Initially there will be a Public Policy Committee, a Program Committee, a Development Committee, and a Research and Evaluation Committee.

The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as different neighborhoods and will include in its membership, individuals with children who are consumers of services.

ATTACHMENT A.

THE CITY'S LONG-RANGE GOALS FOR ITS CHILDREN

It shall be the policy of the City of Cambridge to take a leading proactive role to enable Cambridge children to grow up to be well-functioning, healthy, productive, educated adults. The City shall develop a comprehensive response to the needs of children working towards the following long-term goals or rights of children that form a comprehensive framework:

PRENATAL AND NEWBORN CARE: All pregnant women in Cambridge should receive early, continuous and high-quality prenatal and newborn care.

HEALTH CARE AND NUTRITION: All children in Cambridge should have the benefits of good nutrition, ongoing preventive health care and treatment.

CHILDCARE: All families who need childcare should have access to quality, affordable care.

EARLY CHILDHOOD EDUCATION: All families with preschool age children should have access to quality early childhood education programs.

EDUCATION K-12: Every Cambridge child should have equal access to quality education from kindergarten through high school.

RECREATION AND ENRICHMENT: All children should be offered recreation and enrichment programming that fosters positive self-esteem, skill building, creativity, and develops good habits in current and future use of leisure time.

SUBSTANCE ABUSE: All children and youth in Cambridge have the right to an environment that promotes responsible decision making and supports them in their decision not to use or abuse alcohol and other drugs.

SEXUALITY: All children in Cambridge should have the knowledge and resources to make healthy decisions and responsible choices about his or her sexual behavior.

CAREER DEVELOPMENT/EMPLOYABILITY: All children and youth in Cambridge should receive the resources they need to make the transition from school to work and to achieve economic security.

MENTAL HEALTH: All children and their parents should have the benefits of timely and appropriate mental health care.

SAFETY/VIOLENCE: All children should have the right to grow up in safety, protected from violence, abuse or neglect.

BASIC NEEDS: All families in Cambridge should have access to a decent standard of living which includes an adequate income, affordable housing, and personal safety.

Chapter 2.84

COORDINATING COUNCIL FOR CHILDREN, YOUTH AND FAMILIES (THE KIDS' COUNCIL)

Established

There shall be established in Cambridge a Coordinating Council for Children, Youth and Families (The Kids' Council).

Function and Purpose

The Council will direct a comprehensive, local response to the needs of children, their families, and other caregivers, according to the guiding principles put forth in the Children, Youth and Family Policy Plan. These guiding principles are:

* To promote services and other activities that are preventive rather than reactive.
* To promote services and other activities that are coordinated rather than fragmented, and that result in improved accessibility.
* To encourage innovative responses to needs.
* To generate activities that create opportunities for all children, their families, and other caregivers.
* To support families, their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.
* To promote services and other activities that are comprehensive, oriented to the needs of children and families seen as whole people.

Membership-Appointment-Term

A. Council Members shall be comprised of the following offices, disciplines and interests:

* The Mayor
* A member of the City Council
* A member of the School Committee
* The City Manager
* The Superintendent of Schools
* The Assistant City Manager for Human Services
* The Commissioner of Health & Hospitals
* A member of the philanthropic community
* A representative from a State agency serving children, youth and families
* A representative of the corporate/business community
* A representative of the university community
* A representative from the early childhood community
* Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.
* Three members shall be identified to serve one year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

B. The Council shall have an Executive Committee comprised of a subset of the Council and including the Chair to enact the business of the full Council between Council meetings.

C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee Members shall be appointed by the City Manager with advice and recommendations from the Mayor. All other members shall be appointed by the City Manager with advice and recommendations from the Council. The Council shall consult with groups involved with children and shall advertise widely to obtain names of qualified candidates.

E. Selected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Member shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

Membership-Qualifications

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

Officers-Quorum-Adoption of rules and regulations-Committees

A. The Council shall meet as often as necessary to conduct its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chairperson from among Council Members.

C. Eleven members shall constitute a quorum for the purpose of conducting the business of the Council and all decisions shall be by majority vote of the Council Members present and voting.

D. The Council may adopt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws. (Ord. 1016(part), 1984: prior code Ch. 25 3(C).

H. The Council shall develop a committee structure. To broaden participation from the community, members of these committees will be a mix of Council Members and the community-at-large. Parents shall be represented on all committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified candidates. The committees will include:

* A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

* A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

* A Development Committee to assist the Council's grant writing and fundraising operations.

* A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that coincides with Council priorities will be formed to guide the Council.

Executive Director-Appointment

A. There shall be an Executive Director of the Council who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which he or she will receive administrative support.

Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Manager, City Council, School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other groups and organizations to further the intent and purposes of this chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

The Committee on Ordinances conducted a public hearing on Wednesday February 27, 1991 in the Sullivan Chamber,City Hall beginning at 5:43 P.M. The purpose of the hearing was to receive public testimony relative to a proposed amendment to the Municipal Code to establish a Coordinating Council for Children, Youth and Families. Members present were: Councillor Francis H. Duehay, Councillor Ed Cyr, Councillor Jonathan Myers, Councillor Walter Sullivan, Mayor Alice Wolf, Vice Mayor Kenneth Reeves, Councillor William Walsh and City Clerk Joseph Connarton.

Councillor Duehay, Chair of the Committee, opened the hearing by outlining the procedure relative to taking testimony, stating that proponents will be heard first and that those individuals speaking in opposition will be heard second.

Mayor Wolf stated that the document before the committee will need to be slightly amended in order to renumber the sections of the text. Furthermore, reading from a prepared text she outlined the purpose of the proposed amendment stating this was not an attempt to duplicate services currently being offered, but rather it was an effort to better utilize the wide range of expertise in this city and to consolidate the delivery service. The Mayor further stated that the Coordinating Council would direct a comprehensive response to the needs of children, their families and other caregivers. Finally, the Mayor thanked the many individuals who worked so hard with her in preparing this amendment.

The Committee then heard from Olivia Golden, 45 Locke Street, Cambridge, who stated she had been a member of the committee which had put this document together and that she strongly supports its passage. She stated that Cambridge is rich in services and the way it responds to its people in need, but that right now many people with families are experiencing difficulty. Furthermore, she stated that twenty five percent of these families are under a great deal of stress because of the economy. She stated that the need exists to pull together the entire community to address this issue. She congratulated the Mayor and City Council for its vision in dealing with this need.

The Committee then heard from Dr. David Link, Chief of Pediatrics at the Cambridge Hospital, who stated that this proposal needs the strongest possible support by the city and its leaders. He indicated that should this be adopted it will provide an outstanding opportunity to deliver the most comprehensive level of service to children and their families that has ever been available.

Vice Mayor Reeves congratulated Mayor Wolf on the fantastic job she had done on the proposal and stated it had his full support. Furthermore, he stated that he knew of many cases where children were literally crying out for some kind of help and assistance and that some times the call goes unheard. Finally, he stated that he was glad that in times such as these the city has the vision to go forward with this proposal.

Councillor Myers stated that eleven years ago he came to Cambridge in part because of the number of opportunites to deal with troubled children and subsequently obtained a position with the Cambridge Housing Authority. He congratulated the Mayor for her work on this issue.

Mayor Wolf stated that she believes that this proposal makes a lot of economic sense in terms of being proactive to issues surrounding troubled youth rather than being in a situation where money is spent on services and programs addressing existing problems.

The Mayor moved to substitute the proposed amendment dated February 27, 1991 for the original document as submitted by City Council order dated February 4, 1991 and moved to add the words also known as **"Kids Council"** in the entitlement.

The motion carried.

Councillor Cyr moved that the proposed amendment as amended be referred to the full City Council without recommendation.

The motion carried.

The hearing was adjourned at 7:22 P. M.

For the Committee,

Councillor Francis H. Duehay
Chair

COMMITTEE REPORT

Committee on Ordinances for a hearing held on Wednesday, February 27, 1991 relative to a proposed amendment to the Municipal Code to establish a Coordinating Council for Children, Youth and Families.

In City Council,

March 18, 1991.

3/18/91 Passed to a second reading as amended.

Committee on Ordinances

Present Councillor Francis H Duehay 2/27/91

5:43 P.M.

1. C. Cyr
2. C. Myers
3. Mayor
4. C. Sullivan 5:50 P.M.
5. V. Mayor Reeves 5:57 P.M.
6. C. Walsh 6:05 P.M.

C. Duehay — Outlined procedure for testimony

Mayor — Ord. will need to be amended i.e. number.

Read prepared statement.

Reviewed text in brief
Outlined work of individuals working to draft this (advisory committee)

Olivia Palladino

Olivia Goldan
45 Forbes St.

Supports proposal
Cambridge rich in services,
but many families experiencing
difficulty - 25% are poor
families under much stress
due to economy, need to
work etc.

Need to pull together entire
community to address this
issue. Show support and
care for children and the
family.

Dr. David Link m.d
Camb. Hosp.

Your plan needs the
strongest possible support

This will present ~~a~~ the opportunity
to provide a comprehensive
level of service

V. Mayor

Congratulated Mayor on her fine work w/ this proposal

Outlined anecdote on need for support group for children
- drug bust, 7 yr. old, mothers body search

Pleased to know city has foresight to go forward.

Mary Lou McGrath
Supt. of Schools

Supports proposal.

Always had dream that the school would be center for children and family.
We are trying to collaborate in number of areas and this is one of the most important.

Susan Ayers -
Camb. Mental Health Assoc.
Eustis St.

Supports proposal

Prevention, coordination, collaboration top of our agenda.

John Boesen 25 Suffolk ST. Dir. Camb./Some. Legal Serv.	Supports proposal encourage CK to go forward w/ it. Strong action by govt is greatly needed
Neil Michaels 106 Jackson ST Advisory Committee member	Life long resident. Strongly supports proposal.
Loretta Davis 7 Temple CYWCA Ex.D.	Supports proposal will do anything we can to help
Geraldine Zetzel 14 Hubbard Park	Supports proposal worked w/ group. Child advocate This addresses the needs of all children w/in Camb.
Margery Davis 35 William ST.	Supports
Joe Pitner, Principal Haggerty School	Supports proposal

We are rich in resources, but still, need to do more for our children. Need to reach out to many people.

Patty Natick Hnatiuk
22 Whitney Ave.

Held many jobs w/in past 20 years; 14 as child care provider.
Furloughs, cuts in programs and staff hurt everyone, especially children.

This ord. says we are a city which places great importance on the future

This is a renewed committment to sense of community.

Rich Rudberg
75 Fayerweather

Supports proposal
Urge LLC to grasp this opportunity to take lead for our children.

Marie Espinoza
Camb. Visiting Nurses

Supports proposal
Worked w/ children for past 20 years.

Fragmentation / isolation happens for children far too often.

Lynn Schoff
Teen Health Center
CRLS

Supports proposal
We generally promote health care both physical and mental
We see 60-90 kids per day.

City has hurdles & developing compassionate responses to these kinds of needs

Frances Cooper
1160 Cambridge St.

Supports proposal
Children need this.
Camb. should be doing this
This is a preventative focus on children.

Structure of "council" is very inclusive.

Eve Sullivan
144 Pemberton St

I see some parallels w/ substance abuse task force which I participated for over a year. Not enough focus on hands on pro-active work. Part attention to S.A.F. via grant submission

Henrietta Davis
120 Chestnut St.

Supports proposal
This approach is comprehensive, it shows caring

C. Myers

Poetry and policy in one setting. I came here 11 years ago to work w/ troubled youth, later worked w/ CHA developing employment plan.

Commends Mayor, this is an innovative approach

"

Ques. how will new council work w/ existing agencies

Mayor

Structure is such that this will not duplicate. Policy recommendations will come through the "council"

C. Cyr — Ref to full C/C w/ ~~favorable~~ recommendation

v/v

Mayor — This proposal makes a lot of economic sense in terms of cutting down on "rotten outcomes" and consequently address early on a way to prevent problems.

C. Cyr — Supports proposal

Moved to substitute 2/27/91 draft for original

v/v

A/K/A Kids Council

Adj 7:22 P.M.

(9)

Walsh
Wolf
Durham
Sullivan
Cyr

7:45 P.M. Licenses and Permits

C. Durham — General

Mayor — It came to my attention @ least a year ago that people were getting permits who owed city taxes.

James McDavitt
Chair, License Comm. — Here on behalf of the Commission and Mr. Maloney.
Payment agreement allows marginal business who owes $
Law requires an ordinance

We have done this for taxi's on our own. Also state allows us to w/hold licensi on liquor if state taxes ain't paid.

If a licensee is in bankruptcy we didn't hold back licensi for back taxes

C. Durham — Scope & problem

Usually garage license
liquor licenses usually o.k.

C. Walsh — Ques. process, hardship on tenants etc.

J. McDavitt — C. treasurer will provide us a list and license will be offered pay. & plan and if not agreement we will have option to deny the issuance.

Hugo Salmme
39th Third St — Supports proposal

Jodi Garber
2 Front Ext. — It was frustrating to us that the License Comm didn't have discretion & reviewing tax status of a developer. It shld not be the only criteria but it shld be considered.

No one spoke

Mayor Ref to full C/C w/o recommendation

C. Cyr Adj: 7:59 P.M.

C. C. 106

City of Cambridge

MASSACHUSETTS

In City Council April 1 1991

Kids Council Unfinished Business #5

	YEA	NAY	ABSENT	PRESENT	
Mr. Ed Cyr	✓				
Mr. Francis H. Duehay	✓				
Mr. Jonathan S. Myers	✓				
Mr. Kenneth E. Reeves	✓				
Mrs. Sheila T. Russell	✓				
Mr. Walter J. Sullivan			✓		
Mr. Timothy J. Toomey, Jr.	✓ (2)		✓ (1)		
Mr. William H. Walsh			✓		
Mayor Alice K. Wolf	✓				
	6 (1)	0 (1)	3 (1)		
	7 (2)	0 (2)	2 (2)		

ORDINANCE NO. 1120.

Final publication number 2532. First publication in the Chronicle on March 21, 1991.

City of Cambridge

In the Year One Thousand, Nine Hundred Ninety-One

AN ORDINANCE

In amendment to an ordinance entitled the "Cambridge Municipal Code."

Be it ordained by the City Council of the City of Cambridge as follows:

The Cambridge Municipal Code is hereby amended by striking out the existing Chapter 2.84 and substituting in place thereof the following new Chapter 2.84:

Chapter 2.84

Coordinating Council for Children, Youth and Families, also known as "Kids Council."

Sections:

2.84.010 Established

2.84.020 Function and Purpose

2.84.030 Membership - Appointment - Term

2.84.040 Membership - Qualifications

2.84.050 Officers - Quorum - Rules and Regulations - Committees

2.84.060 Executive Director

2.84.070 Powers and Duties

2.84.010 Established

There shall be established in Cambridge a Coordinating Council for Children, Youth and Families (the Council).

2.84.020 Function and Purpose

The Council will direct a comprehensive local response to the needs of children, their families and other caregivers, in accordance with the guiding principles set forth in the Children, Youth and Family Policy Plan. These principles are:

To promote services and other activities that are preventive rather than reactive.

To promote services and other activities that are coordinated rather than fragmented, and that result in improved accessibility.

To encourage innovative responses to needs.

To generate activities that create opportunities for all children, their families, and other caregivers.

To support families, their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.

To promote services and other activities that are comprehensive, oriented to the needs of children and families seen as whole people.

2.84.030 Membership - Appointment - Term

A. Council Members shall be comprised of the following offices, disciplines and interests:

The Mayor

A member of the City Council

A member of the School Committee

The City Manager

The Superintendent of Schools

The Assistant City Manager for Human Services

The Commissioner of Health & Hospitals

A member of the philanthropic community

A representative from a State agency serving children, youth and families

A representative of the corporate/business community

A representative of the university community

A representative from the early childhood community

Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.

Three members shall be identified to serve one year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

B. The Council shall have an Executive Committee comprised of a subset of the Council and including the Chair to enact the business of the full Council between Council meetings.

C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee members shall be appointed by the City Manager with advice and recommendations from the Mayor. All other members shall be appointed by the City Manager with advice and recommendations from the City Council. The City Manager shall consult with groups involved with children and

shall advertise widely to obtain names of qualified candidates.

E. Elected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Member shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

2.84.040 Membership - Qualifications

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

2.84.050 Officers - Quorum - Rules and Regulations - Committees

A. The Council shall meet as often as necessary to conduct

its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chair from among Council Members.

C. Eleven members shall constitute a quorum for the purpose of conducting the business of the Council, and all decisions shall be by majority vote of the Council members present and voting.

D. The Council may adopt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws.

H. The Council shall develop a committee structure. To broaden participation from the community, members of these committees will be a mix of Council Members and the community-at-large. Parents shall be represented on all committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified candidates. The committees will include:

A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

A Development Committee to assist the Council's grant writing and fundraising operations.

A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that coincides with Council priorities will be formed to guide the Council.

2.84.060 Executive Director

A. There shall be an Executive Director of the Council, who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which he or she will receive administrative support.

2.84.070 Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Manager, the City Council, the School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the City Manager and other appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other

groups and organizations to further the intent and purposes of this chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

In City Council April 1, 1991.

Passed to be ordained by a yea and nay vote: Yeas 7; Nays 0; Absent 2.

Robert W. Healy, City Manager.

ATTEST:- Joseph E. Connarton, City Clerk.

4/17/91

APPROVED
Russell B. Higley
CITY SOLICITOR

OFFICE OF THE CITY CLERK

CITY OF CAMBRIDGE

CITY HALL, CAMBRIDGE, MASSACHUSETTS 02139

(617) 349-4260

JOSEPH E. CONNARTON
CITY CLERK

JOHN E. FLYNN
DEPUTY CITY CLERK

April 3, 1991

Russell B. Higley
City Solicitor
City Hall
Cambridge, MA

Dear Sir:

Enclosed you will find copies of three proposed amendments to the Municipal Code of the City of Cambridge which were passed to be ordained at the City Council meeting held on April 1, 1991 as follows:

1. Proposed amendment to the Municipal Code regarding the Interim Parking Control Committee.

2. Proposed amendment regarding Licenses and Permits of Delinquent Taxpayers.

3. Proposed amendment regarding the establishment of a Coordinating Council for Children, Youth and Families, also known as "Kids Council."

Would you kindly review these amendments and indicate your approval or disapproval on the bottom and return to this office.

Your kind attention in this matter will be greatly appreciated.

Sincerely yours,

Joseph E. Connarton

Joseph E. Connarton
City Clerk

JEC/dl

Encs. (3) Ordinance numbers 1118, 1119 & 1120.

c.c. Joseph Cellucci, Commissioner, Inspectional Services
Councillor Duehay, Chairman, Ordinance Committee
Birge Albright, Law Dept.

4/17/91 APPROVED Russell B. Higley CITY SOLICITOR

OFFICE OF THE CITY CLERK

CITY OF CAMBRIDGE

CITY HALL, CAMBRIDGE, MASSACHUSETTS 02139

(617) 349-4260

JOSEPH E. CONNARTON
CITY CLERK

JOHN E. FLYNN
DEPUTY CITY CLERK

March 25, 1991

Mr. Russell B. Higley
City Solicitor
City Hall
Cambridge, MA

Dear Mr. Higley:

Enclosed you will find copies of proposed amendments to the Municipal Code of the City of Cambridge which were passed to a second reading at the City Council meeting held on March 18, 1991 as follows:

1. Council for Children, Youth and Families, also known as "Kids Council".

2. Licenses and Permits of Delinquent Taxpayers.

Enclosed also you will find a proposed amendment to the Municipal Code for the City of Cambridge regarding Mandatory Recycling which was passed to be ordained at the City Council meeting held on March 18, 1991.

Finally you will find a copy of a proposed amendment to the Zoning Ordinances of the City of Cambridge which failed to be ordained at the City Council meeting held on March 18, 1991.

Would you kindly review these amendments and indicate your approval on the bottom and return to this office.

Your kind attention in this matter will be greatly appreciated.

COMMONWEALTH OF MASSACHUSETTS
Middlesex, ss. Probate Court
No. 382534

NOTICE OF FIDUCIARY'S ACCOUNT

To all persons interested in the estate of **Helen D. Grozier** late of Cambridge, in said County, deceased.

You are hereby notified pursuant to Mass. R.Civ.P. Rule 72 that the 9th thru 17th accounts of **Boston Safe Deposit and Trust Company** and **Richard Grozier** as Trustees (the fiduciaries) under the will of said deceased for the benefit of **John Grozier** and others have been presented to said Court for allowance.

If you desire to preserve your right to file an objection to said accounts, you or your attorney must file a written appearance in said Court at Cambridge on or before the 12th day of April, 1991, the return day of this citation. You may upon written request by registered or certified mail to the fiduciaries, or to the attorney for the fiduciaries, obtain without cost a copy of said accounts. If you desire to object to any item of said accounts, you must, in addition to filing a written appearance as aforesaid, file within thirty days after said return day or within such other time as the Court upon motion may order a written statement of each such item together with the grounds for each objection thereto, a copy to be served upon the fiduciaries pursuant to Mass. R.Civ.P. Rule 5.

Witness, Sheila E. McGovern, Esquire, First Judge of said Court, this 6th day of March, 1991.

Donna M. Lambert
Register

(C)Mar.21

COMMONWEALTH OF MASSACHUSETTS
Middlesex, ss Probate Court
No. 15222

NOTICE OF FIDUCIARY'S ACCOUNT

To all persons interested in the estate of **John Brewster** late of Cambridge, in said County, deceased.

You are hereby notified pursuant to Mass. R.Civ.P. Rule 72 that the 11th account of **Carlton W. Spencer, Lloyd B. Waring** and **Arthur J. Mason** as Trustees (the fiduciaries) under the will of said deceased for the benefit of **William Brewster** and others and Educational and Charitable interest in the State of New Hampshire has been presented to said Court for allowance.

If you desire to preserve your right to file an objection to said account, you or your attorney must file a written appearance in said Court at Cambridge on or before the 11th day of April, 1991, the return day of this citation. You may upon written request by registered or certified mail to the fiduciaries, or to the attorney for the fiduciaries, obtain without cost a copy of said account. If you desire to object to any item of said account, you must, in addition to filing a written appearance as aforesaid, file within thirty days after said return day or within such other time as the Court upon motion may order a written statement of each such item together with the grounds for each objection thereto, a copy to be served upon the fiduciaries pursuant to Mass. R.Civ.P. Rule 5

Witness, Sheila E. McGovern, Esquire, First Judge of said Court, this 7th day of March, 1991.

Donna M. Lambert
Register

(C)Mar.21

FIRST PUBLICATION NO. 2529.
CITY OF CAMBRIDGE
In the Year One Thousand, Nine Hundred Ninety-One
AN ORDINANCE

In amendment to an ordinance entitled the "Cambridge Municipal Code."

Be it ordained by the City Council of the City of Cambridge as follows:

The Cambridge Municipal Code is hereby amended by striking out the existing Chapter 2.84 and substituting in place thereof the following new Chapter 2.84:

Chapter 2.84

Coordinating Council for Children, Youth and Families, also known as "Kids Council."

Sections:

2.84.010 Established
2.84.020 Function and purpose
2.84.030 Membership - Appointment - Term
2.84.040 Membership - Qualifications
2.84.050 Officers - Quorum - Rules and Regulations - Committees
2.84.060 Executive Director
2.84.070 Powers and Duties
2.84.010 **Established**

There shall be established in Cambridge a Coordinating Council for Children, Youth and Families (the Council).

2.84.020 **Function and Purpose**

The Council will direct a comprehensive local response to the needs of children, their families and other caregivers, in accordance with the guiding principles set forth in the Children, Youth and Family Policy Plan. These principles are:

To promote services and other activities that are **preventive** rather than reactive.

To promote services and other activities that are **coordinated** rather than fragmented, and that result in improved accessibility.

To encourage **innovative responses** to needs.

To generate activities that **create opportunities** for all children, their families, and other caregivers.

To **support families,** their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.

To promote services and other activities that are **comprehensive,** oriented to the needs of children and families seen as whole people.

2.84.030 **Membership - Appointment - Term**

A. Council Members shall be comprised of the following offices, disciplines and interests:

The Mayor
A member of the City Council
A member of the School Committee
The City Manager
The Superintendent of Schools
The Assistant City Manager for Human Services
The Commissioner of Health & Hospitals
A member of the philanthropic community
A representative from a State agency serving children, youth and families
A representative of the corporate/business community
A representative of the university community
A representative of the early childhood community
A representative from the early childhood community

Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.

Three members shall be identified to serve one-year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

B. The Council shall have an Executive Committee comprised of a subset of the Council and including the Chair to enact the business of the full Council between Council meetings.

C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee members shall be appointed by the City Manager with advice and recommendations from the Mayor. All other members shall be appointed by the City Manager with advice and recommendations from the City Council. The City Manager shall consult with groups involved with children and shall advertise widely to obtain names of qualified candidates.

E. Elected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Members shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

2.84.040 **Membership - Qualifications**

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

2.84.050 **Officers - Quorum - Rules and Regulations - Committees**

A. The Council shall meet as often as necessary to conduct its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chair from among Council Members.

C. Four members shall constitute a quorum for the purpose of conducting the business of the Council, and all decisions shall be by majority vote of the Council members present and voting.

D. The Council may adopt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws.

H. The Council shall develop a committee structure. To broaden participation from the community, Council Members shall constitute a quorum on only a few committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified candidates. The committees will include:

A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

A Development Committee to assist the Council's grant writing and fundraising operations.

A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that coincides with Council priorities will be formed to guide the Council.

2.84.060 **Executive Director**

A. There shall be an Executive Director of the Council, who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which he or she will receive administrative support.

2.84.070 **Powers and Duties**

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Manager, the City Council, the School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the City Manager and other appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other groups and organizations to further the intent and purposes of this chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

Passed to a second reading as amended at the City Council meeting held on March 18, 1991 and on or after March 31, 1991 the question comes on passing to be ordained.

Joseph E. Connarton,
City Clerk.

ATTEST:-

(C)Mar.21

CITY OF CAMBRIDGE
BOARD OF LICENSE COMMISSIONERS

Notice is hereby given under General Laws, Chapter 138, as amended that **The Dali Delight, Inc., Henry F. Miller, manager,** has applied for a transfer of its license to sell all alcoholic beverages as a restaurant at 182 Alewife Brook Parkway to **Rich 'N' Famous Foods, Inc.** d/b/a **Rich 'N' Famous Restaurant, Paul C. Nassios, manager,** at said location. The premises is located in a capped area.

The premises are described as follows: dining room, kitchen and storage area on first floor.

The officers and directors of Rich 'N' Famous Foods, Inc. are: Paul C. Nassios, President and Director; Chris A. Nassios, Treasurer and Director; Athena Nassios, Clerk and Director.

The hearing on this application will be held on Tuesday evening, April 2, 1991, six o'clock, in the Michael J. Lombardi Municipal Building, 2nd floor, 831 Massachusetts Avenue, Cambridge, Mass., 02139.

James Thaddeus McDavitt
Anthony G. Paolillo
Thomas V. Scott
License Commission

(C)Mar.21

COMMONWEALTH OF MASSACHUSETTS
Middlesex, ss. Probate Court
No. 490427

NOTICE OF FIDUCIARY'S ACCOUNT

To all persons interested in the estate of **Frederick Markus** of Cambridge, in said County, a person under conservatorship.

You are hereby notified pursuant to Mass. R.Civ.P. Rule 72 that the 1st and final account of **James R. De Giacomo** as Temporary Conservator (the fiduciary) of the property of said Ward has been presented to said Court for allowance.

If you desire to preserve your right to file an objection to said account, you or your attorney must file a written appearance in said Court at Cambridge on or before the 12th day of April, 1991, the return day of this citation. You may upon written request by registered or certified mail to the fiduciary, or to the attorney for the fiduciary, obtain without cost a copy of said account. If you desire to object to any item of said account, you must, in addition to filing a written appearance as aforesaid, file within thirty days after said return day or within such other time as the Court upon motion may order a written statement of each such item together with the grounds for each objection thereto, a copy to be served upon the fiduciary pursuant to Mass. R.Civ.P. Rule 5.

Witness, Sheila E. McGovern, Esquire, First Judge of said Court, this 8th day of March, 1991.

Donna M. Lambert
Register

(C)Mar.21

FIRST PUBLICATION NO. 2528.
CITY OF CAMBRIDGE
In the Year One Thousand, Nine Hundred and Ninety-One
AN ORDINANCE

In amendment to an ordinance entitled the "Cambridge Municipal Code."

Be it ordained by the City Council of the City of Cambridge as follows:

In accordance with G.L. c. 40, §57, as added by St. 1985, c. 640, which was accepted by the City Council on September 11, 1989, Title 5 of the Code (Business Licenses and Regulations) is hereby amended by adding the following new Chapter 5.48 amended by adding the following new Chapter 5.48 (Licenses and Permits of Delinquent Taxpayers):

Chapter 5.48

Licenses and Permits of Delinquent Taxpayers

Sections

5.48.010 Tax Collector to furnish list of delinquent taxpayers
5.48.020 Revocation of license of delinquent taxpayer; Notice and Hearing
5.48.030 Payment agreement
5.48.040 Waiver of denial, suspension or revocation
5.48.050 Exclusion of certain licenses and permits
5.48.010 **Tax Collector to furnish list of delinquent taxpayers**

The Assistant City Manager for Fiscal Affairs, as the Cambridge official responsible for records of all municipal taxes, assessments, betterments and other municipal charges (hereinafter referred to as the "Tax Collector"), shall annually furnish to each city department, board, commission or division which issues licenses or permits, including renewals and transfers (hereinafter referred to as the "licensing authority"), a list of all persons, corporations, partnerships or other business enterprises which have neglected or refused to pay any local taxes, fees, assessments, betterments or other municipal charges for not less than a twelve-month period and which have not filed in good faith a pending application for an abatement of such tax or a pending petition before the appellate tax board. (Such persons, corporations, partnerships or other business enterprises shall hereinafter be referred to as "parties").

5.48.020 **Revocation of license or delinquent taxpayer; Notice and Hearing**

The licensing authority may deny, revoke or suspend any license or permit, including renewals and transfers, of any party whose name appears on said list furnished to the licensing authority from the tax collector or with respect to any individual who is listed as an officer or director of any party, whether the tax collector has complied with the requirement that the party be given notice and a hearing as required by law.

5.48.030 **Payment agreement**

Any party shall be given an opportunity to enter into a delinquent tax payment agreement with the Tax Collector, in accordance with the licensing authority's issue a license. The validity of said license shall be conditioned upon satisfactory compliance with said agreement. Failure to comply with said agreement shall be grounds for the suspension or revocation of said license or permit; provided, however, that the holder be given notice and a hearing as required by law.

5.48.040 **Waiver of denial, suspension or revocation**

The City Council may waive such denial, suspension or revocation if it finds that the property owner, its officers or stockholders, if any, or members of his immediate family, as defined in G.L. c. 268A, §1(e), has no direct or indirect business interest in the business or activity conducted in or on said property.

5.48.050 **Exclusion of certain licenses and permits**

This Chapter shall not apply to the following licenses and permits: open burning, G.L. c. 48, §13; bicycle permits, G.L. c. 85, §11A; sales of articles for charitable purposes, G.L. c. 101, §33; children work permits, G.L. c. 149, §69; clubs, associations dispensing food or beverage permits, G.L. c. 140, §21E; fishing, hunting, trapping licenses, G.L. c. 131, §12; marriage licenses, G.L. c. 207, §28; and theatrical events, public exhibition permits, G.L. c. 140, §181 and §183A.

Passed to a second reading at the City Council meeting held on March 18, 1991 and on or after March 31, 1991 the question comes on passing to be ordained.

Joseph E. Connarton,
City Clerk.

ATTEST:-

(C)Mar.21

CITY OF CAMBRIDGE
PURCHASING DEPARTMENT

Sealed proposals will be received at the Office of the Purchasing Agent, Room 303, City Hall, Cambridge, Mass., until 11:00 o'clock A.M. Thursday, April 4, 1991, at which time and place they will be publicly opened and read for furnishing the following to the City of Cambridge.

Rental of Off-Site Storage Space
Repair of Masonry Over Central Supply
Professional Recruitment Services
Liquid Bulk Oxygen
Stationery Supplies

See proposal for bid deposit.

The City of Cambridge reserves the right to waive any informalities or to reject any or all proposals.

Specifications may be obtained at the Office of the Purchasing Agent, Room 303, City Hall, Cambridge, Mass.

Each proposal must be in a sealed envelope plainly marked "Proposal for 'Designate Item' " and addressed to Barbara L. Duffy, Purchasing Agent, City Hall, Cambridge, Massachusetts.

Barbara L. Duffy
Purchasing Agent

(C)Mar.21

CITY OF CAMBRIDGE
BOARD OF LICENSE COMMISSIONERS

Notice is hereby given under General Laws, Chapter 138, as amended that **Dunkin Ventures Corporation** d/b/a **Chili's Grille & Bar, Robert C. Higgins, manager,** holder of an all alcoholic beverages as a restaurant at 114-118-120 Mt. Auburn Street has applied for a change of manager from Robert C. Higgins to David S. Rosenberg.

The hearing on this application will be held on Tuesday evening, April 2, 1991, at six o'clock, in the Michael J. Lombardi Municipal Building, 2nd floor, 831 Massachusetts Avenue.

James Thaddeus McDavitt
Anthony G. Paolillo
Thomas V. Scott
License Commission

(C)Mar.21

MORTGAGEE'S SALE OF REAL ESTATE
COMMONWEALTH OF MASSACHUSETTS

By virtue and in execution of the Power of Sale contained in a certain mortgage given by **Robert E. Paul, Jr.** and **Robert E. Paul,** dated June 30, 1988, to **New England Federal Savings Bank,** recorded with Middlesex County (Southern District) Registry of Deeds, Book 19163, Page 536, of which mortgage the undersigned is the present holder for breach of the conditions contained in the said mortgage, and for the purpose of foreclosing same will be sold at Public Auction on the mortgaged premises hereinafter described, namely **48 Norfolk Street,** Cambridge, Middlesex County, Commonwealth of Massachusetts, on Friday, April 5, 1991, at 12:00 Noon, all and singular premises described in said mortgage as follows:

The land in Cambridge, Middlesex County, Massachusetts; Being a certain parcel of land with a three-family house thereon known and numbered as 48 Norfolk Street, Cambridge, Massachusetts being shown as Lot #3 on a "Plan of Premises in Cambridge, Mass., belonging to **Frank C. Levins:** W.A. Mason & Son, Surveyors, Cambridge, Mass." dated April 1907 and recorded on May 13, 1921 in Plan Book 294 as Plan 27. There being 1885.8 square feet according to said Plan.

Said premises will be sold subject to any and all unpaid taxes, assessments, betterments and municipal liens, if any there be.

TERMS

Ten Thousand and 00/100 ($10,000.00) Dollars in cash or certified check at the time and place of the sale, balance to be paid in the office of Adelson, Golden & Loria, P.C., Attorneys for New England Federal Savings Bank, Sears Crescent Building, Fourth Floor, City Hall Plaza, Boston, Massachusetts, within twenty-one days of the sale, which balance is to be deposited in an escrow account with the firm of Adelson, Golden & Loria, P.C., pending approval of said sale by the Land Court. Other terms, if any, to be announced at the sale.

New England Federal Savings Bank
Present Holder of a Mortgage
By their attorneys
Adelson, Golden & Loria, P.C.
Sears Crescent Building
Fourth Floor
City Hall Plaza
Boston, Massachusetts 02108

(C)Mar.14,21,28

NOTICE OF MORTGAGEE'S
SALE OF REAL ESTATE

By virtue and in execution of the Power of Sale contained in a certain mortgage given by **Elizabeth McClelland** to **Dime Real Estate Services - Massachusetts, Inc.,** which Mortgage is dated August 10, 1988 and recorded with Middlesex County (Southern District) Registry of Deeds in Book 19260, Page 221, of which mortgage the undersigned is the present holder, for breach of the condition of said Mortgage and for the purpose of foreclosing, the same shall be sold at public auction on March 29, 1991 at One O'clock (1:00) PM, on the mortgaged premises below described, being known as and numbered 1783 Massachusetts Avenue, Unit 2, Newport Condominium, Cambridge, Massachusetts, all and singular the premises described in said Mortgage, to wit:

Condominium Unit 1783-2 in a condominium known as Newport Condominium created pursuant to and in accordance with Chapter 183A of the General Laws of the Commonwealth of Massachusetts by Master Deed dated July 29, 1981, and recorded with Middlesex South District Registry of Deeds in Book 14368, Page 250.

The Unit is conveyed together with an undivided 903/1000 (90.3%) percent interest in the common areas and facilities as defined and described in the Master Deed. The Unit is subject to and has the benefit of all applicable provisions contained in such Master Deed and in the Declaration of Trust of Newport Condominium dated July 29, 1981, and recorded in the Middlesex South Registry of Deeds in Book 14368, Page 271., and the rules and regulations from time to time promulgated thereunder by the Trustees of said Condominium Trust, including, without limitation, the provisions for assessment of common expenses.

For title see deed from **P & M Associates, Inc.** to **Sang Yee Hwang** dated January 13, 1988, and recorded with Middlesex South Registry of Deeds in Book 18851, Page 203.

The Unit is more particularly described in Schedule "A" of such Master Deed. The Unit contains 835 square feet of building area, more or less, and is laid out as shown on the Unit Plan as recorded with said Master Deed. A verified statement in the form provided in Section 8, chapter 183A of the General Laws of Massachusetts is attached to such Unit Plan.

For title reference see deed recorded herewith.

The above premises will be sold subject as above and to all outstanding tax titles, municipal or other public taxes, assessments or liens, if any. The above premises shall also be sold subject to all, if any, easements, restrictions and covenants of record; all to the extent in force and applicable.

The said premises shall also be subject to the terms and provisions of said Master Deed, as amended of record; the Declaration of Trust, Bylaws, Rules and Regulations of the organization of Unit Owners of the said Condominium, as amended of record; the provisions of Massachusetts General Laws, Chapter 183A, as amended.

Five Thousand ($5,000.00) Dollars will be required to be paid in cash or by certified, bank, treasurer's or cashier's check by the purchaser at the time and place of sale as earnest money. The balance is to be paid in cash or by certified, bank, treasurer's or cashier's check within thirty (30) days thereafter to be deposited in escrow with the attorney for the mortgagee, Teicholz & Kronick, pending approval of said sale by the Land Court, said approval being the only condition of escrow. The deed shall be delivered within ten (10) days from the date of approval of said sale by the Land Court. The bidder shall be required to sign a Memorandum of Sale containing the above terms at the Auction sale. Other terms, if any, to be announced at the sale.

The Dime Savings Bank of New York, FSB
Present Holder of said Mortgage
By its Attorney
By: Jack I. Smolokoff, Esq.
Teicholz & Kronick
1693 Beacon Street
Brookline, MA 02146
(617) 566-4244

(C)Mar.7,14,21

CITY OF CAMBRIDGE
BOARD OF LICENSE COMMISSIONERS

Notice is hereby given under General Laws, Chapter 138, as amended that **Cambridge Rockefeller, Inc., Edwin Soul, manager,** holder of an all alcoholic beverages as a restaurant license at 215 First Street has applied for a change of premises description and an increase in capacity.

The premises as described is as follows: Kitchen, dining area, bar, storage rooms, court viewing area and downstairs lounge and locker rooms, To-Go shop serving food and non-alcoholic beverages in club area, function room in Athenaeum lobby.

The hearing on this application will be held on Tuesday evening, April 2, 1991, at six o'clock, in the Michael J. Lombardi Municipal Building, 2nd floor, 831 Massachusetts Avenue, Cambridge, Mass., 02139.

James Thaddeus McDavitt
Anthony G. Paolillo
Thomas V. Scott
License Commission

(C)Mar.21

CITY OF CAMBRIDGE
BOARD OF LICENSE COMMISSIONERS

Notice is hereby given under General Laws, Chapter 138, as amended that **Santa Lucia Society, Salvatore Miceli, Frank Talarico** and **James Colorico, Chairmen, House Committee,** 136 Cushing Street, have applied for a Festival license to be exercised at the Haggerty School Yard and on Cushing Street, between Vineyard and Lawn Streets and a Beer and Wine license to be exercised only at 136 Cushing Street, August 30, 1991 thru September 2, 1991.

The hours are as follows:

Friday, August 30, 1991, 4 p.m. to Midnight
Saturday, August 31, 1991, 12 (Noon) to Midnight
Sunday, September 1, 1991, 12 (Noon) to Midnight
Monday, September 2, 1991, 12 (Noon) to Midnight

The hearing on this application will be held on Tuesday, April 2, 1991, at 6 p.m., in the Michael J. Lombardi Municipal Building, 2nd floor, 831 Massachusetts Avenue, Cambridge.

James Thaddeus McDavitt
Anthony G. Paolillo
Thomas V. Scott
License Commission

(C)Mar.21

CITY OF CAMBRIDGE
DEPARTMENT OF HUMAN SERVICE PROGRAMS
LEGAL NOTICE
PUBLIC NOTICE OF THE
AVAILABILITY OF FUNDS
COMMUNITY DEVELOPMENT BLOCK GRANT
(HUMAN SERVICES) FY'92

The City of Cambridge, through its Department of Human Service Programs, is announcing the availability of FY'92 Community Development Block Grant (CDBG) funds. A total of $343,949 is available to fund human service programs for Cambridge residents. Proposals may be submitted in the following areas: Children, Youth, & Family Support; Housing & Emergency Services; Services to Linguistic Minorities; Elder Services; and Substance Abuse Services. Programs that help people access services, thereby promoting self-people access services, thereby promoting self-sufficiency, are a priority for funding. Proposals that request funds to fill in a funding gap are discouraged. The typical range of a grant award will be $10,000-25,000. No grant will exceed $30,000. An application can be obtained at the Human Services Department located at 51 Inman St. or by calling Gloria Palladino at 349-6200. Completed applications for funding are due April 10, 1991 by 5:00 p.m., and must be submitted in the required format.

(C)Mar.21

MORTGAGEE'S SALE OF REAL ESTATE

By virtue and in execution of the Power of Sale contained in a certain mortgage given by **Michael C. Marturano** and **Peter A. Marto,** Trustees of the **179 Sherman Trust to University Bank, National Association** f/k/a **University Bank and Trust Company** dated March 28, 1986, recorded with the Middlesex County (Southern District) Registry of Deeds in Book 15872, Page 246, of which mortgage the undersigned is the present holder, for breach of the conditions of said mortgage and for the purpose of foreclosing, the same will be sold at public auction at 11:00 a.m. on the 4th day of April, 1991 upon the mortgaged premises located at 179 Sherman Street, Cambridge, MA, all and singular the premises described in said mortgage.

To Wit:

A certain parcel of land situated on the westerly side of Sherman Street in the City of Cambridge, in the County of Middlesex, Commonwealth of Massachusetts, bounded and described as follows:

Beginning at a point in the westerly sideline of said Sherman Street at the southerly corner of the granted premises at Lot E; thence

S 86° 09' 59" W a distance of twenty-nine and seven hundredths feet (29.07) to a point; thence

N 02° 50' 56" W a distance of one and eleven hundredths feet (1.11) to a point; thence

S 86° 09' 59" W a distance of eleven and fifty hundredths feet (11.50) to a point; thence

S 02° 42' 51" E a distance of nine and no hundredths feet (9.00) to a point; thence

S 87° 17' 09" W partly by the middle of a wall, a distance of thirty-three and forty-one hundredths feet (33.41) to a point; thence

N 02° 42' 51" W a distance of one and thirty-eight hundredths feet (1.38) to a point; thence

S 87° 17' 09" W a distance of twenty-one and no hundredths feet (21.00) to a point at land now or formerly of Roman Catholic Archbishop of Boston; the previous seven (7) courses by Lot E; thence

S 03° 02' 29" W by land now or formerly of Roman Catholic Archbishop of Boston, a distance of twenty-eight and seventy hundredths feet (28.70) to a point at land now or formerly of Edward P. Poirer; thence

N 86° 57' 31" W by land now or formerly of Edward P. Poirer, a distance of ninety-five and no hundredths feet (95.00) to a rebar in the westerly sideline of said Sherman Street; thence

S 03° 02' 29" E along the westerly sideline of said Sherman Street, a distance of twenty-one and ninety-three hundredths feet (21.93) to the point of beginning.

The above described parcel of land contains an area of 2,505 square feet and is more particularly shown as Lot F on a plan entitled: "Subdivision Plan of Land in Cambridge, Massachusetts (Middlesex County) Scale: 1" = 10' feet to an inch, dated March 9, 1984 by Miller and Nylander Co., 114 Waltham Street, Lexington, Ma."

For Mortgagors' title, see Deed of Nu-World Development Corporation dated June 26, 1984 and recorded with Middlesex South Deeds at Book 15652, Page 463.

Said premises will be sold subject to and/or with the benefit of all rights, all restrictions, easements, improvements, covenants, outstanding tax titles, municipal or other public taxes, assessments, liens or claims in the nature of liens, and existing encumbrances of record created prior to the mortgage, if any there be.

Terms of Sale: Five Thousand Dollars and 00 Cents ($5,000.00) deposit by certified or bank cashier's check - no cash - will be required to be made at the time and place of the sale. The balance upon delivery of the deed within thirty (30) days thereafter at the offices of Shocket & Dockser.

The deposit paid at the time of the sale shall be forfeited if the purchaser does not comply strictly with the terms of the sale. The purchaser will be responsible for all closing costs, state documentary stamps and recording fees.

Other terms, if any, to be announced at the sale.

University Bank, National Association
f/k/a University Bank and Trust Company
Present Holder of said Mortgage
By Its Attorneys,
Shocket & Dockser
Brian P. Moran
One Apple Hill, Suite 225
Natick, MA 01760-0050
(617)237-6170

(C)Mar.7,14,21

CITY OF CAMBRIDGE
BOARD OF LICENSE COMMISSIONERS

Notice is hereby given under General Laws, Chapter 138, as amended that **The Lighthouse Restaurant, Inc.** d/b/a **Harvard Square Sport Club, David A. Purvis, manager,** holder of an all alcoholic beverages as a restaurant license, 2 a.m. closing, at 59 John F. Kennedy Street has applied for a change of manager from David A. Purvis to John C. Sevier.

This applicant has also applied to extend its Entertainment license to include dancing by patrons, 1 audio tape machine which may play music below, at, or above conversation level and 1 video game.

The hearing on this application will be held on Tuesday evening, April 2, 1991, at six o'clock, in the Michael J. Lombardi Municipal Building, 2nd floor, 831 Massachusetts Avenue, Cambridge, Mass., 02139.

James Thaddeus McDavitt
Anthony G. Paolillo
Thomas V. Scott
License Commission

(C)Mar.21

MORTGAGEE'S SALE OF REAL ESTATE

By virtue and in execution of the Power of Sale contained in a certain mortgage given by **Robert E. Paul** and **Robert E. Paul, Jr.,** to **Framingham Savings Bank** dated June 19, 1987, recorded with the Middlesex County (Southern District) Registry of Deeds in Book 18246, Page 472, of which mortgage the undersigned is the present holder, for breach of the conditions of said mortgage and for the purpose of foreclosing, the same will be sold at public auction at 11:00 a.m. on the 4th day of April, 1991, upon the mortgaged premises located at 172-174 Putnam Avenue, Cambridge, Massachusetts, all and singular the premises described in said mortgage.

To Wit:

A certain parcel of land with the buildings thereon situated in Cambridge, now numbered 172 Putnam Avenue and comprising Lot A as shown on a "Plan of Land in Cambridge Mass. 1972-174 Putnam Avenue" made by James F. Rice, Surveyor, dated March 30, 1972 and recorded in Book 12189, page 222, and more fully bounded and described as follows:

Northwesterly by Putnam Avenue, 32 feet;

Southwesterly by a line running partly by Lot B as shown on said plan, 100 feet;

Southeasterly by Lot 10 as shown on said plan, 32 feet; and

Northeasterly by Lot 4 as shown on said plan, 100 feet.

Containing, according to said plan, 3,200 square feet. Be any of said measurements more or less, or however otherwise said premises may be bounded, measured or described.

A certain parcel of land with the buildings thereon, situated in Cambridge, now numbered 174 Putnam Avenue, and comprising Lot B as shown on a "Plan of Land in Cambridge Mass. 172-174 Putnam Avenue" made by James F. Rice, Surveyor, dated March 30, 1972 and recorded in Book 12189, Page 222, and more fully bounded and described as follows:

Northwesterly by Putnam Avenue, 43 feet;

Northeasterly partly by a partition wall and partly by Lot A as shown on said plan, 100 feet;

Southeasterly by Lots 10 and 11 as shown on said plan, 43 feet; and

Southwesterly by Lot 171 as shown on said plan, 100 feet.

Containing 4,300 square feet, be any of said measurements more or less and however otherwise the said premises may be bounded, described or measured.

For our title see deed of George Rothman and Robert P. Clark, Trustees of Putave Realty Trust, dated January 25, 1985 and recorded with the Middlesex South Registry of Deeds in Book 15986, Page 286.

Said premises will be sold subject to and/or with the benefit of any and all restrictions, easements, improvements, covenants, outstanding tax titles, municipal or other public taxes, assessments, liens or claims in the nature of liens, and existing encumbrances of record created prior to the mortgage, if any there be.

Terms of Sale: Twenty Thousand Dollars and 00 Cents ($20,000.00) deposit by certified or bank cashier's check - no cash - will be required to be made at the time and place of the sale. The balance due within thirty (30) business days thereafter at the offices of Shocket & Dockser.

The deposit paid at the time of the sale shall be forfeited if the purchaser does not comply strictly with the terms of the sale. The purchaser will be responsible for all closing costs, state documentary stamps and recording fees.

Other terms, if any, to be announced at the sale.

Framingham Savings Bank
Present Holder of said Mortgage,
By Its Attorneys
J. Daniel Woodyshek
Shocket & Dockser
One Apple Hill, Suite 225
Natick, Massachusetts 01760-0050
(617) 237-6170

(C)Mar.14,21,28

NOTICE OF SALE
MORTGAGEE'S SALE OF REAL ESTATE

By virtue and in execution of the Power of Sale contained in a certain mortgage given by **Arthur G. Panos, Trustee of Marlex Realty Trust** to **USTrust** dated April 13, 1989 and recorded with the Middlesex County Registry of Deeds, Southern District, in Book 19765, page 045, of which mortgage the undersigned is the present holder, for breach of the conditions of said mortgage and for the purpose of foreclosing the same will be sold at Public Auction at 2:00 p.m. on the 3rd of April, 1991, on the mortgaged premises at **196-196A-198-198A-200 Elm Street,** North Cambridge, Middlesex County, Massachusetts, all and singular the premises described in said mortgage

To wit:

A certain parcel of land with buildings thereon situated partly in said Somerville and partly in Cambridge, Middlesex County, Massachusetts and now numbered 196-196A-198-198A Elm Street, bounded and described as follows:

Easterly: by Elm Street, Sixty-Seven and 5/10 (57.5) feet;

Northerly: by land now or formerly of one Haggerty and one Hogan, One Hundred (100) feet;

Westerly: by land formerly conveyed to Charles M. Miller, Sixty-Two and 5/10 (62.5) feet more or less; and

Southerly: by Tenney Street, Seventy-Eight and 5/10 (78.5) feet;

Also a certain parcel of land with the buildings thereon situated partly in said Somerville and partly in said Cambridge and now numbered 200 Elm Street, and being shown as Lot A on a Plan of Land in Somerville, Mass. by C. H. Gannett, C.E. dated August 11, 1919, recorded with Middlesex South District Deeds, and of Book 4286, bounded and described as follows:

Northeasterly: by Elm Street, Thirty-Seven and 34/100 (37.34) feet;

Northwesterly: by Lot B on said plan, One Hundred Four and 8/10 (104.8) feet;

Southwesterly: by land of owners unknown, Thirty-Seven and 5/10 (37.5) feet; and

Southeasterly: by land of owners unknown, Ninety-Two and 15/100 (92.15) feet;

Containing according to said plan, 3625 square feet more or less, be all or any of said measurements more or less or however otherwise said premises may be bounded, measured, or described.

For title see deed dated May 16, 1986 and recorded at the Middlesex County (Southern District) Registry of Deeds at Book 17019, Page 313.

Terms of Sale: $15,000.00 shall be paid in cash or by certified or bank cashier's check by the purchaser at the time and place of sale and the balance to be paid in cash or by certified or bank cashier's check at the offices of Michael A. Dixon, One Shipyard Way, Suite 1190, Medford, Massachusetts, within thirty (30) days from the date of sale.

Said sale shall be subject to all taxes, tax liens, municipal betterments and assessments, if any.

Other terms to be announced at sale.

USTrust
By its attorney
Michael A. Dixon, Esquire
One Shipyard Way
Suite 1190
Medford, MA 02155
(617) 391-0027
Present holder of said mortgage

(C)Mar.14,21,28

CITY OF CAMBRIDGE
BOARD OF LICENSE COMMISSIONERS

Notice is hereby given under General Laws, Chapter 138, as amended that **The Lighthouse Restaurant, Inc.** d/b/a **Harvard Square Sport Club, David A. Purvis, manager,** holder of an all alcoholic beverages as a restaurant license, 2 a.m. closing, at 59 John F. Kennedy Street has applied for a change of manager from David A. Purvis to John C. Sevier.

This applicant has also applied to extend its Entertainment license to include dancing by patrons, 1 audio tape machine which may play music below, at, or above conversation level and 1 video game.

The hearing on this application will be held on Tuesday evening, April 2, 1991, at six o'clock, in the Michael J. Lombardi Municipal Building, 2nd floor, 831 Massachusetts Avenue, Cambridge, Mass., 02139.

James Thaddeus McDavitt
Anthony G. Paolillo
Thomas V. Scott
License Commission

(C)Mar.21

MORTGAGEE'S SALE OF REAL ESTATE

By virtue and in execution of the Power of Sale contained in a certain mortgage given by **Robert E. Paul** and **Robert E. Paul, Jr.,** to **Framingham Savings Bank** dated June 19, 1987, recorded with the Middlesex County (Southern District) Registry of Deeds in Book 18246, Page 472, of which mortgage the undersigned is the present holder, for breach of the conditions of said mortgage and for the purpose of foreclosing, the same will be sold at public auction at 11:00 a.m. on the 4th day of April, 1991, upon the mortgaged premises located at 172-174 Putnam Avenue,

WHAT'S HAPPENING

Continued from page 13

benefit Dance Musician's Development Fund from noon to 10:30 pm in the VFW Hall, 688 Huron Ave.; $6 for afternoon or evening; $10 all day; call 491-6084.

BOSTON MUSICA VIVA plays Franco Donatoni, Bruno Maderna, Charles Ives and Donald Martino at 3 pm in Pickman Hall, Longy School of Music, 27 Garden St.; tickets $18, $14, $10; call 353-0556.

GEORGE ENESCU CHAMBER PLAYERS — The internationally renowned string quartet will perform Mozart, Dvorak and Enescu to benefit the Free Romania Foundation at 8 pm in Longy School of Music, 27 Garden St.; admission contribution $25; call 876-3378.

ISRAELI FOLK DANCING — Lessons for beginners and intermediate dancers 6-9 pm; requests 9-10 pm; at Harvard-Radcliffe Hillel, 74 Mt. Auburn St.; students with ID $1, all others $2. Call 495-4696.

FILMS

HARVARD—EPWORTH FILM SERIES — "The Gospel according to Matthew", directed by Pier Paolo Pasolini at 8 pm in Harvard-Epworth United Methodist Church, 1555 Mass. Ave.; contribution $3; call 354-0837.

BRATTLE THEATER — "The Scarlet Empress" at 3:45 and 7:45 pm and "Queen Christina" at 1:50, 5:45 and 9:45 pm; 40 Brattle St.; call 876-6708.

MEETINGS

RECOVERY SELF-HELP GROUP — Weekly meeting of the Secular Organization for Sobriety for people with drinking or drug problems, 7-8 pm at the First Unitarian Church, 3 Church St. Call 945-2379.

LECTURES

STRUGGLE FOR WOMEN'S EQUALITY with a labor organizer, a former NAACP board member and a Puerto Rican activist at 3 pm in the Center for Marxist Education, 550 Mass. Ave., Central Square; admission $4; call 868-5620.

Monday, March 25

MUSIC/DANCE/DRAMA

SOUND CREATION — Lesley graduate student Judith Raiffa-Harbig will present music performed on Paiste "Sound Creation" gongs at 7 pm in Weich Auditorium at Lesley College; admission free; call 349-8541.



'WOMAN AT HAYMARKET' is one of the black and white photos taken by Nancy Royal being displayed at Lehman Hall in Dudley House at Harvard this month.

FILMS

BRATTLE THEATRE — "Pickup on South Street" at 4:30 and 8 pm and "Underworld U.S.A." at 6:05 and 9:30 pm; 40 Brattle St.; call 876-6837.

LECTURES

POETRY READING — Martin Espada will read from "Rebellion is the Circle of a Lover's Hands" at 8:15 pm in the Cambridge Center for Adult Education; admission $2; call 547-6789.

MEETINGS

NEW ENGLAND BACKGAMMON CLUB — 7 pm Monday nights at the Sheraton Commander Hotel, 16 Garden St.; call 641-2091 for more info.

BATTERED WOMEN'S SUPPORT — From 7:30-9 pm in The Women's Center, 46 Pleasant St.; call 354-8807.

FOR KIDS

REEL DELIGHTS — Preschool films for ages 3 to 6; 10:30 am and 3:30 pm at Cambridge Public Library, 449 Broadway; call 349-4038.

TODDLERS INC. — Toddlers and adults play together in the picture-book area; 10:30 am to noon at the Central Square branch library, 45 Pearl St.; call 349-4010.

TODDLER DROP-IN — 10:30-11:30 am at the North Cambridge branch library, 70 Rindge Ave.; call 349-4023.

TODDLER TIME — Play and get to know other parents and neighbors from 9:30-11 am in Valente Branch Library, 826 Cambridge St.; call 349-4015.

Tuesday, March 26

FILMS

BRATTLE THEATRE — "The Tigress" at 4:15 and 8 pm and "Barrocco" at 5:50 and 9:30 pm; 40 Brattle St.; call 876-6837.

LECTURES/READINGS

FOREIGN U.S. MILITARY BASES — The Cambridge Peace Commission presents a discussion with residents Joseph Gerson, Cynthia Enloe, Yarrow Cleave and Paul Walker on foreign U.S. military bases at 7 pm in North Cambridge Library, 70 Rindge Ave.

"GEORGE SAND: BECOMING A WRITER" — Tufts French professor Isabelle Naginiski will lecture at 7:30 pm in the Colloquium Room, Bunting Institute, 34 Concord Ave.; call 495-8212.

RADCLIFFE CAREER FORUMS — Organizational consultant Rhea Stakley will discuss "Reaching New Heights: Mountaineering as a Metaphor for Peak Experience at Work" from 4-5:30 pm in Buckingham House, 77 Brattle St.; admission $5; call 496-1855.

WOMEN, WORK AND FAMILY — Lesley College Human Services Professor Robin Roth will give a talk on "Having it All: Women, Work and Family" at 4 pm in the Multipurpose Room at Lesley College; admission free: call 349-8541.

Wed., March 27

MUSIC/DANCE/DRAMA

SOUNDS OF JAZZ — "Natraj", North Indian and West African Traditional Music at 7 pm in Cambridge Library, 449 Broadway; admission free; call 349-4039.

FILMS

LIBRARY FOREIGN FILM SERIES — "Electra," Euripides' Greek tragedy by murder and revenge at 7 pm in the Valente branch library, 826 Cambridge St.; call 349-4015.

BRATTLE THEATRE — "Spirit of the Beehive" at 4:30 and 7:45 pm and "Frankenstein" at 6:20 and 9:30 pm in 40 Brattle St.; call 876-6837.

LECTURES

AUTHOR MARY HELEN WASHINGTON who wrote "Memory of Kin: Stories About Family by Black Writers", will read from 6-8 pm in Savanna Books, 858 Mass. Ave.; admission free; call 868-3423.

WOMEN IN COMMUNIST FICTION — a lecture by Zhu Hong, research fellow at the Institute of Foreign Literature, Chinese Academy of Social Sciences at 4 pm in the Bunting Institute, 34 Concord Ave; admission free; call 495-8212.

DISCUSSION WITH LIZ WALKER — Channel 4 anchor woman Liz Walker will discuss "Women's Careers and Personal Lives" at noon in Welch Auditorium at Lesley College; admission free; call 349-8541.

MEETINGS

BATTERED WOMEN'S SUPPORT GROUP — Meets from 7-8:30 pm in the Women's Center, 46 Pleasant St.

RETIRED MEN'S CLUB — Retired men from Cambridge, Medford, Somerville and Arlington are invited to a meeting at 10 am in the Immaculate Conception Church on the Alewife Brook Parkway.

FOR KIDS

TODDLER TIME/TODDLER SING — Children up to age 2 and parents can play and sing together in the picture-book room; 10:30-11:30 am at Cambridge Public Library, 449 Broadway; call 349-4038.

Thurs., March 28

EXHIBITS

RINDGE AND LATIN PHOTO EXHIBIT — Works by senior portfolio and advanced photography students at Cambridge Rindge and Latin will open tonight with a reception and open house from 6-8 pm in Cambridge Multicultural Arts Center, 41 Second St.; admission free; call 577-1400.

MISCELLANEOUS

BOSTON MEDIA ACTION — "Press-the Press: A Campaign for a True Mass-Media" featuring live taping of Peace and Justice TV/radio hour, political satire with Barry Crimmins, music and a forum for alternative media activist to present their work at 7 pm in Sanders Theater, Harvard University, corner of Quincy and Cambridge Street; admission $2 at the door; call 492-8399.

MUSIC/DANCE/DRAMA

MIT NOON CHAPEL CONCERTS — Guitarist Michael McCormick performs classical guitar including Bach, Richard Rodney Bennett, Joaquin Turina and Fernando Sor at noon in the MIT Chapel, corner of Amherst St. and Mass Ave.; call 253-2826.

FILMS

BRATTLE THEATRE — "The Sheltering Sky" at 7 pm and "Luna" at 4:20 and 9:30 pm; 40 Brattle St.; call 876-6837.

Now Open !!!

Sakura Japanese/american restaurant

- Teriyaki Sirloin
- Teriyaki Boneless Chicken
- Shokudo Pork
- Crabmeat Croquette
- Beef or Shrimp fried rice
- Rice
- Omelet
- Fried Seafood
- Curry Pie
- Curry Rice
- Teriyaki Hamburger
- Cheeseburger
- Hot Dogs

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Dine Under The Stars.

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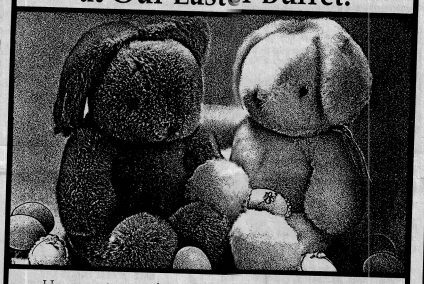

Hop over to our place and stuff yourself at our Easter Buffet.

We have all the traditional favorites you and your family enjoy like Steamship Round of Beef, Baked Virginia Ham and much, much more!

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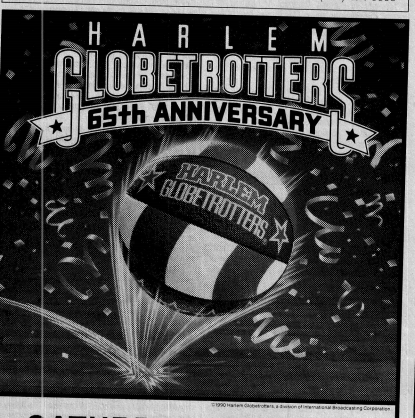

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$18.50, $15.50 & $13.50 Reserved*
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A Very Special
EASTER BRUNCH BUFFET
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Omelettes and Waffles made-to-order
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OFFICE OF THE CITY CLERK

CITY OF CAMBRIDGE

CITY HALL, CAMBRIDGE, MASSACHUSETTS 02139

(617) 349-4260

JOSEPH E. CONNARTON
CITY CLERK

JOHN E. FLYNN
DEPUTY CITY CLERK

April 3, 1991

Russell B. Higley
City Solicitor
City Hall
Cambridge, MA

Dear Sir:

Enclosed you will find copies of three proposed amendments to the Municipal Code of the City of Cambridge which were passed to be ordained at the City Council meeting held on April 1, 1991 as follows:

1. Proposed amendment to the Municipal Code regarding the Interim Parking Control Committee.

2. Proposed amendment regarding Licenses and Permits of Delinquent Taxpayers.

3. Proposed amendment regarding the establishment of a Coordinating Council for Children, Youth and Families, also known as "Kids Council."

Would you kindly review these amendments and indicate your approval or disapproval on the bottom and return to this office.

Your kind attention in this matter will be greatly appreciated.

Sincerely yours,

Joseph E. Connarton

Joseph E. Connarton
City Clerk

JEC/dl

Encs. (3) Ordinance numbers 1118, 1119 & 1120.

c.c. Joseph Cellucci, Commissioner, Inspectional Services
Councillor Duehay, Chairman, Ordinance Committee
Birge Albright, Law Dept.

ORDINANCE NO. 1118.

Final publication number 2530. First publication in the Chronicle on March 7, 1991.

City of Cambridge

In the Year One Thousand, Nine Hundred Ninety-One

AN ORDINANCE

In amendment to the"Municipal Code of the City of Cambridge".

Be it ordained by the City Council of the City of Cambridge as follows:

That Chapter 10.16 is hereby amended in Section 10.16.050 entitled "Interim Parking Control Committee" by striking out the first sentence in said section and substituting in place thereof the following new first sentence which reads as follows:

All applications for controlled parking facility permits and determinations of exclusion shall be reviewed by an Interim Parking Control Committee (IPCC or Committee) comprised of of five Cambridge residents with appropriate experience, appointed by the City Manager.

In City Council April 1, 1991.

Passed to be ordained by a yea and nay vote:- Yeas 6; Nays 2; Absent 1.

Robert W. Healy, City Manager.

ATTEST:- Joseph E. Connarton, City Clerk

ORDINANCE NO. 1119.

Final publication no. 2531. First publication in the Chronicle on March 21, 1991.

City of Cambridge

In the Year One Thousand, Nine Hundred Ninety - One

AN ORDINANCE

In amendment to an ordinance entitled the "Cambridge Municipal Code."

Be it ordained by the City Council of the City of Cambridge as follows:

In accordance with G.L. c. 40, §57, as added by St. 1985, c. 640, which was accepted by the City Council on September 11, 1989, Title 5 of the Code (Business Licenses and Regulations) is hereby amended by adding the following new Chapter 5.48 (Licenses and Permits of Delinquent Taxpayers):

Chapter 5.48

Licenses and Permits of Delinquent Taxpayers

Sections

5.48.010 Tax Collector to furnish list of delinquent taxpayers

5.48.020 Revocation of license of delinquent taxpayer; Notice and Hearing

5.48.030 Payment agreement

5.48.040 Waiver of denial, suspension or revocation

5.48.050 Exclusion of certain licenses and permits

5.48.010 Tax Collector to furnish list of delinquent taxpayers

The Assistant City Manager for Fiscal Affairs, as the Cambridge official responsible for records of all municipal taxes, assessments, betterments and other municipal charges (hereinafter

referred to as the "Tax Collector"), shall annually furnish to each city department, board, commission or division which issues licenses or permits, including renewals and transfers, (hereinafter referred to as the "licensing authority") a list of all persons, corporations, partnerships or other business enterprises which have neglected or refused to pay any local taxes, fees, assessments, betterments or other municipal charges for not less than a twelve-month period and which have not filed in good faith a pending application for an abatement of such tax or a pending petition before the appellate tax board. (Such persons, corporations, partnerships or other business enterprises shall hereinafter be referred to as "parties").

5.48.020 Revocation of license of delinquent taxpayer; Notice and hearing

The licensing authority may deny, revoke or suspend any license or permit, including renewals and transfers, of any party whose name appears on said list furnished to the licensing authority from the tax collector; provided, however, that written notice is given to the party and the tax collector, as required by applicable provisions of law, and the party is given a hearing, to be held not earlier than fourteen days after said notice. Said list shall be prima facie evidence for denial, revocation or suspension of said license or permit to any party. The tax collector shall have the right to intervene in any hearing conducted with respect to such license denial, revocation or suspension. Any findings made by the licensing authority with respect to such license denial, revocation or suspension shall be

respect to such license denial, revocation or suspension shall be made only for the purposes of such proceeding and shall not be relevant to or introduced in any other proceeding at law, except for any appeal from such license denial, revocation or suspension. Any license or permit denied, suspended or revoked under this section shall not be reissued or renewed until the license authority receives a certificate issued by the tax collector that the party is in good standing with respect to any and all local taxes, fees, assessments, betterments or other municipal charges, payable to the City as of the date of issuance of said certificate.

5.48.030 Payment agreement

Any party shall be given an opportunity to enter into a delinquent tax payment agreement with the Tax Collector, thereby allowing the licensing authority to issue a license. The validity of said license shall be conditioned upon satisfactory compliance with said agreement. Failure to comply with said agreement shall be grounds for the suspension or revocation of said license or permit; provided, however, that the holder be given notice and a hearing as required by law.

5.48.040 Waiver of denial, suspension or revocation

The City Council may waive such denial, suspension or revocation if it finds that the property owner, its officers or stockholders, if any, or members of his immediate family, as defined in G.L. c. 268A, §1(e), has no direct or indirect business

interest in the business or activity conducted in or on said property.

5.48.050 Exclusion of certain licenses and permits

This Chapter shall not apply to the following licenses and permits: open burning, G.L. c. 48, §13; bicycle permits, G.L. c. 85, §11A; sales of articles for charitable purposes, G.L. c. 101, §33; children work permits, G.L. c. 149, §69; clubs, associations dispensing food or beverage licenses, G.L. c. 140, §21E; fishing, hunting, trapping license, G.L. c. 131, §12; marriage licenses, G.L. c. 207, §28; and theatrical events, public exhibition permits, G.L. c. 140, §181 and §183A.

In City Council April 1, 1991.

Passed to be ordained by a yea and nay vote:- Yeas 8; Nays 0; Absent 1.

Robert W. Healy, City Manager.

ATTEST:- Joseph E. Connarton, City Clerk.

ORDINANCE NO. 1120.

Final publication number 2532. First publication in the Chronicle on March 21, 1991.

City of Cambridge

In the Year One Thousand, Nine Hundred Ninety-One

AN ORDINANCE

In amendment to an ordinance entitled the "Cambridge Municipal Code."

Be it ordained by the City Council of the City of Cambridge as follows:

The Cambridge Municipal Code is hereby amended by striking out the existing Chapter 2.84 and substituting in place thereof the following new Chapter 2.84:

Chapter 2.84

Coordinating Council for Children, Youth and Families, also known as "Kids Council."

Sections:

2.84.010 Established

2.84.020 Function and Purpose

2.84.030 Membership - Appointment - Term

2.84.040 Membership - Qualifications

2.84.050 Officers - Quorum - Rules and Regulations - Committees

2.84.060 Executive Director

2.84.070 Powers and Duties

2.84.010 Established

There shall be established in Cambridge a Coordinating Council for Children, Youth and Families (the Council).

2.84.020 Function and Purpose

The Council will direct a comprehensive local response to the needs of children, their families and other caregivers, in accordance with the guiding principles set forth in the Children, Youth and Family Policy Plan. These principles are:

To promote services and other activities that are preventive rather than reactive.

To promote services and other activities that are coordinated rather than fragmented, and that result in improved accessibility.

To encourage innovative responses to needs.

To generate activities that create opportunities for all children, their families, and other caregivers.

To support families, their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.

To promote services and other activities that are comprehensive, oriented to the needs of children and families seen as whole people.

2.84.030 Membership - Appointment - Term

A. Council Members shall be comprised of the following offices, disciplines and interests:

The Mayor

A member of the City Council

A member of the School Committee

The City Manager

The Superintendent of Schools

The Assistant City Manager for Human Services

The Commissioner of Health & Hospitals

A member of the philanthropic community

A representative from a State agency serving children, youth and families

A representative of the corporate/business community

A representative of the university community

A representative from the early childhood community

Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.

Three members shall be identified to serve one year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

B. The Council shall have an Executive Committee comprised of a subset of the Council and including the Chair to enact the business of the full Council between Council meetings.

C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee members shall be appointed by the City Manager with advice and recommendations from the Mayor. All other members shall be appointed by the City Manager with advice and recommendations from the City Council. The City Manager shall consult with groups involved with children and

shall advertise widely to obtain names of qualified candidates.

E. Elected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Member shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

2.84.040 Membership - Qualifications

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

2.84.050 Officers - Quorum - Rules and Regulations - Committees

A. The Council shall meet as often as necessary to conduct

its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chair from among Council Members.

C. Eleven members shall constitute a quorum for the purpose of conducting the business of the Council, and all decisions shall be by majority vote of the Council members present and voting.

D. The Council may adopt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws.

H. The Council shall develop a committee structure. To broaden participation from the community, members of these committees will be a mix of Council Members and the community-at-large. Parents shall be represented on all committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified candidates. The committees will include:

A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

A Development Committee to assist the Council's grant writing and fundraising operations.

A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that coincides with Council priorities will be formed to guide the Council.

2.84.060 Executive Director

A. There shall be an Executive Director of the Council, who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which he or she will receive administrative support.

2.84.070 Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Manager, the City Council, the School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the City Manager and other appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other

groups and organizations to further the intent and purposes of this chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

In City Council April 1, 1991.

Passed to be ordained by a yea and nay vote: Yeas 7; Nays 0; Absent 2.

Robert W. Healy, City Manager.

ATTEST:- Joseph E. Connarton, City Clerk.

ORDINANCE NO. 1120.

Final publication number 2532. First publication in the Chronicle on March 21, 1991.

City of Cambridge

In the Year One Thousand, Nine Hundred Ninety-One

AN ORDINANCE

In amendment to an ordinance entitled the "Cambridge Municipal Code."

Be it ordained by the City Council of the City of Cambridge as follows:

The Cambridge Municipal Code is hereby amended by striking out the existing Chapter 2.84 and substituting in place thereof the following new Chapter 2.84:

Chapter 2.84

Coordinating Council for Children, Youth and Families, also known as "Kids Council."

Sections:

2.84.010 Established

2.84.020 Function and Purpose

2.84.030 Membership - Appointment - Term

2.84.040 Membership - Qualifications

2.84.050 Officers - Quorum - Rules and Regulations - Committees

2.84.060 Executive Director

2.84.070 Powers and Duties

2.84.010 Established

There shall be established in Cambridge a Coordinating Council for Children, Youth and Families (the Council).

2.84.020 Function and Purpose

The Council will direct a comprehensive local response to the needs of children, their families and other caregivers, in accordance with the guiding principles set forth in the Children, Youth and Family Policy Plan. These principles are:

To promote services and other activities that are preventive rather than reactive.

To promote services and other activities that are coordinated rather than fragmented, and that result in improved accessibility.

To encourage innovative responses to needs.

To generate activities that create opportunities for all children, their families, and other caregivers.

To support families, their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.

To promote services and other activities that are comprehensive, oriented to the needs of children and families seen as whole people.

2.84.030 Membership - Appointment - Term

A. Council Members shall be comprised of the following offices, disciplines and interests:

The Mayor

A member of the City Council

A member of the School Committee

The City Manager

The Superintendent of Schools

The Assistant City Manager for Human Services

The Commissioner of Health & Hospitals

A member of the philanthropic community

A representative from a State agency serving children, youth and families

A representative of the corporate/business community

A representative of the university community

A representative from the early childhood community

Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.

Three members shall be identified to serve one year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

B. The Council shall have an Executive Committee comprised of a subset of the Council and including the Chair to enact the business of the full Council between Council meetings.

C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee members shall be appointed by the City Manager with advice and recommendations from the Mayor. All other members shall be appointed by the City Manager with advice and recommendations from the City Council. The City Manager shall consult with groups involved with children and

shall advertise widely to obtain names of qualified candidates.

E. Elected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Member shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

2.84.040 Membership - Qualifications

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

2.84.050 Officers - Quorum - Rules and Regulations - Committees

A. The Council shall meet as often as necessary to conduct

its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chair from among Council Members.

C. Eleven members shall constitute a quorum for the purpose of conducting the business of the Council, and all decisions shall be by majority vote of the Council members present and voting.

D. The Council may adopt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws.

H. The Council shall develop a committee structure. To broaden participation from the community, members of these committees will be a mix of Council Members and the community-at-large. Parents shall be represented on all committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified candidates. The committees will include:

A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

A Development Committee to assist the Council's grant writing and fundraising operations.

A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that coincides with Council priorities will be formed to guide the Council.

2.84.060 Executive Director

A. There shall be an Executive Director of the Council, who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which he or she will receive administrative support.

2.84.070 Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Manager, the City Council, the School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the City Manager and other appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other

groups and organizations to further the intent and purposes of this chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

In City Council April 1, 1991.

Passed to be ordained by a yea and nay vote: Yeas 7; Nays 0; Absent 2.

Robert W. Healy, City Manager.

ATTEST:- Joseph E. Connarton, City Clerk.

OFFICE OF THE CITY CLERK

CITY OF CAMBRIDGE

CITY HALL, CAMBRIDGE, MASSACHUSETTS 02139

(617) 349-4260

JOSEPH E. CONNARTON
CITY CLERK

JOHN E. FLYNN
DEPUTY CITY CLERK

March 25, 1991

Mr. Russell B. Higley
City Solicitor
City Hall
Cambridge, MA

Dear Mr. Higley:

Enclosed you will find copies of proposed amendments to the Municipal Code of the City of Cambridge which were passed to a second reading at the City Council meeting held on March 18, 1991 as follows:

1. Council for Children, Youth and Families, also known as "Kids Council".

2. Licenses and Permits of Delinquent Taxpayers.

Enclosed also you will find a proposed amendment to the Municipal Code for the City of Cambridge regarding Mandatory Recycling which was passed to be ordained at the City Council meeting held on March 18, 1991.

Finally you will find a copy of a proposed amendment to the Zoning Ordinances of the City of Cambridge which failed to be ordained at the City Council meeting held on March 18, 1991.

Would you kindly review these amendments and indicate your approval on the bottom and return to this office.

Your kind attention in this matter will be greatly appreciated.

Sincerely yours,

Joseph E. Connarton
City Clerk

JEC/dl

Encs. First publication number 2529, 2528, Ordinance number 1117 and Unfinished Business Item number three.

c.c. Councillor Duehay, Chairman, Committee on Ordinances
Joseph Cellucci, Inspectional Services Commissioner
Birge Albright, Law Dept.

FIRST PUBLICATION NO. 2529.

City of Cambridge

In the Year One Thousand, Nine Hundred Ninety-One

AN ORDINANCE

In amendment to an ordinance entitled the "Cambridge Municipal Code."

Be it ordained by the City Council of the City of Cambridge as follows:

The Cambridge Municipal Code is hereby amended by striking out the existing Chapter 2.84 and substituting in place thereof the following new Chapter 2.84:

Chapter 2.84

Coordinating Council for Children, Youth and Families, also known as "Kids Council."

Sections:

2.84.010 Established

2.84.020 Function and Purpose

2.84.030 Membership - Appointment - Term

2.84.040 Membership - Qualifications

2.84.050 Officers - Quorum - Rules and Regulations - Committees

2.84.060 Executive Director

2.84.070 Powers and Duties

2.84.010 Established

There shall be established in Cambridge a Coordinating Council for Children, Youth and Families (the Council).

2.84.020 Function and Purpose

The Council will direct a comprehensive local response to the needs of children, their families and other caregivers, in accordance with the guiding principles set forth in the Children, Youth and Family Policy Plan. These principles are:

To promote services and other activities that are preventive rather than reactive.

To promote services and other activities that are coordinated rather than fragmented, and that result in improved accessibility.

To encourage innovative responses to needs.

To generate activities that create opportunities for all children, their families, and other caregivers.

To support families, their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.

To promote services and other activities that are comprehensive, oriented to the needs of children and families seen as whole people.

2.84.030 Membership - Appointment - Term

A. Council Members shall be comprised of the following offices, disciplines and interests:

The Mayor

A member of the City Council

A member of the School Committee

The City Manager

The Superintendent of Schools

The Assistant City Manager for Human Services

The Commissioner of Health & Hospitals

A member of the philanthropic community

A representative from a State agency serving children, youth and families

A representative of the corporate/business community

A representative of the university community

A representative from the early childhood community

Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.

Three members shall be identified to serve one year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

B. The Council shall have an Executive Committee comprised of a subset of the Council and including the Chair to enact the business of the full Council between Council meetings.

C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee members shall be appointed by the City Manager with advice and recommendations from the Mayor. All other members shall be appointed by the City Manager with advice and recommendations from the City Council. The City Manager shall consult with groups involved with children and

shall advertise widely to obtain names of qualified candidates.

E. Elected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Member shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

2.84.040 Membership - Qualifications

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

2.84.050 Officers - Quorum - Rules and Regulations - Committees

A. The Council shall meet as often as necessary to conduct

its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chair from among Council Members.

C. Eleven members shall constitute a quorum for the purpose of conducting the business of the Council, and all decisions shall be by majority vote of the Council members present and voting.

D. The Council may adopt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws.

H. The Council shall develop a committee structure. To broaden participation from the community, members of these committees will be a mix of Council Members and the community-at-large. Parents shall be represented on all committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified candidates. The committees will include:

A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

A Development Committee to assist the Council's grant writing and fundraising operations.

A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that coincides with Council priorities will be formed to guide the Council.

2.84.060 Executive Director

A. There shall be an Executive Director of the Council, who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which he or she will receive administrative support.

2.84.070 Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Manager, the City Council, the School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the City Manager and other appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other

groups and organizations to further the intent and purposes of this chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

Passed to a second reading as amended at the City Council meeting held on March 18, 1991 and on or after April 1, 1991 the question comes on passing to be ordained.

ATTEST:- Joseph E. Connarton, City Clerk.

FIRST PUBLICATION NO. 2528.

City of Cambridge

In the Year One Thousand, Nine Hundred Ninety - One

AN ORDINANCE

In amendment to an ordinance entitled the "Cambridge Municipal Code."

Be it ordained by the City Council of the City of Cambridge as follows:

In accordance with G.L. c. 40, §57, as added by St. 1985, c. 640, which was accepted by the City Council on September 11, 1989, Title 5 of the Code (Business Licenses and Regulations) is hereby amended by adding the following new Chapter 5.48 (Licenses and Permits of Delinquent Taxpayers):

Chapter 5.48

Licenses and Permits of Delinquent Taxpayers

Sections

5.48.010 Tax Collector to furnish list of delinquent taxpayers

5.48.020 Revocation of license of delinquent taxpayer; Notice and Hearing

5.48.030 Payment agreement

5.48.040 Waiver of denial, suspension or revocation

5.48.050 Exclusion of certain licenses and permits

5.48.010 Tax Collector to furnish list of delinquent taxpayers

The Assistant City Manager for Fiscal Affairs, as the Cambridge official responsible for records of all municipal taxes, assessments, betterments and other municipal charges (hereinafter

referred to as the "Tax Collector"), shall annually furnish to each city department, board, commission or division which issues licenses or permits, including renewals and transfers, (hereinafter referred to as the "licensing authority") a list of all persons, corporations, partnerships or other business enterprises which have neglected or refused to pay any local taxes, fees, assessments, betterments or other municipal charges for not less than a twelve-month period and which have not filed in good faith a pending application for an abatement of such tax or a pending petition before the appellate tax board. (Such persons, corporations, partnerships or other business enterprises shall hereinafter be referred to as "parties").

5.48.020 Revocation of license of delinquent taxpayer; Notice and hearing

The licensing authority may deny, revoke or suspend any license or permit, including renewals and transfers, of any party whose name appears on said list furnished to the licensing authority from the tax collector; provided, however, that written notice is given to the party and the tax collector, as required by applicable provisions of law, and the party is given a hearing, to be held not earlier than fourteen days after said notice. Said list shall be prima facie evidence for denial, revocation or suspension of said license or permit to any party. The tax collector shall have the right to intervene in any hearing conducted with respect to such license denial, revocation or suspension. Any findings made by the licensing authority with respect to such license denial, revocation or suspension shall be

respect to such license denial, revocation or suspension shall be made only for the purposes of such proceeding and shall not be relevant to or introduced in any other proceeding at law, except for any appeal from such license denial, revocation or suspension. Any license or permit denied, suspended or revoked under this section shall not be reissued or renewed until the license authority receives a certificate issued by the tax collector that the party is in good standing with respect to any and all local taxes, fees, assessments, betterments or other municipal charges, payable to the City as of the date of issuance of said certificate.

5.48.030 Payment agreement

Any party shall be given an opportunity to enter into a delinquent tax payment agreement with the Tax Collector, thereby allowing the licensing authority to issue a license. The validity of said license shall be conditioned upon satisfactory compliance with said agreement. Failure to comply with said agreement shall be grounds for the suspension or revocation of said license or permit; provided, however, that the holder be given notice and a hearing as required by law.

5.48.040 Waiver of denial, suspension or revocation

The City Council may waive such denial, suspension or revocation if it finds that the property owner, its officers or stockholders, if any, or members of his immediate family, as defined in G.L. c. 268A, §1(e), has no direct or indirect business

interest in the business or activity conducted in or on said property.

5.48.050 Exclusion of certain licenses and permits

This Chapter shall not apply to the following licenses and permits: open burning, G.L. c. 48, §13; bicycle permits, G.L. c. 85, §11A; sales of articles for charitable purposes, G.L. c. 101, §33; children work permits, G.L. c. 149, §69; clubs, associations dispensing food or beverage licenses, G.L. c. 140, §21E; fishing, hunting, trapping license, G.L. c. 131, §12; marriage licenses, G.L. c. 207, §28; and theatrical events, public exhibition permits, G.L. c. 140, §181 and §183A.

Passed to a second reading at the City Council meeting held on March 18, 1991 and on or after April 1, 1991 the question comes on passing to be ordained.

ATTEST:- Joseph E. Connarton, City Clerk.

ORDINANCE NO. 1117.

Final publication No. 2527. First publication in the Chronicle on March 7, 1991.

City of Cambridge

In the Year One Thousand, Nine Hundred Ninety-One

AN ORDINANCE

In amendment to an ordinance designated as the "Cambridge Municipal Code."

WHEREAS The City of Cambridge now disposes of its solid waste by landfilling at sites that have a short remaining useful life;

WHEREAS The Commonwealth of Massachusetts has scheduled landfill disposal bans of various materials, i.e., leaf waste by the end of 1991; yard waste, recyclable aluminum, metals and glass by the end of 1992; and all grades of recyclable paper and single polymer plastics by the end of 1994;

WHEREAS The potential solution to the impending solid waste disposal problem is through reduction of the amount of solid waste by reducing the amount of solid waste generated and by recycling recyclable materials to the fullest extent possible;

WHEREAS Public support for recycling has been demonstrated through the City's volunteer driven monthly drop-off program, collecting newspaper, aluminum, glass and plastic, which diverted from the municipally collected waste stream approximately 210 tons in 1989 and approximately 925 tons in 1990.

THEREFORE be it declared by the City Council of Cambridge that the following policies are hereby adopted by the City of Cambridge with respect to management of the solid waste disposal problem, for the promotion of the health and welfare of its citizens and for the protection of the environment:

1. The City of Cambridge hereby declares its goal of encouraging all residents, municipal offices, commercial businesses, and nonprofit institutions to reduce the amount of solid waste they produce by reducing the amount of solid waste generated and by recycling recyclable materials to the fullest extent possible.

2. The City of Cambridge further declares its goal of reducing the municipally collected solid waste stream by diversion of a substantial portion from landfilling by source reduction and by productive use through recycling recyclable materials to the fullest extent possible.

3. The City of Cambridge declares that its recycling diversion target is 15% of the total municipally collected solid waste stream within two years from the initiation of a curbside collection program, and 25% of the municipally collected solid waste stream within five years.

4. The City of Cambridge further declares that implementation of these policies shall proceed, within the bounds of sound fiscal management and in contemplation of advances in solid waste management technology, in an orderly fashion and with all due speed.

THEREFORE, IN CONSIDERATION OF THE FOREGOING, BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF CAMBRIDGE AS FOLLOWS:

Chapter 8.24 of the Code (Rubbish, Garbage and Litter) is hereby amended by striking out section 8.24.070 and substituting therefor the following new section 8.24.070 (Mandatory recycling):

8.24.070 Mandatory Recycling

A. Purpose and Declaration of Policy

B. Establishment of program

C. Definitions

D. Mandatory separation of recyclable materials

E. Collection of recyclable materials

F. Recycling plans

G. Recyclable materials

H. Recycling advisory committee

I. Rules and regulations

J. Enforcement and penalties

K. Repeal of inconsistent laws

L. Severability

M. Effective date of this section

A. Purpose and declaration of policy

This section has been created because of the great interest of the people of Cambridge in preserving the environment by reducing the amount of refuse sent to landfills and incinerators. It shall be the policy of the City of Cambridge to reduce the amount of solid waste generated and to require the recycling of recyclable materials to the fullest extent possible.

B. Establishment of program

There is hereby established a program for the mandatory separation of certain recyclable materials from refuse which shall apply to all buildings in Cambridge, and shall be carried out under the supervision of the Commissioner of the Cambridge Department of Public Works (DPW).

C. Definitions

The following definitions shall apply in this section:

1. Aluminum - Aluminum cans, aluminum foil, and aluminum containers or trays used in packaging, preparation or cooking of food.

2. Cans - All containers composed in whole of iron or steel (so-called tin cans) used as containers for the packaging or storage of various food and non-food items, except containers that contain paint or petroleum based solvents, and any pressurized aerosol cans.

3. Commercial establishment - Any non-residential building, including, but not limited to, those used for retail, wholesale, industrial, manufacturing, dining, offices, professional services,

automobile service, hotels and motels, restaurants, or shipping and receiving areas.

4. Corrugated cardboard - Paper in which a portion has been made to have a wavy surface (alternating ridges and grooves) and is placed between two flat surfaces for the sake of strenghth, and which is commonly used to form cartons.

5. Glass - Bottles and jars, made of silica, sand, soda ash, and limestone, being transparent or translucent, and used for packaging or bottling of various materials. This does not include plastics or glass products such as window glass, blue glass, flat glass, mirrors, plate glass, light bulbs, dishes or ceramics.

6. Leaves - Deciduous and coniferous seasonal deposition.

7. Multi-family dwelling - Any place of residence with ten or more dwelling units, including apartments, cooperatives, condominiums, group houses, rooming houses or boarding houses.

8. Newspapers - Newsprint-grade paper, the common, inexpensive machine-finished paper made chiefly from wood pulp, which is printed and distributed, and includes all newspaper advertisements, comics and enclosures. This does not include newspapers soiled by food, paint, petroleum products, oil or oil solvents, or other solid wastes that are not recyclable.

9. Nonprofit organization - An established organization or foundation dedicated to public service or culture, including, but not limited to, religious, educational, and health care functions.

10. Occupier of land - Any owner, lessee or tenant of any residential dwelling, commercial establishment or nonprofit

organization in Cambridge.

11. Paper Leaf Bag - A paper leaf bag shall be a Sanitary Kraft Paper Sack or equal of thirty (30) gallon capacity, two (2) ply fifty (50) pound wet strength with decomposing glue and reinforced self-supporting square bottom closure.

12. Plastics - Clear and colored bottles and jugs made from high density polyethylene (HDPE) and polyethylene terephythalate (PET) plastics, excluding caps and lids.

14. Recyclable materials - Any type of refuse designated by the Cambridge Commissioner of Public Works through rules and regulations issued under this section to be separated for recycling.

15. Refuse - All solid waste generated by occupiers of land in Cambridge.

16. Residential dwelling - Any residential building, including single-family homes, apartment buildings, buildings containing cooperatives and condominiums, group houses, rooming houses or boarding houses.

17. Sorted office paper - Printed or unprinted sheets, shavings and cuttings of colored or white sulphite or sulphate ledger, bond, writing and other papers which have a similar fiber and filler content, and which are free of treated, coated, padded and heavily printed paper, carbon paper and non-paper materials.

18. Yard waste - Grass clippings, weeds, hedge clippings, garden waste, and twigs and brush not longer than two feet in length and one half inch in diameter.

19. White goods - Major kitchen and laundry appliances including, but not limited to stoves, washers, refrigerators and dryers. Nothing in this definition shall waive compliance with the rules and regulations for the generation, transportation, storage and disposal of hazardous waste.

D. Mandatory separation of recyclable materials

It shall be mandatory for each occupier of land in Cambridge to separate all designated recyclable materials from other refuse in accordance with the provisions of this section.

The timetable for compliance shall be as follows:

1. Buildings which receive City solid waste collection services

On and after the effective date of this section, it shall be mandatory for each owner, lessee or tenant of a building which receives City solid waste collection services to separate from other refuse all recyclable materials designated by the Commissioner in rules and regulations issued under this section, provided, however, that this requirement shall be delayed with regard to owners, lessees or tenants of multi-family dwellings. Owners of multi-family dwellings shall submit a recycling plan to the Commissioner or his or her designee in accordance with subsection F. This requirement shall also apply to all City-owned buildings, including schools.

2. Buildings which do not receive City solid waste collection services

It shall be mandatory for each owner, lessee or tenant of a building which does not receive City solid waste collection to

separate all designated recyclable materials from other refuse in accordance with a recycling plan to be submitted to the Commissioner or his or her designee, in accordance with subsection F.

E. Collection of recyclable materials

1. Buildings which receive City solid waste collection services

a) In buildings which receive City solid waste collection services, the materials designated for recycling in rules and regulations promulgated by the Commissioner shall be placed in recycling receptacles provided by the City.

During the leaf and yard waste collection season, residents shall place their leaves and yard waste in Paper Leaf Bags (as defined in subsection C), open barrels or boxes to be provided by the resident.

b) The City shall retain ownership of all its recycling receptacles and the owner, lessee or tenant of the building shall take proper care to protect such receptacle from loss or damage. If the receptacle is lost, it shall be the responsibility of the owner or owners of the building to obtain a suitable replacement within 75 days.

c) The preparation and placement of recyclables shall be accomplished in accordance with rules and regulations to be issued by the Commissioner under this section.

d) All recycling containers and receptacles shall be placed for collection on the outer edge of the sidewalk, so as not to obstruct the free passage of pedestrians, or in such other place

and on days specified by the Commissioner in rules and regulations to be issued under this section.

e) Recyclables shall not be placed in plastic garbage bags for collection, removal or disposal. Recyclables shall not be placed in the same refuse containers as other solid waste or mixed with other forms of solid waste for collection, removal or disposal. If separation of recyclable materials from other refuse does not take place, the City may decide not to collect said other refuse.

f) Upon placement of recyclables for the City or its contractor at the curbside, pursuant to this subsection, such recyclables shall become the property of the City. It shall be a violation of this section if any person, other than authorized agents of the City acting in the course of their employment or contract, collects or causes to be collected any recyclables so placed. Each and every such collection in violation hereof from one or more locations shall constitute a separate and distinct offense. In addition to the penalty provided in subsection J, any violator of this subsection E shall make restitution to the City for the value of recyclables illegally removed.

2. Buildings which do not receive City solid waste collection services

In buildings which do not receive City solid waste collection services, the materials designated for recycling in rules and regulations promulgated by the Commissioner shall be placed in recycling receptacles provided by the owner or owners of such building. The Owner or owners of such buildings shall be

responsible for the costs of recyclables separation and collection. Any savings in solid waste disposal realized due to recycling shall accrue to the owner or owners of such buildings.

The owner or owners of such buildings shall submit recycling plans to the Commissioner in accordance with subsection F. The Commissioner shall have the authority to require documentation from the City's recyclables collection contractors and from any owner, lessee or tenant of a building which does not receive City solid waste collection services, that recyclables are being delivered to a broker or end market that causes the material to be recycled or composted rather than landfilled or incinerated.

F. Recycling plans

1. All property owners required to submit recycling plans to the Commissioner shall do so within six months of the effective date of this section. The owner or owners may request in writing from the Commissioner an extension of up to six months, which shall be granted. No further extensions shall be granted. Seperation and collection of recyclables in such building shall begin within 120 days of plan approval by the Commissioner.

2. Contents of plan

Each recycling plan will cover the following items:

a) Which recyclables will be put out for collection

b) Frequency of collection

c) Methods to be used for collection, including types of containers

d) Any other items which may be specified in rules and regulations promulgated by the Commissioner under this section.

Plans shall be submitted in a format to be specified in rules and regulations promulgated by the Commissioner under this section.

G. Recyclable materials

The recyclable materials to be separated shall be designated by the Commissioner in rules and regulations to be issued under this section.

H. Recycling advisory committee

There is hereby established a Recycling Advisory Committee. The Committee, as requested, shall provide advice, assistance and recommendations to the Commissioner regarding the recycling program.

The Committee shall be appointed by the City Manager, and shall consist of at least 9 persons with a demonstrated interest in recycling, at least six of whom are residents of Cambridge. At least one member shall be chosen from volunteers in the City's monthly recycling drop-off program, one member shall represent the private real estate industry (apartment management), and one member shall be a designee of the Cambridge Housing Authority. One member shall represent the business community, and one member shall represent non-profit institutions. The term shall be three years.

The Commissioner, or his or her designee, shall be an ex-officio member of the Committee.

I. Rules and regulations

The Commissioner, with the approval of the City Manager, may promulgate rules and regulations for the implementation of this

section.

J. Enforcement and penalties

Whoever violates any provision of this section, including any rule or regulation promulgated under subsection G., may be penalized by a noncriminal disposition as provided in G.L. c. 40, S. 21D. For purposes of this section, the following officials shall be enforcing persons: designated staff of the Cambridge Department of Public Works. The penalty for each violation shall be $25.00.

A penalty will be assessed under this section only after the violator receives a written warning regarding the violation indicating the method of correction.

K. Repeal of inconsistent laws

All ordinances, resolutions, regulations or other documents inconsistent with the provisions of this section are hereby repealed to the extent of such inconsistency.

L. Severability

This section and the various parts, sentences and clauses thereof are hereby declared to be severable. If any part, sentence or clause is adjudged to be invalid, the remainder of this section shall not be affected thereby.

M. Effective date of this section

This §8.24.070 shall take effect when notice of the effective date is published by the Commissioner in a newspaper of general circulation in Cambridge.

In City Council March 18, 1991.
Passed to be ordained by a yea and nay vote:- Yeas 8; Nays 0; Absent 1.
ATTEST:- Joseph E. Connarton, City Clerk.

Robert W. Healy, City Manager.

UNFINISHED BUSINESS ITEM #3

City of Cambridge

In the Year One Thousand, Nine Hundred Ninety-One

AN ORDINANCE

Be it ordained by the City Council of the City of Cambridge as follows:

That the Zoning Ordinances of the city of Cambridge be amended as follows:

By amending the text of Article 7.000 - Signs and Illuminations by replacing the current regulations relative to signs with a new sign ordinances.

The purpose of the amendment is to limit the size of individual signs and tighten the circumstances under which damaged nonconforming signs can be replaced. The following is a list of the proposed modifications: reduce the total signage allowed on a lot, further reduce the size of freestanding and projecting signs, cap the size of wall signs, limit the circumstances under which internally illuminated signs can be employed, prohibit such illumination for freestanding and projecting signs, make the regulations uniform for all nonresidential districts, require the removal of some of the more visually offensive nonconforming signs, modify the currrent mechanism for review of the design of proposed signs and limit the height of all signs.

In City Council March 18, 1991.

Failed of ordination by a yea and nay vote: Yeas 4; Nays 2; Absent 1 Present 2.

ATTEST:- Joseph E. Connarton, City Clerk

NOTE: Pursuant to the provisions of General Laws, Chapter 43, Section 23, Tercentenary Edition, being a part of the City Charter, the Ordinances as aforesaid, which exceed in length eight octavo pages of ordinary book print may be examined at the Office of the City Clerk in the form of a printed pamphlet curing office hours on or after March 4, 1991.

ATTEST:- Joseph E. Connarton, City Clerk.

FIRST PUBLICATION NO. 2529.

City of Cambridge

In the Year One Thousand, Nine Hundred Ninety-One

AN ORDINANCE

In amendment to an ordinance entitled the "Cambridge Municipal Code."

Be it ordained by the City Council of the City of Cambridge as follows:

The Cambridge Municipal Code is hereby amended by striking out the existing Chapter 2.84 and substituting in place thereof the following new Chapter 2.84:

Chapter 2.84

Coordinating Council for Children, Youth and Families, also known as "Kids Council."

Sections:

2.84.010 Established

2.84.020 Function and Purpose

2.84.030 Membership - Appointment - Term

2.84.040 Membership - Qualifications

2.84.050 Officers - Quorum - Rules and Regulations - Committees

2.84.060 Executive Director

2.84.070 Powers and Duties

2.84.010 Established

There shall be established in Cambridge a Coordinating Council for Children, Youth and Families (the Council).

2.84.020 Function and Purpose

The Council will direct a comprehensive local response to the needs of children, their families and other caregivers, in accordance with the guiding principles set forth in the Children, Youth and Family Policy Plan. These principles are:

To promote services and other activities that are preventive rather than reactive.

To promote services and other activities that are coordinated rather than fragmented, and that result in improved accessibility.

To encourage innovative responses to needs.

To generate activities that create opportunities for all children, their families, and other caregivers.

To support families, their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.

To promote services and other activities that are comprehensive, oriented to the needs of children and families seen as whole people.

2.84.030 Membership - Appointment - Term

A. Council Members shall be comprised of the following offices, disciplines and interests:

The Mayor

A member of the City Council

A member of the Schcol Committee

The City Manager

The Superintendent of Schools

The Assistant City Manager for Human Services

The Commissioner of Health & Hospitals

A member of the philanthropic community

A representative from a State agency serving children, youth and families

A representative of the corporate/business community

A representative of the university community

A representative from the early childhood community

Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.

Three members shall be identified to serve one year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

B. The Council shall have an Executive Committee comprised of a subset of the Council and including the Chair to enact the business of the full Council between Council meetings.

C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee members shall be appointed by the City Manager with advice and recommendations from the Mayor. All other members shall be appointed by the City Manager with advice and recommendations from the City Council. The City Manager shall consult with groups involved with children and

shall advertise widely to obtain names of qualified candidates.

E. Elected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Member shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

2.84.040 Membership - Qualifications

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

2.84.050 Officers - Quorum - Rules and Regulations - Committees

A. The Council shall meet as often as necessary to conduct

its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chair from among Council Members.

C. Eleven members shall constitute a quorum for the purpose of conducting the business of the Council, and all decisions shall be by majority vote of the Council members present and voting.

D. The Council may adcpt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws.

H. The Council shall develop a committee structure. To broaden participation from the community, members of these committees will be a mix of Council Members and the community-at-large. Parents shall be represented on all committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified candidates. The committees will include:

A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

A Development Committee to assist the Council's grant writing and fundraising operations.

A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that coincides with Council priorities will be formed to guide the Council.

2.84.060 Executive Director

A. There shall be an Executive Director of the Council, who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which he or she will receive administrative support.

2.84.070 Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Manager, the City Council, the School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the City Manager and other appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other

groups and organizations to further the intent and purposes of this chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

Passed to a second reading as amended at the City Council meeting held on March 18, 1991 and on or after April 1, 1991 the question comes on passing to be ordained.

ATTEST:- Joseph E. Connarton, City Clerk.

FIRST PUBLICATION NO. 2529.

City of Cambridge

In the Year One Thousand, Nine Hundred Ninety-One

AN ORDINANCE See Corrected copy

In amendment to an ordinance entitled the "Cambridge Municipal Code."

Be it ordained by the City Council of the City of Cambridge as follows:

The Cambridge Municipal Code is hereby amended by striking out the existing Chapter 2.84 and substituting in place thereof the following new Chapter 2.84:

Chapter 2.84

Coordinating Council for Children, Youth and Families, also known as "Kids Council."

Sections:

2.84.010 Established

2.84.020 Function and Purpose

2.84.030 Membership - Appointment - Term

2.84.040 Membership - Qualifications

2.84.050 Officers - Quorum - Rules and Regulations - Committees

2.84.060 Executive Director

2.84.070 Powers and Duties

2.84.010 Established

There shall be established in Cambridge a Coordinating Council for Children, Youth and Families (the Council).

2.84.020 Function and Purpose

The Council will direct a comprehensive local response to the needs of children, their families and other caregivers, in accordance with the guiding principles set forth in the Children, Youth and Family Policy Plan. These principles are:

To promote services and other activities that are preventive rather than reactive.

To promote services and other activities that are coordinated rather than fragmented, and that result in improved accessibility.

To encourage innovative responses to needs.

To generate activities that create opportunities for all children, their families, and other caregivers.

To support families, their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.

To promote services and other activities that are comprehensive, oriented to the needs of children and families seen as whole people.

2.84.030 Membership - Appointment - Term

A. Council Members shall be comprised of the following offices, disciplines and interests:

The Mayor

A member of the City Council

A member of the School Committee

The City Manager

The Superintendent of Schools

The Assistant City Manager for Human Services

The Commissioner of Health & Hospitals

A member of the philanthropic community

A representative from a State agency serving children, youth and families

A representative of the corporate/business community

A representative of the university community

A representative from the early childhood community

Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.

Three members shall be identified to serve one year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

B. The Council shall have an Executive Committee comprised of a subset of the Council and including the Chair to enact the business of the full Council between Council meetings.

C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee members shall be appointed by the City Manager with advice and recommendations from the Mayor. All other members shall be appointed by the City Manager with advice and recommendations from the City Council. The City Manager shall consult with groups involved with children and

shall advertise widely to obtain names of qualified candidates.

E. Elected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Member shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

2.84.040 Membership - Qualifications

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

2.84.050 Officers - Quorum - Rules and Regulations - Committees

A. The Council shall meet as often as necessary to conduct

its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chair from among Council Members.

C. Eleven members shall constitute a quorum for the purpose of conducting the business of the Council, and all decisions shall be by majority vote of the Council members present and voting.

D. The Council may adopt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws.

H. The Council shall develop a committee structure. To broaden participation from the community, members of these committees will be a mix of Council Members and the community-at-large. Parents shall be represented on all committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified candidates. The committees will include:

A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

A Development Committee to assist the Council's grant writing and fundraising operations.

A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that coincides with Council priorities will be formed to guide the Council.

2.84.060 Executive Director

A. There shall be an Executive Director of the Council, who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which he or she will receive administrative support.

2.84.070 Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Manager, the City Council, the School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the City Manager and other appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other

groups and organizations to further the intent and purposes of this chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

Passed to a second reading as amended at the City Council meeting held on March 18, 1991 and on or after ~~March 31, 1991~~ April 1, 1991 the question comes on passing to be ordained.

ATTEST:- Joseph E. Connarton, City Clerk.

City of Cambridge
Children, Youth and Family Policy Plan

I. BACKGROUND

This policy launches a ***comprehensive*** effort to respond to the needs of children, youth and families in Cambridge. For over a decade now Americans have been alerted, upbraided, and prodded to do something about the state of their children. Numerous reports and studies have documented the disproportionate negative impacts on poor children in general and children, youth and families of color in particular. One in five children now lives in a family with income below the federal poverty line. The number of these children who are unhealthy, malnourished, undereducated and who may be unemployable in the future is high and on the rise. The prospects of middle and upper class children, too, have been undercut during this time. High and climbing rates of divorce and mobility, widespread alcohol and other drug abuse --among many troubles--have left a wide range of children vulnerable, stranded, unprepared for adult life.

These problems are national problems demanding national solutions. But they are also problems of state and local governments, and of individual citizens. Over the last decade numerous cities have assumed responsibility for counteracting the problems besetting children. For example, Seattle has made children a high priority, focusing the efforts of city agencies on children and spurring a wide range of innovative programs for youth. Hartford has drawn together an impressive array of community interests and resources in driving down a high rate of infant mortality. Minneapolis has established a Youth Coordinating Board to enhance and promote the healthy, comprehensive development of children and youth through collaborative action. Cambridge, through a community meeting process, has established long-range goals for its children (See Attachment A).

What warrants such a policy now? The circumstances of Cambridge children are not as dire as those of children in many other cities. Cambridge has great strengths. More than 140 non-profit and public service organizations provide educational and human services to Cambridge residents. Fifty-two organizations devote all or part of their work to youth alone. For many years schools and community organizations in Cambridge have worked together closely and effectively, allowing students access to a wide array of resources.

Yet, as in other cities, large and growing numbers of Cambridge children are undermined by poverty, drugs, illiteracy, threats to health, abuse and neglect. While Cambridge expanded economically over the last decade, the poverty rate among children continued to climb. By 1986, almost one in four children in the City were living in poverty, significantly above the national average. The Cambridge Food Pantry network estimates that one in five Cambridge children suffer from hunger part of each month, and approximately 1,800 families per month request emergency food assistance. Escalating and unaffordable housing costs continue to strain Cambridge families. According to a 1987 study conducted by Abt Associates, 36% of Cambridge renters pay more than 40% of income for housing. This percentage has likely increased since the study was released. Twenty-five percent of Cambridge teen mothers receive inadequate or no prenatal care--markedly higher than the state average of 10.9%. Cambridge School Department officials report a school drop out rate of 22%.

Mental health problems are reported to be afflicting children at increasingly younger ages, and the number of seriously dysfunctional families, mental health workers report, has seriously climbed. Child care has also become prohibitively expensive for many Cambridge families, forcing parents to choose between placing their children in unlicensed care or leaving their jobs.

Further, while Cambridge is rich in services, the service-delivery system does have some weaknesses:

* **Services often function independently of each other:** Clients can find themselves lost in a maze of valuable but disconnected programs.

* **Cambridge lacks adequate preventive services:** Like other cities, services tend to be crisis-oriented, responding to problems after they have become difficult, if not impossible, to reverse.

* **Residents lack access to services:** As community life becomes more impersonal, some residents simply lack information about existing services. Many are obstructed by language barriers or are denied access because of inadequate transportation.

* **There are only a few comprehensive efforts involving many sectors of the community:** A comprehensive effort should include local government, community leaders and organizations, school administrators and staff, health professionals, and parents.

In addition to mounting problems among children and these service limitations, children's services have fallen victim to downturns in the national and state economies. The result is that the system of services, which has taken decades to build, is chipped away, leaving children at greater risk than ever before. Children need and deserve a firm commitment of public support that does not fluctuate and erode according to economic times. This policy puts forth such a commitment for children and their families in Cambridge.

II. STRATEGY/APPROACH

This policy begins to address the above-mentioned problems and issues through several strategies and approaches:

Strategies

* **Prevention:**
  First and foremost, it is a prevention policy. It sets forth goals and creates a framework for greatly reducing the number of Cambridge children who will at some point develop serious difficulties. In keeping with its prevention focus, it seeks initially to direct resources and energies toward prenatal, newborn, and early childhood (age 0 - 8) years.

* **Coordination and improving access:**
  It suggests ideas for better coordinating and improving access to services. Recognizing the outstanding array of services in Cambridge, the Policy Plan seeks to harness the expertise and participation of all providers.

* **Building a framework:**
  It seeks to build an improved framework for responding to those children who already have pressing problems - children who now require services.

* **Increasing opportunities:**
  It is not focussed solely on childrens' problems, deficits and needs: rather, it seeks to generate activities that create opportunities for all children, that affirm childrens' strengths, that enhance the sense of safety and security of all children, and that give children real hope for the future.

* **Generate ideas:**
  It generates ideas for tending to the needs of all Cambridge children regardless of economic status and ethnic origin - recognizing that problems like alcohol and other drug abuse, teen pregnancy, and family violence are not problems of any one

segment of Cambridge alone -- and seeks to foster a climate and opportunities that allow all Cambridge children to thrive.

The starting point in pursuing these strategies is a careful focus on the needs of the child. The strategies need to begin with and to return again and again to the needs of children themselves. These strategies should also have as a starting point the assumption that parents should be supported and strengthened in their efforts--not blamed--for their childrens' difficulties. Services need to reinforce and empower parents' natural strengths and resiliencies. Children do best in a family that is healthy and thriving.

In addition, efforts on behalf of children should capitalize on Cambridges' many strengths. Cambridge is astonishingly diverse--its students originate in 64 countries and speak 46 languages--and children in Cambridge have unique opportunities to learn about and build bridges between their own cultures and others. These efforts should draw on the capacity of its activist community to respond to community needs. These efforts should also tap the resources of Cambridge's universities, draw on the wisdom of the many experts on childrens' services and child welfare in Cambridge and the surrounding area, as well as draw on the knowledge of experts around the country. Finally, those pursuing these efforts should look to exemplary efforts in other cities.

Approaches

In implementing this policy, the approach is to encourage services to children, youth, and families in Cambridge that are preventive rather than reactive; coordinated rather than fragmented; innovative rather than driven by existing service structures; comprehensive, oriented to the needs of children and families seen as whole people; supportive of families, their choices, and their strengths; and responsive to the needs of all families as well as to the different needs of different families.

*Services that are preventive rather than reactive:

Much research evidence suggests that preventive services to young children are the most cost-effective way to encourage healthy development and avoid bad outcomes later in life. For example, excellent programs for early childhood education have been shown to increase school completion rates and reduce rates of teen pregnancy and delinquency in adolescence. According to the General Accounting Office (1990), every $1 spent on pre-natal care saves $4 to $6 in costs for hospital care of undernourished infants, welfare, food stamps, and special-education programs for children born unhealthy.

Many excellent programs in Cambridge already build on this foundation of research evidence. For example, the city's Head Start, Early Intervention, and Visiting Nurse programs reach young, at-risk children with excellent services. However, many children who need these services never get them, or get them later than they should because of long waiting lists.

Therefore, the policy implementation must emphasize strengthening and expanding a preventive approach to children's services with the initial focus on prenatal, newborn and early childhood years.

***Services that are coordinated rather than fragmented:**

When a family in Cambridge needs help with (for example) getting health care for an ill child, locating suitable child care, and finding an apartment that will take children, the parents may feel as though they are trying to find their way through a bureaucratic maze. Different services are provided by different public or private agencies, located in different buildings, staffed by workers with different specialties or expertise, and available to families and children based on different and confusing eligibility requirements. Studies of effective programs for children and youth at-risk suggest, not surprisingly, that these bureaucratic barriers pose the biggest problems to those families who need services the most - and that the programs that work best have staff who are willing to go the extra step and help families get through the maze.

Again, many excellent programs in Cambridge have made a start at this kind of coordination despite the formidable barriers posed by funding sources and regulations from higher levels of government. For example, the WIC program has co-located offices with community health services so that a mother with young children can take her children to the pediatrician and receive her WIC nutrition coupons in the same place. The Bigelow Street Family Shelter has coordinated with the city's Community Learning Center to provide literacy and basic education to homeless mothers during their stay at the shelter facility.

This coordination will be a key component of this policy implementation, taking coordination as far as it can go, challenging providers to link programs so that they best serve the families who need them. One possible approach to coordination, at least for some families, might be a neighborhood service center which offers access to the services a family might need in one place.

* **Services that are innovative rather than driven by existing service structures:**

The world surrounding families and children is changing, and programs to support them are changing with it. The number of single parents has increased dramatically. Among single female headed households and married couple families, many more mothers now work while their children are young, requiring that both businesses and service providers consider what it means to balance the roles of parent and provider. Some businesses have responded to these changes with innovations such as parental leave, child care vouchers, and provisions for ill child care; schools have had to learn how to encourage and stimulate parent involvement when a parent is unavailable for parent-teacher conferences or classroom activities during the traditional school day; Head Start programs, which have traditionally provided excellent preschool programs for part of the day, have started to consider full-day programs.

Under this policy, the City would encourage innovative responses to this and other changes in the circumstances of families and children, innovations that so far as possible respond to the whole life circumstances of the family. Innovative responses does not necessarily mean creating new services but can be accomplished by augmenting existing services.

* **Services that are comprehensive, oriented to the needs of children and families seen as whole people:**

One special category of innovation that holds particular promise for many children and families is innovation to serve children and families in comprehensive ways. These innovative programs work precisely because they do not artificially isolate a health problem from an educational problem or isolate the mother or father's need from the child's need. Examples of such innovative programs include:

*PACE (Parent and Child Education): Started in Kentucky, it is a program that combines an adult education program for mothers without a high school diploma with an excellent preschool program for the children. The program has been widely replicated; much of its appeal is the effect on the whole family when two members become excited and involved in education.

*Family Support Programs: Based in neighborhood drop-in centers offer families a chance to pick and choose the services they would like - from parent support groups to play groups to counseling to drop-in child care - and to link up to a

comprehensive range of services through referral. Several states are experimenting with such programs as an approach to supporting children and families comprehensively but not intrusively.

* **Services that are supportive of families, their choices and their strengths:**

Bringing up children today is hard for all families. Families in Cambridge struggle with how to keep a job and care for a sick child; how to find child care that is reliable and high quality; how to strengthen a child's ability to make responsible decisions about drugs; how to encourage a child to believe he or she can succeed in school; and in general how to bring children up to be healthy, responsible, and productive adults in a world that too often seems not to listen to parents or to children.

Under this policy, the City will recognize diversity and encourage programs that support the many different choices that families make about how to bring up happy and healthy children and that recognize the strengths of families as well as the burdens on them. For example, a parent caring for an emotionally disturbed child at home will need respite care to support them in their choice to be a primary caretaker. Other parents may seek out of home placement for their child and will need assistance in selecting the best option for their family.

* **Services that are responsive to the needs of all families, as well as to the different needs of different families:**

Under this policy, the City will encourage programs that respond to needs that <u>all</u> families experience - needs like open space for children to play in, affordable and high quality child care, and help talking to children about how to make responsible decisions about drugs and other issues. In assessing budget priorities, those that meet children's needs will be given high priority.

At the same time, the City will pay special attention in committing resources to the needs of those families who are bringing up children with the least support, social and economic, and who are therefore most vulnerable and at risk. For example, the policy will encourage programs that reach out to families who are members of diverse racial, linguistic and ethnic communities; to low-income families; and to young mothers and their children. For example, one program recommended by a citizen study group would

provide home visits through the Visiting Nurse Association to all teen mothers with infants in Cambridge.

III. IMPLEMENTATION

In order to implement and support the strategies and approaches identified in this policy plan, the City of Cambridge will create a Council called the "Coordinating Council for Children, Youth and Families (The Kids' Council)," charged with directing a comprehensive, local response to the needs of children, youth, their families and other caregivers.

Some of the specific duties of the Council will include: recommending children, youth and family policy to the City Council, School Committee, and other appropriate committees; mobilizing and coordinating resources available to Council members and organizations they may represent to develop joint projects; reviewing and making recommendations regarding City expenditures affecting children, youth and families; enlisting the cooperation of a broad array of individuals and organizations to further the intent and purposes of the Council; mobilizing and coordinating other efforts in the City targeted at children, youth and families; conducting fundraising campaigns to support the priorities and projects of the Council; and creating opportunities for youth to provide input on issues affecting them.

It is proposed that the Council consist of twenty members including the Mayor, a member of the City Council, a member of the School Committee, the City Manager, the Superintendent of Schools, the Assistant City Manager for Human Services, the Commissioner of Health and Hospitals, a member of the philanthropic community, a representative from a State agency serving children, youth and families, one representative each from the corporate/business community and the university community, and a representative from the early childhood community. In addition, five members living in the City shall represent the community-at-large and/or active parents groups or other groups involved with children and their families. Three members with backgrounds in current Council priorities will serve shorter terms. The Council will have an Executive Committee comprised of a subset of the Council and including the Chairperson to enact the business of the full Council between meetings. The Council will hire and oversee the efforts of an Executive Director.

The Council will have a Committee structure comprised of a mix of Council members and representatives from the community-at-large. Parents shall be represented on all Committees. The Chair or Co-Chair of each Committee shall be a Council member. Initially there will be a Public Policy Committee, a Program Committee, a Development Committee, and a Research and Evaluation Committee.

The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as different neighborhoods and will include in its membership, individuals with children who are consumers of services.

ATTACHMENT A.

THE CITY'S LONG-RANGE GOALS FOR ITS CHILDREN

It shall be the policy of the City of Cambridge to take a leading proactive role to enable Cambridge children to grow up to be well-functioning, healthy, productive, educated adults. The City shall develop a comprehensive response to the needs of children working towards the following long-term goals or rights of children that form a comprehensive framework:

PRENATAL AND NEWBORN CARE: All pregnant women in Cambridge should receive early, continuous and high-quality prenatal and newborn care.

HEALTH CARE AND NUTRITION: All children in Cambridge should have the benefits of good nutrition, ongoing preventive health care and treatment.

CHILDCARE: All families who need childcare should have access to quality, affordable care.

EARLY CHILDHOOD EDUCATION: All families with preschool age children should have access to quality early childhood education programs.

EDUCATION K-12: Every Cambridge child should have equal access to quality education from kindergarten through high school.

RECREATION AND ENRICHMENT: All children should be offered recreation and enrichment programming that fosters positive self-esteem, skill building, creativity, and develops good habits in current and future use of leisure time.

SUBSTANCE ABUSE: All children and youth in Cambridge have the right to an environment that promotes responsible decision making and supports them in their decision not to use or abuse alcohol and other drugs.

SEXUALITY: All children in Cambridge should have the knowledge and resources to make healthy decisions and responsible choices about his or her sexual behavior.

CAREER DEVELOPMENT/EMPLOYABILITY: All children and youth in Cambridge should receive the resources they need to make the transition from school to work and to achieve economic security.

MENTAL HEALTH: All children and their parents should have the benefits of timely and appropriate mental health care.

SAFETY/VIOLENCE: All children should have the right to grow up in safety, protected from violence, abuse or neglect.

BASIC NEEDS: All families in Cambridge should have access to a decent standard of living which includes an adequate income, affordable housing, and personal safety.

CCM-101

City of Cambridge

23.

IN CITY COUNCIL
February 4, 1991

MAYOR WOLF

WHEREAS: The commitment to children as our future must be a commitment in action; and

WHEREAS: Cambridge's economic expansion of the 1980's did not extend to all our city's children, nearly-one quarter of whom now live in poverty and one-fifth of whom suffer from hunger each month; and

WHEREAS: The prospects for all children, regardless of their background, are in peril in the current economy; and

WHEREAS: Cambridge is rife in children's services, but services often function independently of each other and are not equally accessible to all residents; and

WHEREAS: There are few comprehensive efforts that take a preventative approach and involve many sectors of the community; and

WHEREAS: Through an order passed by the City Council on March 28, 1988, the Council committed itself to better meeting the needs of our children through a comprehensive policy on children and youth; and

WHEREAS: That policy, now complete and attached, directs a comprehensive local response to the needs of children and their families through a Coordinating Council for Children, Youth, and Families; and

WHEREAS: The Coordinating Council for Children, Youth, and Families would encourage services for children, youth, and families that are preventive rather than reactive; coordinated rather than fragmented; innovative rather than driven by existing structures; comprehensive, oriented to the needs of children and families as whole people; supportive of families, their choices, and strengths; and responsive to the needs of all families as well as to the differing needs of different families; now be it

ORDERED: That the Children, Youth, and Families Policy and the ordinance establishing a Coordinating Council for Children, Youth, and Families be referred to the ordinance committee for hearing and report, in order that it, with any amendments proposed, may be adopted as amendments to the municipal code of the City of Cambridge.

CAMBRIDGE PUBLIC SCHOOLS

MARY LOU MCGRATH
Superintendent of Schools

159 THORNDIKE STREET, CAMBRIDGE, MASSACHUSETTS 02141
(617) 498-9224

January 23, 1991

Dear Mayor Wolf:

I am very pleased to write this letter of support for the creation of a Children, Youth and Families Ordinance and Commission in the City of Cambridge.

It is encouraging to witness widespread community adoption of intensive family preservation models throughout the country that provide services and individualized long term case management to help protect children and maintain families.

As Superintendent of Schools, I strongly believe that it is the collective responsibility of all our citizens and agencies for the education and support of Cambridge children and their families.

For many years, I have supported more effective and efficient utilization of resources in the schools and in the community. To this end, and of particular interest and importance to me is the establishment of a school-based family center in Cambridge. This endeavor is an ongoing collaborative effort among your office, Human Services, and other members of the planning committee to develop the policy and process by which this center would be established.

As stated in the City of Cambridge Children and Youth preamble, "We must move forward in creating opportunities for all children that affirm children's strengths, that enhance the sense of safety and security of all children and that give children real hope for the future."

I truly feel that the City of Cambridge Children and Youth Ordinance and Commission will serve as a model for other communities throughout the country.

Sincerely,

Mary Lou McGrath
Superintendent of Schools

The Cambridge School Department is an equal opportunity/affirmative action employer.

City of Cambridge
Children, Youth and Family Policy Plan

I. BACKGROUND

This policy launches a ***comprehensive*** effort to respond to the needs of children in Cambridge. For over a decade now Americans have been alerted, upbraided, and prodded to do something about the state of their children. Numerous reports and studies have documented the plight of poor children in particular. One in five children now live in families with incomes below the federal poverty line. The number of these children who are unhealthy, malnourished, undereducated and who may be unemployable in the future is high and on the rise. The prospects of middle and upper class children, too, have been undercut during this time. High and climbing rates of divorce and mobility, the deterioration of public schools, widespread drug abuse--among many troubles--have left a wide range of children vulnerable, stranded, unprepared for adult life.

These problems are national problems demanding national solutions. But they are also problems of state and local governments, and of individual citizens. Over the last decade numerous cities have assumed responsibility for counteracting the problems besetting children. For example, Seattle has made children a high priority, focusing the efforts of city agencies on children and spurring a wide range of innovative programs for youth. Hartford has drawn together an impressive array of community interests and resources in driving down a high rate of infant mortality. Minneapolis has established a Youth Coordinating Board to enhance and promote the healthy, comprehensive development of children and youth through collaborative action. Cambridge, through a community meeting process, has established long-range goals for its children (See Attachment A).

What warrants such a policy now? The circumstances of Cambridge children are not as dire as those of children in many other cities. Cambridge has great strengths. More than 140 non-profit and public service organizations provide educational and human services to Cambridge residents. Fifty-two organizations devote all or part of their work to youth alone. For many years schools and community organizations in Cambridge have worked together closely and effectively, allowing students access to a wide array of resources.

Yet, as in other cities, large and growing numbers of Cambridge children are undermined by poverty, drugs, illiteracy, abuse and neglect. While Cambridge expanded economically over the last decade, the poverty rate among children continued to climb. By 1986, almost one in four children in the City were living in poverty, significantly above the

national average. It is estimated that one in five Cambridge children suffer from hunger part of each month, and approximately 1,800 families per month request emergency food assistance. Escalating and unaffordable housing costs continue to strain Cambridge families--36% of Cambridge renters pay more than 40% of income for housing. Twenty-five percent of Cambridge teen mothers receive inadequate or no prenatal care--markedly higher than the state average of 10.9%. The school drop out rate has reached 22%.

Mental health problems are reported to be afflicting children at increasingly younger ages, and the number of seriously dysfunctional families, mental health workers report, has seriously climbed. Child care has also become prohibitively expensive for many Cambridge families, forcing parents to choose between placing their children in unlicensed care or leaving their jobs.

Further, while Cambridge is rich in services, the service-delivery system does have some weaknesses:

* **Services often function independently of each other:** Clients can find themselves lost in a maze of valuable but disconnected programs.

* **Cambridge lacks adequate preventive services:** Like other cities, services tend to be crisis-oriented, responding to problems after they have become difficult, if not impossible, to reverse.

* **Residents lack access to services:** As community life becomes more impersonal, some residents simply lack information about existing services. Many are obstructed by language barriers or are denied access because of inadequate transportation.

* **There are only a few comprehensive efforts involving many sectors of the community:** A comprehensive effort should include local government, community leaders and organizations, school administrators and staff, health professionals, and parents.

In addition to mounting problems among children and these service limitations, children's services have fallen victim to downturns in the national and state economies. The result is that the system of services, which has taken decades to build, is chipped away, leaving children at greater risk than ever before. Children need and deserve a firm commitment of public support that does not fluctuate and erode according

to economic times. This policy puts forth such a commitment for children and their families in Cambridge.

II. STRATEGY/APPROACH

This policy begins to address the above-mentioned problems and issues through several strategies and approaches:

Strategies

* **Prevention:**
  First and foremost, it is a prevention policy. It sets forth goals and creates a framework for greatly reducing the number of Cambridge children who will at some point develop serious difficulties. In keeping with its prevention focus, it seeks initially to direct resources and energies toward small children age 0 to 5 years and their parents and school aged children.

* **Coordination and improving access:**
  It suggests ideas for better coordinating and improving access to services.

* **Building a framework:**
  It seeks to build an improved framework for responding to those children who already have pressing problems - children who now require services.

* **Increasing opportunities:**
  It is not focussed solely on childrens' problems, deficits and needs: rather, it seeks to generate activities that create opportunities for all children, that affirm childrens' strengths, that enhance the sense of safety and security of all children, and that give children real hope for the future.

* **Generate ideas:**
  It generates ideas for tending to the needs of all Cambridge children - recognizing that problems like alcohol and other drug abuse and teen pregnancy are not problems of any one segment of Cambridge alone -- and seeks to foster a climate and opportunities that allow all Cambridge children to thrive.

The starting point in pursuing these strategies is a careful focus on the needs of the child. The strategies need to begin with and to return again and again to the needs of children themselves. These strategies should also have as a starting point the assumption that parents should be supported and strengthened--not blamed--for their childrens' difficulties.

Services need to reinforce--not undermine--parents' natural strengths and resiliencies.

In addition, efforts on behalf of children should capitalize on Cambridges' many strengths. Cambridge is astonishingly diverse--its students originate in 64 countries and speak 46 languages--and children in Cambridge have unique opportunities to learn about and build bridges between their own cultures and others. These efforts should draw on the capacity of its activist community to respond to community needs. These efforts should also tap the resources of Cambridge's universities, draw on the wisdom of the many experts on childrens' services and child welfare in Cambridge and the surrounding area, as well as draw on the knowledge of experts around the country. Finally, those pursuing these efforts should look to exemplary efforts in other cities.

Approaches

In implementing this policy, the approach is to encourage services to children, youth, and families in Cambridge that are preventive rather than reactive; coordinated rather than fragmented; innovative rather than driven by existing service structures; comprehensive, oriented to the needs of children and families seen as whole people; supportive of families, their choices, and their strengths; and responsive to the needs of all families as well as to the different needs of different families.

*Services that are preventive rather than reactive:

Much research evidence suggests that preventive services to young children are the most cost-effective way to encourage healthy development and avoid bad outcomes later in life. For example, excellent programs for early childhood education have been shown to increase school completion rates and reduce rates of teen pregnancy and delinquency in adolescence. According to the General Accounting Office (1990), every $1 spent on pre-natal care saves $4 to $6 in costs for hospital care of undernourished infants, welfare, food stamps, and special-education programs for children born unhealthy.

Many excellent programs in Cambridge already build on this foundation of research evidence. For example, the city's Head Start, Early Intervention, and Visiting Nurse programs reach young, at-risk children with excellent services. However, many children who need these services never get them, or get them later than they should because of long waiting lists.

Therefore, the policy implementation must emphasize strengthening and expanding a preventive approach to children's

services, with the initial focus on infants and children from prenatal care to five years old.

***Services that are coordinated rather than fragmented:**

If a family in Cambridge needs help with (for example) getting health care for an ill child, locating suitable child care, and finding an apartment that will take kids, the parents may feel as though they are trying to find their way through a bureaucratic maze. Different services are provided by different public or private agencies, located in different buildings, staffed by workers with different specialties or expertise, and available to families and children based on different and confusing eligibility requirements. Studies of effective programs for children and youth at-risk suggest, not surprisingly, that these bureaucratic barriers pose the biggest problems to those families who need services the most - and that the programs that work best have staff who are willing to go the extra step and help families get through the maze.

Again, many excellent programs in Cambridge have made a start at this kind of coordination despite the formidable barriers posed by funding sources and regulations from higher levels of government. For example, the WIC program has co-located offices with community health services so that a mother with young children can take her children to the pediatrician and receive her WIC nutrition coupons in the same place. The Bigelow Street Family Shelter has coordinated with the city's Community Learning Center to provide literacy and basic education to homeless mothers during their stay at the shelter facility.

This coordination will be a key component of this policy implementation, taking coordination as far as it can go, challenging providers to link programs so that they best serve the families who need them. One possible approach to coordination, at least for some families, might be "one-stop shopping," where a neighborhood service center offers all the services a family might need in one place.

*** Services that are innovative rather than driven by existing service structures:**

The world surrounding families and children is changing, and programs to support them are changing with it. For example, many more mothers now work while their children are young, requiring that both businesses and service providers consider what it means to balance the roles of parent and provider. Some businesses have responded to these changes with innovations such as parental leave,

child care vouchers, and provisions for ill child care; schools have had to learn how to encourage and stimulate parent involvement when a parent is unavailable for parent-teacher conferences or classroom activities during the traditional school day; Head Start programs, which have traditionally provided excellent preschool programs for part of the day, have started to consider full-day programs.

Under this policy, the City would encourage innovative responses to this and other changes in the circumstances of families and children, innovations that so far as possible respond to the whole life circumstances of the family.

* **Services that are comprehensive, oriented to the needs of children and families seen as whole people:**

One special category of innovation that holds particular promise for many children and families is innovation to serve children and families in comprehensive ways. These innovative programs work precisely because they do not artificially isolate a health problem from an educational problem or isolate the mother's need from the child's need. Examples of such innovative programs include:

***PACE** (Parent and Child Education): Started in Kentucky, it is a program that combines an adult education program for mothers without a high school diploma with an excellent preschool program for the children. The program has been widely replicated; much of its appeal is the effect on the whole family when two members become excited and involved in education.

***Family Support Programs:** Based in neighborhood drop-in centers offer families a chance to pick and choose the services they would like - from parent support groups to play groups to counseling to drop-in child care - and to link up to a comprehensive range of services through referral. Several states are experimenting with such programs as an approach to supporting children and families comprehensively but not intrusively.

* **Services that are supportive of families, their choices and their strengths:**

Bringing up children today is hard for all families. Families in Cambridge struggle with how to keep a job and care for a sick child; how to find child care that is reliable and high quality; how to strengthen a child's ability to make responsible decisions about

drugs; how to encourage a child to believe he can succeed in school; and in general how to bring children up to be healthy, responsible, and productive adults in a world that too often seems not to listen to parents or to children.

Under this policy, the City will recognize diversity and encourage programs that support the many different choices that families make about how to bring up happy and healthy children and that recognize the strengths of families as well as the burdens on them. For example, a parent caring for an emotionally disturbed child at home will need respite care to support them in their choice to be a primary caretaker. Other parents may seek out of home placement for their child and will need assistance in selecting the best option for their family.

* **Services that are responsive to the needs of all families, as well as to the different needs of different families:**

Under this policy, the City will encourage programs that respond to needs that all families experience - needs like open space for children to play in, affordable and high quality child care, and help talking to children about how to make responsible decisions about drugs and other issues. In assessing budget priorities, those that meet children's needs will be given high priority.

At the same time, the City will pay special attention in committing resources to the needs of those families who are bringing up children with the least support, social and economic, and who are therefore most vulnerable and at risk. For example, the policy will encourage programs that reach out to families who are members of racial, linguistic, and ethnic minorities; to low-income families; and to young mothers and their children. For example, one program recommended by a citizen study group would provide home visits through the Visiting Nurse Association to all teen mothers with infants in Cambridge.

III. IMPLEMENTATION

In order to implement and support the strategies and approaches identified in this policy plan, the City of Cambridge will create a Commission called the "Cambridge Commission on Children, Youth and Families," charged with directing a comprehensive, local response to the needs of children, youth, their families and other caregivers.

Some of the specific duties of the Commission will include: recommending children, youth and family policy to the City Council;

mobilizing and coordinating resources of Commission members and other organizations to develop joint projects; reviewing and making recommendations regarding City expenditures affecting children, youth and families; enlisting the cooperation of a broad array of individuals and organizations to further the intent and purposes of the Commission; mobilizing and coordinating other efforts in the City targeted at children, youth and families; and conducting fundraising campaigns to support the priorities and projects of the Commission.

It is proposed that the Commission consist of twenty members including the Mayor, a member of the City Council, a member of the School Committee, the City Manager, the Superintendent of Schools, the Assistant City Manager for Human Services, the Commissioner of Health and Hospitals, a member of the philanthropic community, a representative from a State agency serving children, youth and families, one representative each from the corporate/business community and the university community, and a representative from the early childhood community. In addition, five members living in the City shall represent the community-at-large and/or active parents groups or other groups involved with children and their families. Three members with backgrounds in current Commission priorities will serve shorter terms. The Commission will hire and oversee the efforts of an Executive Director.

The Commission will have a committee structure comprised of both Commission members and representatives from the community-at-large. Initially there will be a Public Policy Committee, a Program Committee, a Development Committee, a Research and Evaluation Committee, a Parents' Committee, and a Youth Committee.

The Commission at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as different neighborhoods and will include in its membership, individuals with children who are consumers of services.

Chapter _____

COORDINATING COUNCIL FOR CHILDREN, YOUTH AND FAMILIES (THE KIDS' COUNCIL)

Established

There shall be established a Coordinating Council for Children, Youth and Families (The Kids' Council) (_____).

Function and Purpose

The Coordinating Council for Children, Youth and Families (The Kids' Council), refer to herein as the Council, will direct a comprehensive, local response to the needs of children, their families, and other caregivers, according to the guiding principles put forth in the Children, Youth and Family Policy Plan. These guiding principles are:

* To promote services and other activities that are preventive rather than reactive.

* To promote services and other activities that are coordinated rather than fragmented, and that result in improved accessibility.

* To encourage innovative responses to needs.

* To generate activities that create opportunities for all children, their families, and other caregivers.

* To support families, their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.

* To promote services and other activities that are comprehensive, oriented to the needs of children and families seen as whole people.

Membership-Appointment-Term

A. Council Members shall be comprised of the following offices, disciplines and interests:

* The Mayor

* A member of the City Council

* A member of the School Committee

* The City Manager

* The Superintendent of Schools

* The Assistant City Manager for Human Services

* The Commissioner of Health & Hospitals

* A member of the philanthropic community

* A representative from a State agency serving children, youth and families

* A representative of the corporate/business community

* A representative of the university community

* A representative from the early childhood community

* Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.

* Three members shall be identified to serve one year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

B. The Council shall have an Executive Committee comprised of a subset of the Council and including the Chairperson to enact the business of the full Council between Council meetings.

C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee Members shall be appointed by the Mayor. All other members shall be appointed by the City Manager from recommendations provided by the Council. The Council shall consult with groups

volved with children and shall advertise widely to obtain names of qualified candidates.

E. Selected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Member shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

Membership-Qualifications

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

Officers-Quorum-Adoption of rules and regulations-Committees

A. The Council shall meet as often as necessary to conduct its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chairperson from among Council Members.

C. Eleven members shall constitute a quorum for the purpose of conducting the business of the Council and all decisions shall be by majority vote of the Council Members present and voting.

D. The Council shall adopt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws. (Ord. 1016(part), 1984: prior code Ch. 25 3(C).

H. The Council shall develop a committee structure. To broaden participation from the community, members of these committees will be a mix of Council Members and the community-at-large. Parents shall be represented on all committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified candidates. The committees will include:

* A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

* A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

* A Development Committee to assist the Council's grant writing and fundraising operations.

* A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that

pincides with Council priorities will be formed to guide the Council.

Executive Director-Appointment

A. There shall be an Executive Director of the Coordinating Council for Children, Youth and Families (The Kids' Council) who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which it will receive administrative support.

Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Council, School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to spond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other groups and organizations to further the intent and purposes of this chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

ATTACHMENT A

THE CITY'S LONG-RANGE GOALS FOR ITS CHILDREN

It shall be the policy of the City of Cambridge to take a leading proactive role to enable Cambridge children to grow up to be well-functioning, healthy, productive, educated adults. The City shall develop a comprehensive response to the needs of children working towards the following long-term goals or rights of children that form a comprehensive framework:

PRENATAL CARE: All pregnant women in Cambridge should receive early, continuous and high-quality prenatal and peri-natal care.

HEALTH CARE AND NUTRITION: All children in Cambridge should have the benefits of good nutrition, ongoing preventive health care and treatment.

CHILDCARE: All families who need childcare should have access to quality, affordable care.

EARLY CHILDHOOD EDUCATION: All families with preschool age children should have access to quality early childhood education programs.

EDUCATION K-12: Every Cambridge child should have equal access to quality education from kindergarten through high school.

RECREATION AND ENRICHMENT: All children should be offered recreation and enrichment programming that fosters positive self-esteem, skill building, creativity, and develops good habits in current and future use of leisure time.

SUBSTANCE ABUSE: All children and youth in Cambridge have the right to an environment that promotes responsible decision making and supports them in their decision not to use or abuse alcohol and other drugs.

SEXUALITY: All children in Cambridge should have the knowledge and resources to make healthy decisions and responsible choices about his or her sexual behavior.

CAREER DEVELOPMENT/EMPLOYABILITY: All children and youth in Cambridge should receive the resources they need to make the transition from school to work and to achieve economic security.

MENTAL HEALTH: All children and their parents should have the benefits of timely and appropriate mental health care.

SAFETY/VIOLENCE: All children should have the right to grow up in safety, protected from violence, abuse or neglect.

BASIC NEEDS: All families in Cambridge should have access to a decent standard of living which includes an adequate income, affordable housing, and personal safety.

City of Cambridge

In the Year One Thousand, Nine Hundred

AN ORDINANCE

DRAFT - February 27, 1991

Be it ordained by the City Council of the City of Cambridge as follows:

The Cambridge Municipal Code is hereby amended by striking out the existing Chapter 2.84 and substituting in place thereof the following new Chapter 2.84:

Chapter 2.84

Coordinating Council for Children, Youth and Families ~~Policy Plan~~ (The Kids' Council)

Sections:

2.84.010 Established

2.84.020 Function and Purpose

2.84.030 Membership - Appointment - Term

2.84.040 Membership - Qualifications

2.84.050 Officers - Quorum - Rules and Regulations - Committees

2.84.060 Executive Director

2.84.070 Powers and Duties

2.84.010 Established

There shall be established in Cambridge a Coordinating Council for Children, Youth and Families (the Council).

2.84.020 Function and Purpose

The Council will direct a comprehensive local response to the needs of children, their families and other caregivers, in accordance with the guiding principles set forth in the Children, Youth and Family Policy Plan. These principles are:

To promote services and other activities that are preventive rather than reactive.

To promote services and other activities that are coordinated rather than fragmented, and that result in improved accessibility.

To encourage innovative responses to needs.

To generate activities that create opportunities for all children, their families, and other caregivers.

To support families, their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.

To promote services and other activities that are comprehensive, oriented to the needs of children and families seen as whole people.

2.84.030 Membership - Appointment - Term

A. Council Members shall be comprised of the following offices, disciplines and interests:

The Mayor

A member of the City Council

A member of the School Committee

The City Manager

The Superintendent of Schools

The Assistant City Manager for Human Services

The Commissioner of Health & Hospitals

A member of the philanthropic community

A representative from a State agency serving children, youth and families

A representative of the corporate/business community

A representative of the university community

A representative from the early childhood community

Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.

Three members shall be identified to serve one year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

B. The Council shall have an Executive Committee comprised of a subset of the Council and including the Chair to enact the business of the full Council between Council meetings.

C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee members shall be appointed by the City Manager with advice and recommendations from the Mayor. All other members shall be appointed by the City Manager ~~from~~ with advice and recommendations from the ~~City~~ Council.

The ~~city~~ Council shall consult with groups involved with children and shall advertise widely to obtain names of qualified candidates.

E. Elected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Member shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

2.84.040 Membership - Qualifications

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

2.84.050 Officers - Quorum - Rules and Regulations - Committees

A. The Council shall meet as often as necessary to conduct its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chair from among Council Members.

C. Eleven members shall constitute a quorum for the purpose of conducting the business of the Council, and all decisions shall be by majority vote of the Council members present and voting.

D. The Council ~~shall~~ may adopt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws.

H. The Council shall develop a committee structure. To broaden participation from the community, members of these committees will be a mix of Council Members and the community-at-large. Parents shall be represented on all committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified

candidates. The committees will include:

A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

A Development Committee to assist the Council's grant writing and fundraising operations.

A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that coincides with Council priorities will be formed to guide the Council.

2.84.060 Executive Director

A. There shall be an Executive Director of the Council ~~for Children, Youth and Families (the Kid's Council)~~, who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which ~~it~~ he or she will receive administrative support.

2.84.070 Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Manager, the City Council, the School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the City Manager and other appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other groups and organizations to further the intent and purposes of this

chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

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Children & Youth

Olivia Golden
~~geraldine~~ ~~Jerry~~ Zetzel
Gloria Pallidino
Rick Weissbourd
Ned Michaels
Hap Tierney
Patty Hnatiuk
Marie Esposito
Lynn D'Ambrose
Bridget Hansen
Sandra Spooner
Steven Brion-Meisels
Andy Taylor
Jamie Ward
Teresa Sommer
Deborah Ume Goodman

City of Cambridge

In the Year One Thousand, Nine Hundred

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Coordinating Council for Children, Youth and Families

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2.84.010 Established

2.84.020 Function and Purpose

2.84.030 Membership - Appointment - Term

2.84.040 Membership - Qualifications

2.84.050 Officers - Quorum - Rules and Regulations - Committees

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2.84.070 Powers and Duties

2.84.010 Established

There shall be established in Cambridge a Coordinating Council for Children, Youth and Families (the Council).

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To promote services and other activities that are preventive rather than reactive.

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To encourage innovative responses to needs.

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To support families, their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.

To promote services and other activities that are comprehensive, oriented to the needs of children and families seen as whole people.

2.84.030 Membership - Appointment - Term

A. Council Members shall be comprised of the following offices, disciplines and interests:

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A member of the School Committee

The City Manager

The Superintendent of Schools

The Assistant City Manager for Human Services

The Commissioner of Health & Hospitals

A member of the philanthropic community

A representative from a State agency serving children, youth and families

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Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.

Three members shall be identified to serve one year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

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C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee members shall be appointed by the City Manager with advice and recommendations from the Mayor. All other members shall be appointed by the City Manager ~~from~~ with advice and recommendations from the ~~City~~ Council.

The ~~City~~ Council shall consult with groups involved with children and shall advertise widely to obtain names of qualified candidates.

E. Elected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Member shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

2.84.040 Membership - Qualifications

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

2.84.050 Officers - Quorum - Rules and Regulations - Committees

A. The Council shall meet as often as necessary to conduct its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chair from among Council Members.

C. Eleven members shall constitute a quorum for the purpose of conducting the business of the Council, and all decisions shall be by majority vote of the Council members present and voting.

D. The Council ~~shall~~ may adopt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws.

H. The Council shall develop a committee structure. To broaden participation from the community, members of these committees will be a mix of Council Members and the community-at-large. Parents shall be represented on all committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified

candidates. The committees will include:

A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

A Development Committee to assist the Council's grant writing and fundraising operations.

A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that coincides with Council priorities will be formed to guide the Council.

2.84.060 Executive Director

A. There shall be an Executive Director of the Council ~~for Children, Youth and Families (the Kid's Council)~~, who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which ~~it~~ he or she will receive administrative support.

2.84.070 Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Manager, the City Council, the School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the City Manager and other appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other groups and organizations to further the intent and purposes of this

chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

a:\ord#3\children.cnl\ordinance

ORDINANCE COMMITTEE

SIGN UP SHEET

CHILDREN

IN

Incorporate only by reference

NAME		
Mary Lou McGrath ✓		
~~Gerry Zetzel~~ S. Ayers ✓		
JOHN BOESEN ✓		
DAVID LINK ✓		
NEAL MICHAELS ✓		
~~Loretta Davies~~ Loretta Davies ✓	106 VAULSON ST. ~~7 Temple~~ 7 Temple	
Geraldine Zetzel ✓	14 Hubbard Park	
Margery Davies ✓	35 William St.	
Joe Petrin ✓	HAGGERTY SCHOOL PRINCIPAL	
Olivia Golden ✓	45 Locke St.	
Patty Hnatiuk ✓ NATIULE	22 Whitney Ave.	
Rick Weissbourd ✓	75 Fayerweather	
Marie Esposito ✓	CAmb. Visiting Nses.	
Lynn Schoeff	Teen Health Center	

S
~~JCG~~ 02139
ST.

ORDINANCE COMMITTEE

SIGN UP SHEET

CHILDREN AND YOUTH

IN FAVOR

NAME	ADDRESS
~~Gerry Zetzel~~ Mary Lou McGrath ✓ Stayers ✓	CMHA ~~Hubbard Park~~ 02139
JOHN BOESEN ✓	25 SUFFOLK ST.
DAVID LINK ✓ ✓	CAMB. HOSP.
NEIL NIEHAUS ✓	106 JACKSON ST.
~~Loretta Davis~~ Loretta Davis ✓	~~Temple~~ Temple
Geraldine Zetzel ✓	14 Hubbard Park
Margery Davies ✓	35 William St.
Joe Petrini ✓	HAGGERTY SCHOOL PRINCIPAL
Olivia Golden ✓	45 Locke St.
Patty Hnatiuk ✓ NATIULE	22 Whitney Ave.
Rick Weissbourd ✓	75 Fayerweather
Marie Esposito ✓	CAMB. Visiting Nurse.
Lynn Schoff	Teen Health Center

CCM-101

City of Cambridge

23.

IN CITY COUNCIL
February 4, 1991

MAYOR WOLF

WHEREAS: The commitment to children as our future must be a commitment in action; and

WHEREAS: Cambridge's economic expansion of the 1980's did not extend to all our city's children, nearly-one quarter of whom now live in poverty and one-fifth of whom suffer from hunger each month; and

WHEREAS: The prospects for all children, regardless of their background, are in peril in the current economy; and

WHEREAS: Cambridge is rife in children's services, but services often function independently of each other and are not equally accessible to all residents; and

WHEREAS: There are few comprehensive efforts that take a preventative approach and involve many sectors of the community; and

WHEREAS: Through an order passed by the City Council on March 28, 1988, the Council committed itself to better meeting the needs of our children through a comprehensive policy on children and youth; and

WHEREAS: That policy, now complete and attached, directs a comprehensive local response to the needs of children and their families through a Coordinating Council for Children, Youth, and Families; and

WHEREAS: The Coordinating Council for Children, Youth, and Families would encourage services for children, youth, and families that are preventive rather than reactive; coordinated rather than fragmented; innovative rather than driven by existing structures; comprehensive, oriented to the needs of children and families as whole people; supportive of families, their choices, and strengths; and responsive to the needs of all families as well as to the differing needs of different families; now be it

ORDERED: That the Children, Youth, and Families Policy and the ordinance establishing a Coordinating Council for Children, Youth, and Families be referred to the ordinance committee for hearing and report, in order that it, with any amendments proposed, may be adopted as amendments to the municipal code of the City of Cambridge.

ncides with Council priorities will be formed to guide the Council.

Executive Director-Appointment

A. There shall be an Executive Director of the Coordinating Council for Children, Youth and Families (The Kids' Council) who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which it will receive administrative support.

Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Council, School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other groups and organizations to further the intent and purposes of this chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

ATTACHMENT A

THE CITY'S LONG-RANGE GOALS FOR ITS CHILDREN

It shall be the policy of the City of Cambridge to take a leading proactive role to enable Cambridge children to grow up to be well-functioning, healthy, productive, educated adults. The City shall develop a comprehensive response to the needs of children working towards the following long-term goals or rights of children that form a comprehensive framework:

PRENATAL CARE: All pregnant women in Cambridge should receive early, continuous and high-quality prenatal and peri-natal care.

HEALTH CARE AND NUTRITION: All children in Cambridge should have the benefits of good nutrition, ongoing preventive health care and treatment.

CHILDCARE: All families who need childcare should have access to quality, affordable care.

EARLY CHILDHOOD EDUCATION: All families with preschool age children should have access to quality early childhood education programs.

EDUCATION K-12: Every Cambridge child should have equal access to quality education from kindergarten through high school.

RECREATION AND ENRICHMENT: All children should be offered recreation and enrichment programming that fosters positive self-esteem, skill building, creativity, and develops good habits in current and future use of leisure time.

SUBSTANCE ABUSE: All children and youth in Cambridge have the right to an environment that promotes responsible decision making and supports them in their decision not to use or abuse alcohol and other drugs.

SEXUALITY: All children in Cambridge should have the knowledge and resources to make healthy decisions and responsible choices about his or her sexual behavior.

CAREER DEVELOPMENT/EMPLOYABILITY: All children and youth in Cambridge should receive the resources they need to make the transition from school to work and to achieve economic security.

MENTAL HEALTH: All children and their parents should have the benefits of timely and appropriate mental health care.

SAFETY/VIOLENCE: All children should have the right to grow up in safety, protected from violence, abuse or neglect.

BASIC NEEDS: All families in Cambridge should have access to a decent standard of living which includes an adequate income, affordable housing, and personal safety.

Children & Youth

March 18, 1991

My name is Neal Michaels, I live at 106 Jackson Street, Cambridge. I am a native and life-long resident of Cambridge, as is my wife and we are both graduates of the Cambridge Public School system. We are the parents of two children, one of whom attends public school, the other is seven weeks old.

For 14 years I was a member of the Cambridge Council for Children and for the last 12 years I have worked in the field of child abuse.

I need not go into a long litany of the problems that face children and their families. One in five children lives in poverty; almost one in five people, many of whom are children, have no health coverage; among the highest incidences of pregnancy occurs in young women between the ages of 15 to 19 years old; last year in Massachusetts there were 82,000 reports of child abuse and neglect. These issues affect this city as well.

At the same time, children and families have lost access to a range of supportive services as a result of budget cuts at the national and state levels further threaten their status.

In my experience I would identify the following issues as critical to our efforts in responding to children and their families;

1. While there has been lots of discussion, particularly during campaigns, about children and families, there have been very few attempts to articulate and adopt a clear set of policies about what we hope and want for children, youth and families. Without this vision our efforts are haphazard and lacking purpose.

2. While there are many creative programs and committed individuals, and Cambridge is particularly blessed, a lack of coordination hampers our efforts to effectively utilize increasingly scarce resources.

3. In order to ensure and support the integrity of all children, youth, and families we must involved all segments of the community. Government, professionals, the schools, churches, the business community, parents and kids themselves must be involved in drawing up and implementing the basic assumptions we should share for all kids and their families.

In adopting this ordanance Cambridge will attempt to address these issues and place itself in the forefront of communities across the country by making a definitive statement that kids and families are important.

While acknowledging the difficult fiscal situation all local communities, including Cambridge, face today, this small investment will we hope leverage other funds and implement a philosophy that says we should look at prevention as a cost-saving approach.

I urge your adoption of this ordance and its policy statement.

Introduction:

Marie Esposito
Maternal Child Specialist
Cambridge Visiting Nurses

The Cambridge Visiting Nurses has been working with the Cambridge Community since 1904. In 1994 the CVNA will celebrate it's 90 th anniversary. What may not be clear is how much the CVNA is invested in children and families. When I was last in this room, ~~and~~ I spoke to the Ordinance Committee, I must apologize for becoming so overwhelmed with the sincerity of each speaker's testimony supporting the children's youth policy for Cambridge. ~~that~~ It was difficult for me to talk. I'll try to do better this time. The CVNA participates in many programs that are not reimbursed ie. educational mother's groups in shelters, community outreach, an occasional mother's group, and participation in the task force to develop a children's policy and Coordinating Council for children, youth and families.

I do not live in Cambridge but I do feel like it is my second home. Let me share some information with you:

Maternal Statistics

-Children constitute the poorest age group in the United States.
-1/5 of all children live below the poverty line
-hunger, homelessness, and poverty continue to increase
-1981-1986 uninsured children increased by 14%
-only 60% of children under age 4 have received the complete basic series of immunizations.
-by the year 2000 1/3 children will be a minority
-current drop-out rate for minority children is 50%
-in 1918 America's infant mortality rate was the 6th best and Japan was 17th
today- USA lags behind 21 other nations and Japan ranks 1st.

I think that the bottom line here is that these children are our future work force.

There is a loss of productivity due to alcohol and drug abuse on the job = $110 billion annually. The first wave of children who may have been a substance abuser are now entering the work force.

It maybe too late to save some children -but we must make an effort to save the next generation.

Calvin Coolige said " the chief business of the American people is business" Business leaders lead; political leaders follow.

When you speak out in the interest of children, you speak out in the interest of America.

Robert Sweeney, Pres. Nat. Ass. of Children's Hospitals and related Institutions, "We are the people who must see that

projects like the children's policy and ordinance happen! - not to preserve our hospitals, or our schools or our programs, not to preserve our careers or our personal goals, but to preserve our city, our nation!

FIRST PUBLICATION NO. 2529.

City of Cambridge

In the Year One Thousand, Nine Hundred Ninety-One

AN ORDINANCE

In amendment to an ordinance entitled the "Cambridge Municipal Code."

Be it ordained by the City Council of the City of Cambridge as follows:

The Cambridge Municipal Code is hereby amended by striking out the existing Chapter 2.84 and substituting in place thereof the following new Chapter 2.84:

Chapter 2.84

Coordinating Council for Children, Youth and Families, also known as "Kids Council."

Sections:

2.84.010 Established

2.84.020 Function and Purpose

2.84.030 Membership - Appointment - Term

2.84.040 Membership - Qualifications

2.84.050 Officers - Quorum - Rules and Regulations - Committees

2.84.060 Executive Director

2.84.070 Powers and Duties

2.84.010 Established

There shall be established in Cambridge a Coordinating Council for Children, Youth and Families (the Council).

2.84.020 Function and Purpose

The Council will direct a comprehensive local response to the needs of children, their families and other caregivers, in accordance with the guiding principles set forth in the Children, Youth and Family Policy Plan. These principles are:

To promote services and other activities that are preventive rather than reactive.

To promote services and other activities that are coordinated rather than fragmented, and that result in improved accessibility.

To encourage innovative responses to needs.

To generate activities that create opportunities for all children, their families, and other caregivers.

To support families, their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.

To promote services and other activities that are comprehensive, oriented to the needs of children and families seen as whole people.

2.84.030 Membership - Appointment - Term

A. Council Members shall be comprised of the following offices, disciplines and interests:

The Mayor

A member of the City Council

A member of the School Committee

The City Manager

The Superintendent of Schools

The Assistant City Manager for Human Services

The Commissioner of Health & Hospitals

A member of the philanthropic community

A representative from a State agency serving children, youth and families

A representative of the corporate/business community

A representative of the university community

A representative from the early childhood community

Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.

Three members shall be identified to serve one year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

B. The Council shall have an Executive Committee comprised of a subset of the Council and including the Chair to enact the business of the full Council between Council meetings.

C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee members shall be appointed by the City Manager with advice and recommendations from the Mayor. All other members shall be appointed by the City Manager with advice and recommendations from the City Council. The City Manager shall consult with groups involved with children and

shall advertise widely to obtain names of qualified candidates.

E. Elected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Member shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

2.84.040 Membership - Qualifications

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

2.84.050 Officers - Quorum - Rules and Regulations - Committees

A. The Council shall meet as often as necessary to conduct

its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chair from among Council Members.

C. Eleven members shall constitute a quorum for the purpose of conducting the business of the Council, and all decisions shall be by majority vote of the Council members present and voting.

D. The Council may adopt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws.

H. The Council shall develop a committee structure. To broaden participation from the community, members of these committees will be a mix of Council Members and the community-at-large. Parents shall be represented on all committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified candidates. The committees will include:

A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

A Development Committee to assist the Council's grant writing and fundraising operations.

A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that coincides with Council priorities will be formed to guide the Council.

2.84.060 Executive Director

A. There shall be an Executive Director of the Council, who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which he or she will receive administrative support.

2.84.070 Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Manager, the City Council, the School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the City Manager and other appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other

groups and organizations to further the intent and purposes of this chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

Passed to a second reading as amended at the City Council meeting held on March 18, 1991 and on or after April 1, 1991 the question comes on passing to be ordained.

ATTEST:- Joseph E. Connarton, City Clerk.

C 91 - 145

CHAIRMAN
MAYOR ALICE K. WOLF

VICE CHAIRMAN
FRANCES H. COOPER

SCHOOL COMMITTEE
456 BROADWAY
CAMBRIDGE, MASSACHUSETTS 02138

OFFICE OF THE SECRETARY
(Tel. 349-6620)

MEMBERS
HENRIETTA DAVIS
ALFRED B. FANTINI
JAMES J. RAFFERTY
ALFRED E. VELLUCCI
LARRY WEINSTEIN

---IN SCHOOL COMMITTEE---

February 26, 1991

ORDERED:

That the School Committee endorse the policy and proposed ordinance for children, youth and families as introduced by Mayor Wolf (copy attached), and that the School Committee secretary be directed to compose a letter addressed to the Members of the City Council conveying the complete support and endorsement of the School Committee for this proposal.

A true copy:
Attest: Claire E. Rodley
Claire E. Rodley
Secretary of the School Committee

cc School Committee Members
City Council, c/o City Clerk
Superintendent

CHAIRMAN
MAYOR ALICE K. WOLF

VICE CHAIRMAN
FRANCES H. COOPER

SCHOOL COMMITTEE
458 BROADWAY
CAMBRIDGE, MASSACHUSETTS 02138

OFFICE OF THE SECRETARY
(Tel. 349-6620)

MEMBERS
HENRIETTA DAVIS
ALFRED B. FANTINI
JAMES J. RAFFERTY
ALFRED E. VELLUCCI
LARRY WEINSTEIN

CAMBRIDGE MA
91 MAR -1 PM 12:

February 28, 1991

Honorable Members of the Cambridge City Council
c/o City Clerk
City Hall
795 Massachusetts Avenue
Cambridge, MA 02139

Dear Councillors:

At the Regular Meeting of February 26, 1991 the School Committee voted to accept and endorse the policy and proposed ordinance for Children, Youth and Families (copy attached) introduced by Mayor Wolf to the City Council on February 4, 1991.

The Committee has asked that I convey to you their complete support and endorsement of this proposal.

Very truly yours,

Claire E. Rodley

Claire E. Rodley
Secretary of the School Committee

CER:lpk
Encl.

cc School Committee Members

CONSENT

Communication from Ckaire E. Rodley, transmitting notification of the School Committee's complete support of the proposed ordinance for Children, Youth and Families.

In City Council,

March 18, 1991.

Referred to petition

RECEIVED
IN CITY CLERK'S OFFICE
'91 MAR -1 A11:58
CAMBRIDGE MA.

City of Cambridge

IN CITY COUNCIL
February 4, 1991

MAYOR WOLF

WHEREAS: The commitment to children as our future must be a commitment in action; and

WHEREAS: Cambridge's economic expansion of the 1980's did not extend to all our city's children, nearly-one quarter of whom now live in poverty and one-fifth of whom suffer from hunger each month; and

WHEREAS: The prospects for all children, regardless of their background, are in peril in the current economy; and

WHEREAS: Cambridge is rife in children's services, but services often function independently of each other and are not equally accessible to all residents; and

WHEREAS: There are few comprehensive efforts that take a preventative approach and involve many sectors of the community; and

WHEREAS: Through an order passed by the City Council on March 28, 1988, the Council committed itself to better meeting the needs of our children through a comprehensive policy on children and youth; and

WHEREAS: That policy, now complete and attached, directs a comprehensive local response to the needs of children and their families through a Coordinating Council for Children, Youth, and Families; and

WHEREAS: The Coordinating Council for Children, Youth, and Families would encourage services for children, youth, and families that are preventive rather than reactive; coordinated rather than fragmented; innovative rather than driven by existing structures; comprehensive, oriented to the needs of children and families as whole people; supportive of families, their choices, and strengths; and responsive to the needs of all families as well as to the differing needs of different families; now be it

ORDERED: That the Children, Youth, and Families Policy and the ordinance establishing a Coordinating Council for Children, Youth, and Families be referred to the ordinance committee for hearing and report, in order that it, with any amendments proposed, may be adopted as amendments to the municipal code of the City of Cambridge.

In City Council February 4, 1991.
Adopted by the affirmative vote of nine members.
Attest:- John E. Flynn, Deputy City Clerk.
A true copy;
ATTEST:- John E. Flynn, Deputy City Clerk

City of Cambridge
Children, Youth and Family Policy Plan

I. BACKGROUND

This policy launches a ***comprehensive*** effort to respond to the needs of children in Cambridge. For over a decade now Americans have been alerted, upbraided, and prodded to do something about the state of their children. Numerous reports and studies have documented the plight of poor children in particular. One in five children now live in families with incomes below the federal poverty line. The number of these children who are unhealthy, malnourished, undereducated and who may be unemployable in the future is high and on the rise. The prospects of middle and upper class children, too, have been undercut during this time. High and climbing rates of divorce and mobility, the deterioration of public schools, widespread drug abuse--among many troubles--have left a wide range of children vulnerable, stranded, unprepared for adult life.

These problems are national problems demanding national solutions. But they are also problems of state and local governments, and of individual citizens. Over the last decade numerous cities have assumed responsibility for counteracting the problems besetting children. For example, Seattle has made children a high priority, focusing the efforts of city agencies on children and spurring a wide range of innovative programs for youth. Hartford has drawn together an impressive array of community interests and resources in driving down a high rate of infant mortality. Minneapolis has established a Youth Coordinating Board to enhance and promote the healthy, comprehensive development of children and youth through collaborative action. Cambridge, through a community meeting process, has established long-range goals for its children (See Attachment A).

What warrants such a policy now? The circumstances of Cambridge children are not as dire as those of children in many other cities. Cambridge has great strengths. More than 140 non-profit and public service organizations provide educational and human services to Cambridge residents. Fifty-two organizations devote all or part of their work to youth alone. For many years schools and community organizations in Cambridge have worked together closely and effectively, allowing students access to a wide array of resources.

Yet, as in other cities, large and growing numbers of Cambridge children are undermined by poverty, drugs, illiteracy, abuse and neglect. While Cambridge expanded economically over the last decade, the poverty rate among children continued to climb. By 1986, almost one in four children in the City were living in poverty, significantly above the

national average. It is estimated that one in five Cambridge children suffer from hunger part of each month, and approximately 1,800 families per month request emergency food assistance. Escalating and unaffordable housing costs continue to strain Cambridge families--36% of Cambridge renters pay more than 40% of income for housing. Twenty-five percent of Cambridge teen mothers receive inadequate or no prenatal care--markedly higher than the state average of 10.9%. The school drop out rate has reached 22%.

Mental health problems are reported to be afflicting children at increasingly younger ages, and the number of seriously dysfunctional families, mental health workers report, has seriously climbed. Child care has also become prohibitively expensive for many Cambridge families, forcing parents to choose between placing their children in unlicensed care or leaving their jobs.

Further, while Cambridge is rich in services, the service-delivery system does have some weaknesses:

* **Services often function independently of each other:** Clients can find themselves lost in a maze of valuable but disconnected programs.

* **Cambridge lacks adequate preventive services:** Like other cities, services tend to be crisis-oriented, responding to problems after they have become difficult, if not impossible, to reverse.

* **Residents lack access to services:** As community life becomes more impersonal, some residents simply lack information about existing services. Many are obstructed by language barriers or are denied access because of inadequate transportation.

* **There are only a few comprehensive efforts involving many sectors of the community:** A comprehensive effort should include local government, community leaders and organizations, school administrators and staff, health professionals, and parents.

In addition to mounting problems among children and these service limitations, children's services have fallen victim to downturns in the national and state economies. The result is that the system of services, which has taken decades to build, is chipped away, leaving children at greater risk than ever before. Children need and deserve a firm commitment of public support that does not fluctuate and erode according

to economic times. This policy puts forth such a commitment for children and their families in Cambridge.

II. STRATEGY/APPROACH

This policy begins to address the above-mentioned problems and issues through several strategies and approaches:

Strategies

* **Prevention:**
  First and foremost, it is a prevention policy. It sets forth goals and creates a framework for greatly reducing the number of Cambridge children who will at some point develop serious difficulties. In keeping with its prevention focus, it seeks initially to direct resources and energies toward small children age 0 to 5 years and their parents and school aged children.

* **Coordination and improving access:**
  It suggests ideas for better coordinating and improving access to services.

* **Building a framework:**
  It seeks to build an improved framework for responding to those children who already have pressing problems - children who now require services.

* **Increasing opportunities:**
  It is not focussed solely on childrens' problems, deficits and needs: rather, it seeks to generate activities that create opportunities for all children, that affirm childrens' strengths, that enhance the sense of safety and security of all children, and that give children real hope for the future.

* **Generate ideas:**
  It generates ideas for tending to the needs of all Cambridge children - recognizing that problems like alcohol and other drug abuse and teen pregnancy are not problems of any one segment of Cambridge alone -- and seeks to foster a climate and opportunities that allow all Cambridge children to thrive.

The starting point in pursuing these strategies is a careful focus on the needs of the child. The strategies need to begin with and to return again and again to the needs of children themselves. These strategies should also have as a starting point the assumption that parents should be supported and strengthened--not blamed--for their childrens' difficulties.

- Services need to reinforce--not undermine--parents' natural strengths and resiliencies.

In addition, efforts on behalf of children should capitalize on Cambridges' many strengths. Cambridge is astonishingly diverse--its students originate in 64 countries and speak 46 languages--and children in Cambridge have unique opportunities to learn about and build bridges between their own cultures and others. These efforts should draw on the capacity of its activist community to respond to community needs. These efforts should also tap the resources of Cambridge's universities, draw on the wisdom of the many experts on childrens' services and child welfare in Cambridge and the surrounding area, as well as draw on the knowledge of experts around the country. Finally, those pursuing these efforts should look to exemplary efforts in other cities.

Approaches

In implementing this policy, the approach is to encourage services to children, youth, and families in Cambridge that are preventive rather than reactive; coordinated rather than fragmented; innovative rather than driven by existing service structures; comprehensive, oriented to the needs of children and families seen as whole people; supportive of families, their choices, and their strengths; and responsive to the needs of all families as well as to the different needs of different families.

*Services that are preventive rather than reactive:

Much research evidence suggests that preventive services to young children are the most cost-effective way to encourage healthy development and avoid bad outcomes later in life. For example, excellent programs for early childhood education have been shown to increase school completion rates and reduce rates of teen pregnancy and delinquency in adolescence. According to the General Accounting Office (1990), every $1 spent on pre-natal care saves $4 to $6 in costs for hospital care of undernourished infants, welfare, food stamps, and special-education programs for children born unhealthy.

Many excellent programs in Cambridge already build on this foundation of research evidence. For example, the city's Head Start, Early Intervention, and Visiting Nurse programs reach young, at-risk children with excellent services. However, many children who need these services never get them, or get them later than they should because of long waiting lists.

Therefore, the policy implementation must emphasize strengthening and expanding a preventive approach to children's

services, with the initial focus on infants and children from prenatal care to five years old.

***Services that are coordinated rather than fragmented:**

If a family in Cambridge needs help with (for example) getting health care for an ill child, locating suitable child care, and finding an apartment that will take kids, the parents may feel as though they are trying to find their way through a bureaucratic maze. Different services are provided by different public or private agencies, located in different buildings, staffed by workers with different specialties or expertise, and available to families and children based on different and confusing eligibility requirements. Studies of effective programs for children and youth at-risk suggest, not surprisingly, that these bureaucratic barriers pose the biggest problems to those families who need services the most - and that the programs that work best have staff who are willing to go the extra step and help families get through the maze.

Again, many excellent programs in Cambridge have made a start at this kind of coordination despite the formidable barriers posed by funding sources and regulations from higher levels of government. For example, the WIC program has co-located offices with community health services so that a mother with young children can take her children to the pediatrician and receive her WIC nutrition coupons in the same place. The Bigelow Street Family Shelter has coordinated with the city's Community Learning Center to provide literacy and basic education to homeless mothers during their stay at the shelter facility.

This coordination will be a key component of this policy implementation, taking coordination as far as it can go, challenging providers to link programs so that they best serve the families who need them. One possible approach to coordination, at least for some families, might be "one-stop shopping," where a neighborhood service center offers all the services a family might need in one place.

*** Services that are innovative rather than driven by existing service structures:**

The world surrounding families and children is changing, and programs to support them are changing with it. For example, many more mothers now work while their children are young, requiring that both businesses and service providers consider what it means to balance the roles of parent and provider. Some businesses have responded to these changes with innovations such as parental leave,

child care vouchers, and provisions for ill child care; schools have had to learn how to encourage and stimulate parent involvement when a parent is unavailable for parent-teacher conferences or classroom activities during the traditional school day; Head Start programs, which have traditionally provided excellent preschool programs for part of the day, have started to consider full-day programs.

Under this policy, the City would encourage innovative responses to this and other changes in the circumstances of families and children, innovations that so far as possible respond to the whole life circumstances of the family.

* **Services that are comprehensive, oriented to the needs of children and families seen as whole people:**

One special category of innovation that holds particular promise for many children and families is innovation to serve children and families in comprehensive ways. These innovative programs work precisely because they do not artificially isolate a health problem from an educational problem or isolate the mother's need from the child's need. Examples of such innovative programs include:

***PACE** (Parent and Child Education): Started in Kentucky, it is a program that combines an adult education program for mothers without a high school diploma with an excellent preschool program for the children. The program has been widely replicated; much of its appeal is the effect on the whole family when two members become excited and involved in education.

***Family Support Programs:** Based in neighborhood drop-in centers offer families a chance to pick and choose the services they would like - from parent support groups to play groups to counseling to drop-in child care - and to link up to a comprehensive range of services through referral. Several states are experimenting with such programs as an approach to supporting children and families comprehensively but not intrusively.

* **Services that are supportive of families, their choices and their strengths:**

Bringing up children today is hard for all families. Families in Cambridge struggle with how to keep a job and care for a sick child; how to find child care that is reliable and high quality; how to strengthen a child's ability to make responsible decisions about

drugs; how to encourage a child to believe he can succeed in school; and in general how to bring children up to be healthy, responsible, and productive adults in a world that too often seems not to listen to parents or to children.

Under this policy, the City will recognize diversity and encourage programs that support the many different choices that families make about how to bring up happy and healthy children and that recognize the strengths of families as well as the burdens on them. For example, a parent caring for an emotionally disturbed child at home will need respite care to support them in their choice to be a primary caretaker. Other parents may seek out of home placement for their child and will need assistance in selecting the best option for their family.

* **Services that are responsive to the needs of all families, as well as to the different needs of different families:**

Under this policy, the City will encourage programs that respond to needs that all families experience - needs like open space for children to play in, affordable and high quality child care, and help talking to children about how to make responsible decisions about drugs and other issues. In assessing budget priorities, those that meet children's needs will be given high priority.

At the same time, the City will pay special attention in committing resources to the needs of those families who are bringing up children with the least support, social and economic, and who are therefore most vulnerable and at risk. For example, the policy will encourage programs that reach out to families who are members of racial, linguistic, and ethnic minorities; to low-income families; and to young mothers and their children. For example, one program recommended by a citizen study group would provide home visits through the Visiting Nurse Association to all teen mothers with infants in Cambridge.

III. IMPLEMENTATION

In order to implement and support the strategies and approaches identified in this policy plan, the City of Cambridge will create a Commission called the "Cambridge Commission on Children, Youth and Families," charged with directing a comprehensive, local response to the needs of children, youth, their families and other caregivers.

Some of the specific duties of the Commission will include: recommending children, youth and family policy to the City Council;

mobilizing and coordinating resources of Commission members and other organizations to develop joint projects; reviewing and making recommendations regarding City expenditures affecting children, youth and families; enlisting the cooperation of a broad array of individuals and organizations to further the intent and purposes of the Commission; mobilizing and coordinating other efforts in the City targeted at children, youth and families; and conducting fundraising campaigns to support the priorities and projects of the Commission.

It is proposed that the Commission consist of twenty members including the Mayor, a member of the City Council, a member of the School Committee, the City Manager, the Superintendent of Schools, the Assistant City Manager for Human Services, the Commissioner of Health and Hospitals, a member of the philanthropic community, a representative from a State agency serving children, youth and families, one representative each from the corporate/business community and the university community, and a representative from the early childhood community. In addition, five members living in the City shall represent the community-at-large and/or active parents groups or other groups involved with children and their families. Three members with backgrounds in current Commission priorities will serve shorter terms. The Commission will hire and oversee the efforts of an Executive Director.

The Commission will have a committee structure comprised of both Commission members and representatives from the community-at-large. Initially there will be a Public Policy Committee, a Program Committee, a Development Committee, a Research and Evaluation Committee, a Parents' Committee, and a Youth Committee.

The Commission at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as different neighborhoods and will include in its membership, individuals with children who are consumers of services.

Chapter _____

COORDINATING COUNCIL FOR CHILDREN, YOUTH AND FAMILIES (THE KIDS' COUNCIL)

Established

There shall be established a Coordinating Council for Children, Youth and Families (The Kids' Council) (_____).

Function and Purpose

The Coordinating Council for Children, Youth and Families (The Kids' Council), refer to herein as the Council, will direct a comprehensive, local response to the needs of children, their families, and other caregivers, according to the guiding principles put forth in the Children, Youth and Family Policy Plan. These guiding principles are:

* To promote services and other activities that are preventive rather than reactive.
* To promote services and other activities that are coordinated rather than fragmented, and that result in improved accessibility.
* To encourage innovative responses to needs.
* To generate activities that create opportunities for all children, their families, and other caregivers.
* To support families, their choices, and their strengths, recognizing diversity and the many different choices that families make about how to bring up happy and healthy children.
* To promote services and other activities that are comprehensive, oriented to the needs of children and families seen as whole people.

Membership-Appointment-Term

A. Council Members shall be comprised of the following offices, disciplines and interests:

* The Mayor
* A member of the City Council
* A member of the School Committee
* The City Manager
* The Superintendent of Schools
* The Assistant City Manager for Human Services
* The Commissioner of Health & Hospitals
* A member of the philanthropic community
* A representative from a State agency serving children, youth and families
* A representative of the corporate/business community
* A representative of the university community
* A representative from the early childhood community
* Five members shall represent the community-at-large and/or represent active parents groups or other groups involved with children and their families. These members shall be residents of the City.
* Three members shall be identified to serve one year terms. These members shall represent specific areas to be addressed by the Council's agenda or other identified interests relating to children (for example, a person involved with children's issues nationally).

B. The Council shall have an Executive Committee comprised of a subset of the Council and including the Chairperson to enact the business of the full Council between Council meetings.

C. The Council at all times shall be representative of the socio-economic, racial and ethnic composition of the City as well as of different neighborhoods and shall have members who are resource people as well as individuals with children who are consumers of services.

D. City Council and School Committee Members shall be appointed by the Mayor. All other members shall be appointed by the City Manager from recommendations provided by the Council. The Council shall consult with groups

involved with children and shall advertise widely to obtain names of qualified candidates.

E. Selected and appointed officials shall hold terms coterminous with their election or appointment.

F. The other members shall be appointed initially for terms of one, two, and three years. After the initial term, all Council Members shall be appointed for a term of three years, except for the three, one-year term members.

G. If any appointed Council Member misses half of the scheduled meetings of the Council during a calendar year, the absences of the Council Member shall be reviewed by the Chair and the Chair shall recommend appropriate action to the City Manager.

H. Vacancies on the Council shall be filled no later than sixty days after the vacancy occurs; and if a vacancy occurs prior to the expiration of the member's term, an appointment shall be made for the remainder of the term.

Membership-Qualifications

A. All prospective Council Members shall have belief in and support the special interests of children and must have a willingness to work on behalf of all the City's children to ensure they have the opportunity to maximize their individual potential and healthy development.

B. Every effort will be made to appoint Council Members residing in the City of Cambridge.

Officers-Quorum-Adoption of rules and regulations-Committees

A. The Council shall meet as often as necessary to conduct its business but no less than four times annually.

B. The Council shall be chaired by the Mayor. If the Mayor chooses not to chair, he or she will approve another Chairperson from among Council Members.

C. Eleven members shall constitute a quorum for the purpose of conducting the business of the Council and all decisions shall be by majority vote of the Council Members present and voting.

D. The Council shall adopt rules and regulations consistent with this chapter and the laws of the Commonwealth to carry out the policy and provisions of this chapter and the powers and duties of the Council in connection therewith.

E. All records of the Council shall be public except as provided by State law.

F. Council Members shall serve without compensation but reasonable per diem and necessary expense reimbursement shall be paid out of the budget of the Council.

G. Council Members shall be classified as special municipal employees for the purposes of Chapter 268A of the Massachusetts General Laws. (Ord. 1016(part), 1984: prior code Ch. 25 3(C).

H. The Council shall develop a committee structure. To broaden participation from the community, members of these committees will be a mix of Council Members and the community-at-large. Parents shall be represented on all committees. The chair or co-chair of each committee shall be a Council Member. The Council shall advertise widely to obtain names of qualified candidates. The committees will include:

* A Public Policy Committee to monitor and make recommendations regarding local, state, and federal policies impacting children, youth and families.

* A Program Committee to continually assess social service needs and trends and to highlight areas that need attention.

* A Development Committee to assist the Council's grant writing and fundraising operations.

* A Research and Evaluation Committee to develop evaluation tools for the Council's identified plans and to measure, to the extent possible, outcomes of the Council's work. It shall produce every three years a report on the status of children in Cambridge.

The Council shall have authority to create other such committees or redesign existing committees to ensure the Council's effectiveness. In some cases, advisory committees with particular expertise that

coincides with Council priorities will be formed to guide the Council.

Executive Director-Appointment

A. There shall be an Executive Director of the Coordinating Council for Children, Youth and Families (The Kids' Council) who shall be appointed by the City Manager with the advice and recommendations of the Council.

B. The Executive Director shall have demonstrated administrative expertise, a background of direct participation in the provision of children's services, and the ability to work cooperatively with the diverse segments of the City.

C. The Executive Director will be sited within a city department from which it will receive administrative support.

Powers and Duties

The powers and duties of the Council shall include the following:

A. Recommend children, youth and family policy to the City Council, School Committee and other appropriate committees.

B. Review and make recommendations regarding the City's allocation of resources affecting children, youth and families to the appropriate officials.

C. Act as a catalyst in mobilizing and coordinating other efforts within the City aimed at responding to the needs of children, youth and families.

D. Act as a clearinghouse for efforts within the City aimed at responding to the needs of children, youth and families.

E. Act as an advocate with regard to State and Federal policies which impact on the City's children, youth and families.

F. Mobilize and coordinate resources available to Council Members and organizations they may represent to develop joint projects to respond to the needs of children, youth and families.

G. Enlist the cooperation of various racial, religious and ethnic groups, civic and community organizations, labor organizations, fraternal and benevolent organizations, and other groups and organizations to further the intent and purposes of this chapter.

H. Raise and direct funds to support the projects and priorities of the Council and accept money, gifts and services for these purposes.

I. Encourage youth input through the creation of specific opportunities for youth to provide their perspectives on their lives, community and issues facing them.

City of Cambridge

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IN CITY COUNCIL

MINUTES MONUMENTS COMMITTEE
February 14, 1991

Present: City Councillor Frank Duehay (Chair), Former Mayor Alfred Vellucci (School Committee), Joseph Connarton (City Clerk), Charles Sullivan (Historical Commission), Paul Feloney (Department of Public Works), Don York (Cambridge Public Library), Kathleen Wolcott (Cambridge Rindge and Latin School), William Cabral (Veterans Services), Gerry Boyle (Microfilm Department), Louisa Terrell (Councillor Duehay's Intern), and Sean Denniston (Mayor's Office, Secretary)

Regrets: Zelma Evelyn (Auditing Department), Annabelle Herbert, Roy-Alan Hansen, Pallas Lombardi (Arts Council), Ellen Fitzgerald Watson (License Commission)

The meeting started at 2:35 with a reintroduction of members for previously absent member Wolcott.

The Chair told the committee of the availability of some City funds, from the Mayor's Office and the City Council, to hire a graduate student for twelve weeks over the summer. The Chair than proposed:

1. A sub-group of members to draft a job description and work program for graduate student.

2. A mechanism for selection of graduate student.

The Chair appointed Charles Sullivan, Don York, William Cabral, and Sean Denniston to pursue the above assigned tasks.

William Cabral (Veterans Services) presented a report of all known City squares named for veterans. Mr. Cabral suggested that some new signs be made separating veterans killed in action from those who resided in Cambridge. The Chair asked whether small descriptions could be written for the honored veterans. The City Clerk, Mr. Connarton, asked if that task could prove difficult for veterans not killed in action who might still have family living in Cambridge.

Don York (Cambridge Public Library) presented a bibliograpic description of files in the City Engineer's Office related to City history and place names. Mr. York further informed the committee that the basement of the East Cambridge branch of the Public Library holds City records of City Council meetings from c.1900-1935 and 1943-59. Former Mayor Vellucci expressed concern about the omission of well known City squares and streets (i.e., Hurley Street).

Charles Sullivan submitted a memorandum of a suggested work program and a definition of "art". The Chair suggested that the priority for the Commission's work should be discovering the unknown followed by an inventory thereafter.

Former Mayor Vellucci admonished the committee to seek expertise and work to avoid omissions. Mr. Vellucci also expressed concern that veterans not killed in action be duly acknowledged. Mr. Vellucci suggested a room be allocated with maps and documents to be spread out and give project workers a sense of achievement and progress made.

Discussion then centered on the hiring of consultants or student workers and whether this hiring falls under chapter 30B, purchasing regulations. Mr. Feloney noted that architects do not fall under the regulations.

The Secretary answered Mr. Vellucci's concern about job performance and that the students from the Summer Jobs Program will come from different neighborhoods, increasing their awareness of their neighborhoods. Mr. Sullivan offered to supervise students over the summer. He also noted in past years, proper supervision of summer students had been missing. The Chair suggested the next meeting of the committee (March 14 ed.) should discuss the program and include a report of the graduate student appointment subcommittee.

Mr. York spoke of the danger of "fools errands" and a high degree of discouragement if the project is too ambitious or cumbersome. As an example a researcher circa 1980 had undertaken an inventory of City named areas quickly got bogged down. Mr. Connarton suggested calling the Chamber of Commerce to cull any information they may have on backgrounds of City squares, business personalities, or memorials. The Secretary agreed to call the Chamber by the next meeting.

The Chair expressed his desire for a strict timetable and for getting good people working. The Chair also queried the City Clerk on the approximate number of Council records. The answer was "hundreds of pages". Ms. Walcott suggested realistic research goals for the summer and to take the task slowly. Ms. Walcott further commented that any work undertaken over the summer should be able to continue over the year with work-study students.

The Chair hoped the project will continue with further funding during the year. Former Mayor Vellucci offered his services to the Secretary for special projects or services.

Meeting adjourned at 3:20 p.m. with the next meeting called for **March 14, 1991, 2:30 p.m. in the Ackermann Room, City Hall.**

ATTACHMENT A.

THE CITY'S LONG-RANGE GOALS FOR ITS CHILDREN

It shall be the policy of the City of Cambridge to take a leading proactive role to enable Cambridge children to grow up to be well-functioning, healthy, productive, educated adults. The City shall develop a comprehensive response to the needs of children working towards the following long-term goals or rights of children that form a comprehensive framework:

PRENATAL CARE: All pregnant women in Cambridge should receive early, continuous and high-quality prenatal and peri-natal care.

HEALTH CARE AND NUTRITION: All children in Cambridge should have the benefits of good nutrition, ongoing preventive health care and treatment.

CHILDCARE: All families who need childcare should have access to quality, affordable care.

EARLY CHILDHOOD EDUCATION: All families with preschool age children should have access to quality early childhood education programs.

EDUCATION K-12: Every Cambridge child should have equal access to quality education from kindergarten through high school.

RECREATION AND ENRICHMENT: All children should be offered recreation and enrichment programming that fosters positive self-esteem, skill building, creativity, and develops good habits in current and future use of leisure time.

SUBSTANCE ABUSE: All children and youth in Cambridge have the right to an environment that promotes responsible decision making and supports them in their decision not to use or abuse alcohol and other drugs.

SEXUALITY: All children in Cambridge should have the knowledge and resources to make healthy decisions and responsible choices about his or her sexual behavior.

CAREER DEVELOPMENT/EMPLOYABILITY: All children and youth in Cambridge should receive the resources they need to make the transition from school to work and to achieve economic security.

MENTAL HEALTH: All children and their parents should have the benefits of timely and appropriate mental health care.

SAFETY/VIOLENCE: All children should have the right to grow up in safety, protected from violence, abuse or neglect.

BASIC NEEDS: All families in Cambridge should have access to a decent standard of living which includes an adequate income, affordable housing, and personal safety.

Order # 23 O-22

Mayor Wolf re: ordinance amendment to establish a Coordinating Council for Children, Youth and Families.

2/1/91 Passed to be ordained 7-0-2.

In City Council,

February 4, 1991

Order adopted Referred to the Ordinance Comm. for hearing & report.