

Prenatal to Age 3:

A Review of Policy Proposals and Community Perspectives

O C T O B E R 2 0 1 6

This document is a compilation of perspectives from a wide variety of stakeholders regarding needs, assets, and recommendations related to the promotion of healthy child development for Minnesota children (prenatal experience to preschool) and their families. Information was gathered from published materials from government organizations and community groups, as well as from a state-wide listening tour in which community-members were invited to share their perspectives on what is working and what is not in achieving the goal of healthy development for all children.



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Section 1: Source organizations and materials (prior policy proposals)

Accessibility and culturally specific care

Themes:

1. Community members should be leading (or at least represented/involved in) efforts that directly affect their community
2. New programs and people designing them should be culturally competent, and the programs/efforts should reflect the cultural background and desires of the community
3. Supports and programs should be more widely publicized and easier to access
4. Education and exchange of knowledge should be bidirectional between community and professionals working with and in the community

Source	Accessibility and Culturally Specific Care
Voices and Choices for Children (VCC): Emarita, <i>High Impact Opportunities for Action</i>	<ol style="list-style-type: none"> 1) Make provider training and support more accessible and affordable for minorities, and include recognition and incorporation of cultural communities' value in training. 2) Create new community grants for access and quality improvements in child care and well-being services for children and their families
VCC: MDE Cultural and Ethnic Communities Leadership Council (Annual Report 2014)	<ol style="list-style-type: none"> 1) Increase cultural competence, sensitivity, and awareness; involve diverse groups in key conversations 2) Move toward DHS leadership demographics that match broader community demographics 3) Increase the number of minority health care providers, thus increasing the availability of culturally specific care 4) Position equity in access and outcomes as a major goal
VCC: Shannon & Ramos, Culture Counts: Engaging Black and Latino Parents of Young Children in Family Support Programs	<ol style="list-style-type: none"> 1) Involve cultural informants in process of creating new programs 2) Design programs to be consistent with parents' values 3) Frame advertising to parents to reflect culturally specific goals and issues 4) Offer multiple opportunities for engagement 5) Revisit cultural considerations often 6) Promote a shared understanding of what is meant by parent engagement 7) Partner with community organizations as bridges to parents 8) Foster a culturally and linguistically diverse workforce 9) Demand rigorous research on effectiveness of employed strategies
VCC: Northside Achievement Zone 2013 Annual Report	<ol style="list-style-type: none"> 1) Make families into leaders to build achievement from within 2) Data-driven strategies; extensive tracking 3) Holistic approach (early childhood ed, housing stability, behavioral health, financial literacy, career development, and parenting skills)

Source	Accessibility and Culturally Specific Care
VCC: Collaboration between Cultural Beginnings, Cultural Dynamics, the Early Childhood Resource Center, Greater Minneapolis Day Care Association, and Resources for Child <i>Caring Voices and Choices of People of Color for Their Children</i>	<ol style="list-style-type: none"> 1) Give people of color the leadership of plans affecting their communities 2) Constantly solicit community input in defining goals and objectives in evaluating outcomes 3) Compel staff in the Early Childhood field to undergo training to illuminate and dispel biases and racism and help them understand the issues communities of color face 4) Make the CFL, the DHS, and their programs accountable to communities of color 5) Develop a foundation to monitor systemic change in the CFL and DHS 6) Do not relegate projects benefiting people of color solely to the “diversity” cut of funding
VCC: Hestness & Huenemann <i>American Indian Community Blueprint</i>	<ol style="list-style-type: none"> 1) Creating spaces for the appreciation of shared culture for American Indians (Pow Wows grounds, native art galleries, restaurants serving traditional dishes, stores selling genuine native products) 2) Increasing the availability of spiritual training and for learning native languages 3) Increase the number of (and support for) American Indians holding political office 4) Build community relationships with governmental institutions 5) Foster grassroots civic engagement and understanding of the political process
VCC: ICF International. <i>The Way Forward: USDHHS Administration for Children and Families, Office of Planning Research and Evaluation, Research with American Indians and Alaska Natives</i>	Engage the tribes in a research capacity. Discuss with tribal stakeholders what is feasible, realistic, and acceptable in their communities
VCC: Rose <i>Community Voices on the Issues Survey (The Council on Black Minnesotans)</i>	<ol style="list-style-type: none"> 1) Systemic bias <ul style="list-style-type: none"> - Address inequity in policies and racism in government systems - Address Black community’s reinforcement of human rights issues by abuse of each other’s rights - Address White feeling of racial superiority 2) Positive enforcement of rights <ul style="list-style-type: none"> - Create equal access to economic opportunities, health, education, and housing - Enable the Department of Human Services to fulfill its obligations to minority communities and prosecute human rights complaints promptly
VCC: Hispanic Advocacy for Community Empowerment Through Research (HACER) <i>Latino Realities 1998</i>	<ol style="list-style-type: none"> 1) Central cultural space for appreciating Latino culture. -Address need for a way to deal with cultural/ethnic frictions between factions of the community. 2) Help for parents struggling with cultural divide between selves and children, especially on subject of sexuality
Minnesota Prenatal to Age Three Framework	<ol style="list-style-type: none"> 1) Systems are flexible, responsive, and easy to navigate <ul style="list-style-type: none"> - Data systems link, collect, and report on early childhood programs, services, and supports 2) Trust is essential among community members attempting to support children, prenatal -3, and their families as well as those who use and deliver services
Elders for Infants <i>Prenatal to age 3 framework for optimal development</i>	<ol style="list-style-type: none"> 1) Families can access adequate transportation systems

Source	Accessibility and Culturally Specific Care
Early Learning Council <i>Early Childhood Comprehensive Plan Framework</i> (April 2011 draft)	1) Increase access to financial and other concrete supports for young children and families in crisis -Develop avenues for otherwise ineligible at-risk families to access high quality care through child-care subsidy -Promote interagency coordination in communication and providing parent and family supports through state and local service providers -Create access points for service coordination and navigation for families -Promote increased use of the Earned Income and Child Care Tax Credits -Support and promote parent, educator and caregiver education on abuse and neglect

Community development

Themes:

1. Communities need help creating an infrastructure that will eventually enable them to be independently affecting change from within the community
2. We need to invest in our communities so that the physical environments are conducive to health, well-being, safety, and accessibility (e.g., public transportation and bike infrastructure).

Source	Community Development
VCC: Hestness & Huenemann <i>American Indian Community Blueprint</i>	1) Advocating for expansion of public transit options for native communities 2) Planning and supporting the development of bike lanes
VCC: Gibson & Scherer <i>Social Construction of Success for Grandchildren of African American Grandmothers</i>	Take responsibility and plan for the future- setting goals, choosing friends wisely, treating women with respect, meeting obligations without prompting
Minnesota Department of Health <i>Prenatal to Three Process A Progress Report: August 2012-December 2014</i>	1) Build the capacity of communities (cultural and geographic) to take action to create healthy futures for pregnant women, children, and their families 2) Offer assistance and learning opportunities to support state agencies, advisory committees, and local initiatives in the development of their own approaches and strategies in creating opportunities for more families to have safe, stable, nurturing relationships and environments and social and economic security
Minnesota <i>Prenatal to Age Three Framework</i>	1) Solutions lie within families and communities – programs and resources must provide children and families needed opportunities to put these solutions in place 2) People have the right to make the decisions that affect their lives – the recommendations based on this framework will require the authentic inclusion of families

Economic development

Themes:

1. Community members need ways to learn basic financial skills (e.g., through a community financial center) and a place to go for resources and consultation on issues like loans, credit repair, etc.
2. Financial support should be provided in ways that don't dis-incentivize increasing reported income
3. Need more programs that teach useful, professional, marketable skills and inform about employment opportunities or continuing education
4. Raise the minimum wage – economic stability and having basic needs met is imperative for positive child development

Source	Economic Development
Voices and Choices for Children (VCC): Emarita, <i>High Impact Opportunities for Action</i>	Provide financial support for families in a way that avoids creating penalties and disincentives for families to increase their incomes
VCC: MDE Cultural and Ethnic Communities Leadership Council (Annual Report 2014)	Recognize that economic instability and education are daily, pressing issues in marginalized communities and that this is a major factor in overall health
VCC: <i>Way to Grow What We Do: Great by Eight</i>	Help families make the most of limited resources by teaching basic financial skills
VCC: Hestness & Huenemann <i>American Indian Community Blueprint</i>	<ol style="list-style-type: none"> 1) Increase training opportunities for health care careers 2) Create a community financial center and/or credit union to provide low-interest business and home loans, financial planning services, and credit repair classes
VCC: ICF International. <i>The Way Forward: USDHHS Administration for Children and Families, Office of Planning Research and Evaluation, Research with American Indians and Alaska Natives</i>	Continue Health Profession Opportunity grants
VCC: Gibson & Scherer <i>Social Construction of Success for Grandchildren of African American Grandmothers</i>	Separate the idea of "success" from financial gain. Change perception that income is the best or only measure of success, instead emphasizing personal virtues and respect of upstanding members of the community
VCC: <i>Rose Community Voices on the Issues Survey (The Council on Black Minnesotans)</i>	<ol style="list-style-type: none"> 1) Address unemployment because of race, age, and sex discrimination 2) Address the inequitable share of State contracts going to Blacks 3) Encourage blacks to move into leadership in State governments/agencies 4) Install racial quotas to restore system to wholeness 5) Treat pay equity as a human right 6) Increase the minimum wage

Source	Economic Development
VCC: Comunidades Latinos Unidas En Servicio	<ol style="list-style-type: none"> 1) Boost Latino employment 2) Encourage equal opportunities for Latinos in the labor markets 3) Provide access for Latino adults and youth to employment opportunities, education, career and skills training which equate to continued employment 4) Assist Latinos in becoming knowledgeable consumers 5) Assist in reversing inequalities and promoting programs that highlight Latino cultural values and economic factors 6) Focus on removing institutional barriers, whilst advocating for policies that improve health, education, and economic inequalities
VCC: Hispanic Advocacy for Community Empowerment Through Research (HACER) <i>Latino Realities 1998</i>	<ol style="list-style-type: none"> 1) More opportunities for jobs beyond minimum wage employment 2) employment training that includes job skills as well as career-search and interview skills
VCC: Yang & Solheim. <i>Financial Management in Hmong Immigrant Families: Change and Adaptation</i>	<p>Financial institutions who would like to reach the Hmong community as a consumer base should</p> <ol style="list-style-type: none"> 1) Hire employees who speak Hmong, thus facilitating ease of use and understanding for first generation immigrants 2) Make ATMs usable in the Hmong language 3) Consider offering group savings plans to replicate the money-pooling practices with which Hmong families are already familiar
Minnesota Department of Health Prenatal to Three Process A <i>Progress Report: August 2012-December 2014</i>	<ol style="list-style-type: none"> 1) Assure opportunities for a healthy start for pregnant women, children, and their families by eliminating racial, social, and economic barriers to positive growth and development
Elders for Infants <i>Prenatal-3 Plan for Minnesota</i>	<ol style="list-style-type: none"> 1) Basic needs of the family (housing, income, health, etc.) must be met for optimal growth and development of children prenatal to three 2) Infants have a human right to proportional financial investment from public resources. We are all responsible and we all benefit when we assure our youngest children have the opportunity to thrive in their family and community
Elders for Infants <i>Prenatal to age 3 framework for optimal development</i>	<ol style="list-style-type: none"> 1) Parents earning adequate wages or receiving adequate assistance 2) Minimum paid 3 month parental leave 3) Family-friendly workplaces 4) Food programs are adequate, accessible, and respectful 5) Single parent families increase MFIP participation 6) Increase WIC participation
Environmental Scan of State Agency Services and Programs for Prenatal- 3: DHS Community Partnerships and Child Care Services Division	<p>Child care assistance program: provides financial assistance to help low-income families pay for childcare so that parents may pursue employment or education leading to employment, and that children are well cared for and prepared to enter school ready to learn.</p>
Environmental Scan of State Agency Services and Programs for Prenatal- 3: DHS Transitions to Economic Supports Division	<ol style="list-style-type: none"> 1) Offers financial assistance to help pay rent, buy clothing, and meet other basic needs. 2) Provides mandatory employment services to parents.

Education

Themes:

1. Increasing access to high quality early childcare AND higher education would benefit children 0-3
2. Empower parents to navigate the educational system for themselves and for their children
3. Shift focus from only academic achievement to whole child within their cultural context
4. Increase resources for Family Friend and Neighbor care before school entry – do not only push center-based care
5. Cultural relevance of education for communities
6. Smart, nuanced collection and use of data
7. Create reliable accountability systems for early childhood programs

Source	Education
Voices and Choices for Children (VCC): Emarita, <i>High Impact Opportunities for Action</i>	Develop a culturally sensitive system of quality standards or goals appropriate for each type of care: center based, family home care, and FFN
VCC: Way to Grow <i>What We Do: Great by Eight</i>	2) Parent Leadership Council- guides parents to step up and teaches them how to be advocates for their children’s success in the school system. Connects them with resources to further their education and grow their careers.
VCC: Hestness & Huenemann <i>American Indian Community Blueprint</i>	1) Increase the availability of early childhood programs and childcare 4) Create an education research institute to document proven methods specific to the community
VCC: Metropolitan Urban Indian Directors, Minneapolis School Districts <i>Memorandum of Agreement</i>	Indigenous best practice schools include: Continuous improvement site teams American Indian Family Involvement Center Stable teaching force
VCC: Romero-Little <i>How Should Young Indigenous Children Be Prepared for Learning?</i>	1) Identify important considerations for the community in creation of their own early learning programs (philosophy and goals; reflection of the culture; resources available and needed; needs among young population; language ideologies) 2) Identify instructional approaches that will give children what they need to succeed in school

Source	Education
<p>VCC: Hassan, Mahmoud, & Mahmoud. A Crisis in Our Community: Closing the Five Education Gaps</p>	<p>Gaps that comprise achievement gap:</p> <ol style="list-style-type: none"> 1) Preparation <ul style="list-style-type: none"> -Ensure access to high quality, certified ECE -Ensure family support -Implement community resources and social services in schools -Ensure that parents receive education and training 4) Teaching <ul style="list-style-type: none"> -Place best teachers where greatest need exists -Culturally competent educators -Effective teacher evaluation and coaching -Transform traditional teaching preparation 5) Leadership <ul style="list-style-type: none"> -Use one-table leadership approach from all cross-sectors -Implement or improve evaluation and professional development of school leaders -Ensure leaders are familiar with implementing best practices for success -Principals must be able to choose their teachers
<p>VCC: Gray-Hall: <i>NdCAD's Sankofa Reading Tutorial Program</i></p>	<ol style="list-style-type: none"> 1) Improve awareness of programs 2) Increase breadth of available programs and explore ways to scale up 5) Measure data on boys and girls separately, not just in the aggregate 6) Improve the program's data management systems to increase consistency and accuracy of reporting.
<p>VCC: Lozenski & Ford, <i>From Individualism to Interconnectedness in Six Lenses for Anti-Opressive Education</i></p>	<ol style="list-style-type: none"> 1) Demythologize prevalent educational and social narratives of black life by using counter-narratives or counter-storytelling to challenge mainstream narratives and by leading students to conduct interviews with significant members of the community who have challenging ideas- use a mindset of critical examination to deconstruct the mainstream mythology of African inferiority 2) Distribute educational responsibility widely across community networks and sources <ul style="list-style-type: none"> -Give students chance to learn from community members who understand student's experience and can put cultural and self-worth lessons in terms that are relatable to the student of African descent -Encourage investment in development and education of the whole child, rather than in just imparting factual information. -Public-forum educators can encourage this process and holistic well-being of their students by examining their own frameworks and associations with the students' culture and inviting community educators to formal educational spaces and/or taking students into spaces of those community educators.
<p>VCC: <i>Rose Community Voices on the Issues Survey (The Council on Black Minnesotans)</i></p>	<ol style="list-style-type: none"> 2) Cultural relevance <ul style="list-style-type: none"> -Create non-traditional paths to certification to gain more minority teachers -Acknowledge alternative systems of learning - Focus on inner-city students and urban-specific challenges to education

Source	Education
VCC: Chicano/Latino Affairs Council <i>Report to Governor Mark Dayton & MN State Legislature</i>	2) Improve the quality and cultural competency of instruction -Recruit and train effective Latino educators -Make teacher preparation programs more competitive -Increase pay for beginning teachers and improve policies to help districts keep truly effective teachers -Train and support teachers in culturally responsive curriculum and instruction 4) Reinforce the value of the foreign language and culture that Latinos bring to Minnesota
VCC: Council on Asian Pacific Minnesotans	1) Disaggregate data on Asian Pacific Students 2) Tailor monitoring and intervention efforts toward specific subgroups with additional challenges 3) Increase cultural competency and awareness among educators 4) Seek input from refugee-experienced and socioeconomically disadvantaged Asian Pacific people on educational goals and policies
Minnesota Prenatal to Age Three Framework	1) Infants and toddlers reaching critical developmental benchmarks -Children demonstrate proficiency in three domains (literacy, mathematics, and personal/social development) at kindergarten entrance -Infants and toddlers with high needs participating in early learning and development programs that are in the top tiers of the tiered quality rating and improvement system -Increase rates of teen parents receiving high school diploma -Children from 0-3 with disabilities improve acquisition and use of knowledge and skills 2) High quality early child care and education programs serving infants and toddlers throughout the state 3) Participation in home visiting, Early Head Start, ECFE, and other parenting models 4) Participation in IDEA part C services
Elders for Infants <i>Prenatal to age 3 framework for optimal development</i>	1) Home visiting and coaching available for new parents and at-risk families and children 2) Universal parenting education available 3) Parents able to further their education and training -Teen parents receive child care and high school education 4) High-quality relationship-based child care/education services available, accessible, and affordable for all infants and toddlers 5) Stability of caregivers supported by adequate remuneration 6) Diversity of caregivers; culturally competent care 7) Early childhood special education and services available 8) Quality pre-service and in-service training for EC staff
Build Initiative: <i>Family, Friend and Neighbor Care</i>	1) Self-help networks for family friend and neighbor care 2) Play and learn groups and other fun developmental activities and outings in community settings for providers of FFN to increase support and reduce isolation and stress

Source	Education
<p>Early Learning Council <i>Early Childhood Comprehensive Plan Framework</i> (April 2011)</p>	<p>1) From birth, young children in Minnesota develop the skills, knowledge, and accomplishments to be fully prepared for kindergarten with no disparities by race, income, or geography</p> <ul style="list-style-type: none"> - Establish a consistent and universal kindergarten readiness assessment system - promote alignment of early care and education programs and public schools including the prek-3 concept - promote a coordinated system of early screenings and assessments for school readiness, health, and development <p>2) Increase the quality of early childhood programs throughout the state and 3) increase percentage of young children participating in these program</p> <ul style="list-style-type: none"> -Implement a statewide QRIS early care and education program -Increase funding through public and private measures for access to quality programs -Support local flexibility in creating coordination between ECFE/School readiness/ECSE/Head Start/private child care programs -Promote both continuity and quality of care by linking child care subsidy to quality measures <p>4) Increase the percentage of providers (including FFN) who participate in all types of professional development and who achieve competence and/or degree status</p> <ul style="list-style-type: none"> -Develop and implement a comprehensive professional development system -Identify and address the capacity of two and four year institutions in providing adequate training for providers

Source	Education
<p>Mayor Betsy Hodges: <i>Cradle to K Cabinet Plan to Address Early Childhood Disparities in Minneapolis</i></p>	<p>Cradle to K Goal 1: All children ages 0-3 will receive a healthy start rich with early experiences that will prepare them for successful early education and literacy</p> <ul style="list-style-type: none"> -Increase early childhood screening at age 3 <ul style="list-style-type: none"> A) Increase number of clinics participating in Close the Loop Project B) Develop a universal tool to easily maintain and track screening information on young children -Improve mental health services of children birth-3 <ul style="list-style-type: none"> A) Develop a community plan on how to identify the mental health needs of children birth to age 3 in Minneapolis and how to access resources, training, and mental health consultation for families and service providers B) Allow children experiencing homelessness birth to 3 to automatically be eligible for federally mandated early intervention services for infants and children. -Decrease “word gap” of children birth-3 <ul style="list-style-type: none"> A) Create a “30 Million Word Gap” community initiative to aid in closing the “word gap” and help children with brain development B) Support the Minnesota Department of Health in developing a prenatal-3 framework. -Expand targeted home-visiting services <ul style="list-style-type: none"> A) Support continued and expanded funding for evidence-based and culturally relevant home visiting practices and standards with a focus on the most vulnerable populations throughout the state B) Examine a variety of funding strategies so there is no loss of service and some expansion of services that aligns with standards -Increase community awareness and engagement in the importance of early childhood development <ul style="list-style-type: none"> A) Create community discussions on the issues and importance of early childhood development and the issues around the inequality of opportunities for healthy development B) Use the <i>Raising of America</i> series on PBS to springboard opportunities for discussion on early childhood in the community C) Partner with employers and build early childhood champions among local businesses that provide workplace policies that promote strong families (e.g., paid parental leave, paid sick time, and/or offer ways to help employees access high-quality childcare D) Promote the importance of healthy father involvement in child development and the father’s role as a protective factor in preventing adverse childhood experiences and strengthening families.
	<p>Cradle to K Goal 3: All children ages 0-3 will have continuous access to high quality child development centered care</p> <ul style="list-style-type: none"> -Ensure that low-income families have access to financial resources to afford high quality early learning programs <ul style="list-style-type: none"> A) Recommend increased administrative flexibility and funding for federally funded child

Source	Education
<p>MinneMinds: <i>A Better Chance (ABC) Act</i></p>	<p>1) Fully fund Parent Aware to continue the expansion of high-quality early learning throughout Minnesota -Ensure continued growth in the number of Parent Aware rated providers across the state, as well as ongoing support for rated providers and implementation of improvement strategies such as stronger recognition of cultural awareness</p> <p>2) Create 9,600 new State Early Learning Scholarships for three- and four-year-olds to attend high-quality early childhood programs -This ensures every three- and four-year-old has access high-quality early childhood programs to close opportunity gaps before school -This is necessary to set the stage for providing access to all in-need children from zero to five, because the opportunity gap begins as early as nine months of age</p> <p>3) Update the Child Care Assistance Program (CCAP) to ensure all state funding meets best practices for children and families -Enact all new policy authorizations to make CCAP more focused on early childhood development best practices, such as guaranteeing a child a full year of support once granted -Increase the reimbursement level for all children from 30% to 50% to stop providers from needing to make the choice of serving in-need families or closing their doors</p>
<p>Environmental Scan of State Agency Services and Programs for Prenatal- 3: DHS Community Partnerships and Child Care Services Division</p>	<p>Child Development Services. Promotes children's development and learning by improving the quality of children's care and education in licensed child care settings and informal care settings provided by family, friends, and neighbors. Administers funding for child care quality improvements; manages grants to a statewide network of programs designed to improve quality of child care settings; provides policy leadership to promote a system of quality supports for all child care settings in Minnesota; conducts policy-related research and evaluation, and disseminates findings that document emerging trends in child care, encourage evidence-based practices in child-care settings, and assess the impact of supports for improving the quality of childcare; and provides technical assistance, training, and support for staff working in programs receiving grants.</p>
<p>Environmental Scan of State Agency Services and Programs for Prenatal- 3: MDE Part C of the Individuals with Disabilities Education Act (IDEA)</p>	<p>Provides free intervention services for children birth to 3 who may be experiencing delays in their development.</p>

Family

Themes:

1. Continue and expand maternal mental health screening and services
2. Continue and expand home visiting and other ways of reliably and inclusively disseminating information about child development to parents
3. Enhance relationships through engagement activities
4. Recognize the importance and primacy of the intergenerational family to the child, particularly in cultural minority groups
5. Increase both services that ensure both high quality foster care and services that educate and help families to keep children in the home.

Source	Family
Voices and Choices for Children (VCC): Emarita, <i>High Impact Opportunities for Action</i>	Provide maternal depression screening and related services that are appropriate to the mother's culture
VCC: Way to Grow <i>What We Do: Great by Eight</i>	<ol style="list-style-type: none"> 1) Parent engagement activities – Game nights based on educational play and parent-child learning time during center-based instruction 2) In-home visits to identify family needs that may be met by partner agencies 3) the FATHER program – teaches fathers to be good role models for their children (emotional/financial support) 4) New parent support groups (nutrition, sleep issues, guided teaching-through-play) 5) Dream Tracks program for teen parents (developing ambitions, teaching healthy parenting, job skills, academic goals, work experience)
VCC: ICF International. <i>The Way Forward: USDHHS Administration for Children and Families, Office of Planning Research and Evaluation, Research with American Indians and Alaska Natives</i>	Continue home visiting
Minnesota Department of Health Prenatal to Three Process A <i>Progress Report: August 2012-December 2014</i>	1) Promote health child and family development by prioritizing strategies that enhance relationships among parents, caregivers, and children
Minnesota Prenatal to Age Three Framework	<ol style="list-style-type: none"> 1) Recognize that families and community are strengthened by intergenerational connections 2) Family is the first learning institution in a child's life and is critical to a child's development and lifelong success 3) The primacy of relationships between parent and child or provider and child must be protected and respected
Elders for Infants <i>Prenatal-3 Plan for Minnesota</i>	<ol style="list-style-type: none"> 1) The primacy and continuity of relationships between parents/caregivers child must be protected and respected 2) Family is the first learning institution in a child's life and is critical to a child's development and lifelong success 3) Extended families and cultural communities are the ecosystem for the growth and development of infants and should be respected and supported by public programs and policies

Source	Family
Elders for Infants <i>Prenatal to age 3 framework for optimal development</i>	1) Support services for children in foster care 2) Increase number of foster families for infants and toddlers
Early Learning Council <i>Early Childhood Comprehensive Plan Framework</i> (April 2011 draft)	1) Increase resources, programs, and services dedicated to supporting knowledge of child development and promoting parenting skills and resilience -Promote strengthening families five protective factors in parent education curriculums -Coordinate family supports and services from all agencies around the Strengthening families five protective factors - Develop effective and efficient methods for providing information to all parents -Connect eligible children, parents, caregivers to evidence-based home visiting programs -Increase the capacity of home visiting and parenting programs -Work with service providers to identify and support highly mobile families -Promote parent and family engagement in programs and services
MinneMinds: <i>A Better Chance (ABC) Act</i>	1) Expand access to high-quality targeted home visiting to support healthy parent-child development from day one -Expand high-quality, culturally relevant, targeted home visiting services through the enactment of pilot programs and baseline training for home visiting professionals; and increase the Medicaid reimbursement rate for targeted home visiting program public health nurse home visiting
American Indian Initiative - Mewinzha Ondaadiziike Wiigaming (Beginning Life Beautifully)	1) Providing support and education services for pregnant women and their families
Environmental Scan of State Agency Services and Programs for Prenatal- 3: DHS Child Safety and Permanency Division	Provides funding, policy guidance, training, technical assistance, and consultation to county, tribal, and community partners to assure the federal goals of child safety, well-being, and permanency.
Environmental Scan of State Agency Services and Programs for Prenatal- 3: MDE MN Parents Know Website (Educate Parents Partnership)	Minnesota Parents Know website aims to cost- effectively and efficiently meet the informational needs of parents with newborns to 12th graders about child development, child care, child health, consumer safety information, and other topics of interest for families. Additionally, a specific section of the website targets young student parents between the ages of 18 and 25 enrolled in post-secondary institutions to help them reach educational goals while parenting young children. .
Environmental Scan of State Agency Services and Programs for Prenatal- 3: MDE Early Childhood Family Education	Universal parenting education program provided by most Minnesota school districts. Provides parenting education to support children's learning and development. Provides parent and child classes taught by a licensed early childhood teacher and licensed parenting educator.
Environmental Scan of State Agency Services and Programs for Prenatal- 3: MDE Early Head Start	Early Head Start programs build relationships with families that support family well-being and positive parent-child relationships, families as lifelong learners and educators, family engagement in transitions, family connections to peers and community, and families as advocates and leaders

General programmatic and organizational recommendations

Themes:

- 1) Efficient use of funds and resources with the aim of sustainability- keeping programs within communities running after the overseeing organization has left
- 2) Community collaboration - Involve communities in all steps of planning programs, from research to implementation to sustainability
- 3) Integrate knowledge of 0-3 development across services and sectors
- 4) Overhaul data systems so that they are easy to navigate, reliable, valid, and integrated

Source	General programmatic and organizational recommendations
VCC: Hestness & Huenemann <i>American Indian Community Blueprint</i>	<ol style="list-style-type: none"> 1) Reducing redundant overhead by encouraging American Indian organizations to share office space and staff, work together on purchasing contracts, and so on 2) Using an asset-building approach to social programs in order to reduce dependency
VCC: ICF International. <i>The Way Forward: USDHHS Administration for Children and Families, Office of Planning Research and Evaluation, Research with American Indians and Alaska Natives</i>	<ol style="list-style-type: none"> 1) Communities need training and technical assistance to keep programs running once overseeing organization has stepped out of the picture. Programs must utilize the untapped resources within tribal communities (e.g., indigenous knowledge of tribal experts, the workforce of tribal paraprofessionals, etc. 2) Flexible funding options that respond to the needs of the community are needed, including those that provide longer time periods for planning and evaluation. 3) Sustainability must be a cornerstone goal of programs under federal grants. Programs must consider how to help participants move toward self-sufficiency 4) Include critical partners for establishing culturally competent research in Indian Country in future discussions of this type (e.g., Bureau of Indian Affairs, Indian Health Services, Department of Education)
Poupart & Baker, <i>Incorporating the American Indian Experience into Current Practice</i>	<ol style="list-style-type: none"> 1) Incorporate AIAN community members into each phase of the research process 2) Realistic expectations of available resources 3) Acknowledge tribal sovereignty 4) Acknowledge AIAN identity such as history, cultural, language, place, and living in two worlds 5) Incorporate strategies to repair trust between community and non-community partners
VCC: Tsethlikai, <i>Setting the Stage: An Overview of Human Development Research Relevant to ACF programs</i>	<ol style="list-style-type: none"> 1) Make intervention and prevention efforts that are long-term and address the impact of historical trauma and continued environmental factors (e.g., low quality housing, domestic violence) 2) Integrate studies across multiple levels of analysis (how cultural, historical, environmental, biological factors contribute to individual differences) 3) Develop community collaborations and multidisciplinary teams to understand the complexity and context of issues, and address them in context.

Source	General programmatic and organizational recommendations
VCC: Comunidades Latinas Unidas En Servicio	1) Strengthen and advance the greater community -Increase marketing to deliver resources and potential engagement to advance well-being for Latinos -Increase collaboration and partnerships with nonprofit, private companies and government to discuss policy solutions for healthcare, education, and equality for Latinos -Act as ambassadors for CLUES community engagement by working closely with advisors and volunteers -Implement better data collection systems to ensure that CLUES can hear the Latino community's opinions on serious issues affecting them.
Minnesota Department of Health Prenatal to Three Process A <i>Progress Report: August 2012-December 2014</i>	1) Continue to reach out and form authentic relationships with communities to identify adversities and develop cross-sector policies, systems, and environments that support pregnant and parenting families with infants and toddlers where they live, grow, work, and play 2) Continue to create urgency and awareness around the importance and unique opportunity of early childhood to positively affect long-term health and well-being
Minnesota Prenatal to Age Three Framework	1) Leveraging cooperation and collaboration of resources, services, and opportunities for children prenatal -3 and their families
Elders for Infants <i>Prenatal-3 Plan for Minnesota</i>	1) The needs of the child and current scientific information about what is considered necessary for optimal development should be at the center of public policy and investment. 2) In addition to current science, we seek to learn from families, communities, and cultural wisdom regarding child development 3) Parents are the primary decision makers regarding care and nurturance of their infants. - Programs and opportunities for assistance should be voluntary unless the health and safety of the child is threatened 4) Programs must respect that development and learning for infants and toddlers is relationship based and occurs everywhere, every day, all the time. Direct care relationship is a crucial element and should be seen as a "living wage" activity, whether paid or otherwise supported by society.
Elders for Infants <i>Prenatal to age 3 framework for optimal development</i>	1) Systems are flexible, responsive, and easy to navigate -data systems link, collect, and report on early childhood programs, services, and supports
<i>Project for Babies Theory of Change map</i>	Long-term goal: improve the health and developmental outcomes for all children 0-3 by integrating knowledge of 0-3 into policies, services systems, and practices 1) State policies and funding strategically invest in 0-3 to improve outcomes and reduce future public expenses 2) Public services are coordinated, culturally appropriate, accountable, and designed around the holistic development of the child 3) Leaders, practitioners, and communities understand, update, and apply knowledge of child development, brain research, and cultural practices See: Pathway for Change for Children 0-3 for more details about Building blocks, key actors, and system structures

Source	General programmatic and organizational recommendations
<p>Early Learning Council <i>Early Childhood Comprehensive Plan Framework</i> (April 2011 draft)</p>	<p>1) Identify leadership so that all sectors (state, local, public, private) work collaboratively to ensure infrastructure is developed and sustained for an effective early childhood system</p> <ul style="list-style-type: none"> -Establish a leader/structure at the cabinet level with authority to design and implement (through policy, fiscal, and rule making authority) a comprehensive early childhood system -Increase funding from public and private sources <p>2) Early childhood stakeholders have reliable, comprehensive data and accountability measures for policy and financing decisions at the state and local levels</p> <ul style="list-style-type: none"> -Develop an integrated accessible data system with information on children, practitioners, and programs -Implement statewide school readiness report card -Establish a consistent and universal kindergarten readiness assessment <p>3) Increase and more efficiently use current resources (federal, state, local) and leverage additional private funding at the state and local levels</p> <ul style="list-style-type: none"> -Focus contracts, grants, and financial incentives on achieving child and family outcomes

Health/Medical

Themes:

- 1) Screening for young children (development and mental health) and their mothers (mental health)
- 2) Affordable (or free) healthcare coverage for families with young children
- 3) Nutritional information and supplementation
- 4) Universal screening for physical and mental disorders
- 5) Accessible education about prenatal – 3 health, including immunizations

Source	Health/Medical
<p>Voices and Choices for Children (VCC): Emarita, High Impact Opportunities for Action</p>	<p>Create a system for early childhood development screening and assessment that recognizes the culturally specific ways in which skills and knowledge are taught by families and exhibited by children</p>
<p>VCC: MDE Cultural and Ethnic Communities Leadership Council (Annual Report 2014)</p>	<p>Encourage policies that address mental health, access to healthy food, and other basic needs and social contexts as interdependent issues</p>
<p>VCC: Way to Grow What We Do: Great by Eight</p>	<p>Cooking classes –teaching skills for healthy cooking, eating, and shopping. Includes recipes and meal planning techniques.</p>
<p>VCC: Hestness & Huenemann American Indian Community Blueprint</p>	<ol style="list-style-type: none"> 1) Ensure access to affordable, quality health care 2) Expand the availability of healthy food in area stores and providing classes in healthy cooking and eating 3) Expand accessible substance abuse treatments and follow-up care

Source	Health/Medical
Poupart & Baker, Incorporating the American Indian Experience into Current Practice	Take into account community conceptions of wellness
VCC: Rose Community Voices on the Issues Survey (The Council on Black Minnesotans)	1) Access -Make basic health care available to all, regardless of income -Involve the governor in development of better access 2) Information - Improve information systems and resources for community health advocates -Make communities aware of their health-care rights -Provide better information on preventative care
Sharon Henry-Blythe, Family Housing Fund Visible Child Initiative -Children's Mental Health Project Pilot	1) Increase access to infant and early childhood mental health services for families with young children ages 0-5 who have experienced the traumas of homelessness by providing on-site children's mental health services in supportive housing. In order to effectively provide early childhood mental health services in supportive housing to children and families, the Visible Child Initiative advocates for: <ul style="list-style-type: none"> • Increasing access to culturally-specific clinicians with experience in infant and early childhood mental health. • Utilizing Medical Assistance as a funding source for children's mental health services • Subsidizing Medical Assistance funding to cover full cost of children's mental health services. • Increasing supportive housing capacity to manage children's mental health service delivery
VCC: Hispanic Advocacy for Community Empowerment Through Research (HACER) Latino Realities 1998	1) More affordable healthcare coverage 2) Reduce language barriers at hospitals and clinics -Community members need Spanish-speaking specialists and mental health providers. -More interpreters would also be helpful
Minnesota Department of Health Prenatal to Three Process A Progress Report: August 2012-December 2014	1) Reduce risk and stress for families 2) Build awareness and urgency about the importance and unique opportunity of prenatal to three time period to positively affect long-term health and well-being 3) Support cross-sector policies that promote health and well-being for pregnant women, children, and their families where they live, grow, learn, work, and play

Source	Health/Medical
Minnesota Prenatal to Age Three Framework	1) Healthy and well-timed births -Mother receive early and adequate prenatal care -Reduce teen births and subsequent births 2) Infants and toddlers reaching developmental milestones from birth - Mothers breastfeeding at 6 months -Infants and toddlers regularly receiving well child exams (including oral health) and immunizations) -Infants and toddlers receiving developmental and social-emotional screening in any setting by age 3 -Families with infants and toddlers have access to adequate nutrition -Reduce rates of maternal depression 3) Infants and toddlers supported and thriving within families and communities-Families with toddlers living in safe, stable, and adequate housing 4) Health insurance among families with toddlers and infants
Elders for Infants Prenatal to age 3 framework for optimal development	1) Universal, preconception health care and education 2) Early and adequate prenatal care 3) Home visiting available for emotionally fragile pregnant women 4) Comprehensive, affordable health/dental care for all infants, toddlers 5) Regular well-child exams 6) On-schedule immunizations 7) Consistent, early developmental and socioemotional screening 8) Appropriate early intervention for disabilities, delays 9) Early, appropriate intervention in child abuse and neglect 10) Health insurance among families with infants and toddlers
Build Initiative: Family Friend and Neighbor Care	1) Home visits with public health nurse and early childhood behavioral specialists 2) Depression screening and mental health care
Mayor Betsy Hodges: Cradle to K Cabinet Plan to Address Early Childhood Disparities in Minneapolis	1) Public forum recommendation: Improve mental health services of children birth to three

Source	Health/Medical
Early Learning Council Early Childhood Comprehensive Plan Framework (April 2011 draft)	<p>1) Increase percentage of young children reaching developmental milestones from birth</p> <ul style="list-style-type: none"> -Expand outreach efforts to pregnant women for prenatal services -Expand screening and follow-up efforts for maternal depression -Promote early identification of nutritional needs for pregnant women and young children -Promote and support timely comprehensive well-child visits -Expand use of evidence-based home visiting <p>2) Increase access to health services through expansion, increased coordination, and effective practices and policies</p> <ul style="list-style-type: none"> -Promote consistent and coordinated health care delivery for young children and families -Expand health care home initiative to include all young children -Promote the use of the DC- 0-3 for mental health practitioners working with young children and families <p>3) Increase percentage of eligible children served by early intervention services and supports</p> <ul style="list-style-type: none"> -Promote awareness and use of early childhood developmental screening among staff and the public
American Indian Initiative - Mewinzha Ondaadiziike Wiigaming (Beginning Life Beautifully)	<p>1) Promote healthy birthing practices by: employing Native American Indian women to work as doulas, childbirth educators, and breastfeeding coaches during pregnancy, labor and delivery, and breastfeeding. 2) All pregnant and birthing mothers will understand that natural birthing is an essential part of the Bimaadiziwin, the healthy way of life. This includes balancing one's relationships with the surrounding environment, surrounding beings, and the inner physical, emotional, intellectual, and spiritual needs of the human condition.</p>
Environmental Scan of State Agency Services and Programs for Prenatal- 3:DHS Children's Mental Health Division	<p>1) Working with Minnesota mental health agencies and tribal communities to grow the number of mental health professionals who have the training and capacity to serve children under the age of 5 with mental health conditions and their families.</p> <p>2) Partnering with the adult mental health division to better understand the parenting needs of mothers with serious mental illness who are parenting children under the age of five in order to identify and/or develop appropriate parent-child treatments</p>
Environmental Scan of State Agency Services and Programs for Prenatal- 3: MDE RTT ELC	<p>Online developmental and socioemotional screening. Online access to the screening tools will be available across the various programs statewide (ECS, Head Start, primary care, child welfare, etc.)</p>
Environmental Scan of State Agency Services and Programs for Prenatal- 3: MDE Early Head Start	<p>Aims to promote healthy prenatal outcomes for pregnant women, to enhance the development of very young children, and to promote healthy family functioning for low-income families.</p>
Environmental Scan of State Agency Services and Programs for Prenatal- 3: MDH Women, Infants, and Children Program	<p>Nutrition program that helps eligible pregnant women, new mothers, babies, and young children eat well, learn about nutrition, and stay healthy. Provides nutrition education and counseling, nutritious foods, and referrals to health and other social services. Eligibility based on income, state residence, medical or nutrition need.</p>

Source	Health/Medical
Environmental Scan of State Agency Services and Programs for Prenatal- 3: MDH Maternal and Child Health Program	Aims to improve the health status of infants, children, youth, women, and families in MN. Programs include Family Home Visiting, Infant Mortality Reduction, Preconception Health, Family Planning, Child Care Health Consultation, and Child and Teen Checkup.
Environmental Scan of State Agency Services and Programs for Prenatal- 3: MDH Newborn Screening	Mandated program to screen all newborns shortly after birth for more than 50 disorders that may affect an infant's metabolism, endocrine system, blood, breathing, digestion, or hearing. Abnormal results promptly referred for appropriate follow-up testing and treatment.
Environmental Scan of State Agency Services and Programs for Prenatal- 3: MDH Immunizations	Provides vaccines, statewide immunization registry, and education for health care providers, child care providers, and school health personnel.

Housing/residential

Themes:

- 1) More options for housing supports, including supports aside from Section 8 housing (co-ops, land trusts)
- 2) Increase stake in property ownership among minority community-members, through both increasing number of realtors from the community and increasing homeownership
- 3) Safe, stable, and adequate housing is crucial to the well-being of children 0-3

Source	Housing/Residential
VCC: Gibson & Singh, Let's Help Caregivers and Children in Informal Kinship Care: De Facto Custodian Legislation	Promote de facto guardianship as the preferred legislative option and caregiver relationship for informal caregivers
VCC: Hestness & Huenemann American Indian Community Blueprint	<ol style="list-style-type: none"> 1) Expand housing support opportunities like co-ops and land trusts 2) Recruit and support American Indian community-based realtors and brokers
VCC: Comunidades Latinos Unidas En Servicio	<ol style="list-style-type: none"> 1) Boost Latino homeownership 2) Encourage equal opportunities for Latinos in housing markets 3) Eliminate barriers to homeownership and promote availability to funds
VCC: Hispanic Advocacy for Community Empowerment Through Research (HACER) Latino Realities 1998	<ol style="list-style-type: none"> 1) Decent housing at affordable prices -reduce housing discrimination
Minnesota Prenatal to Age Three Framework	<ol style="list-style-type: none"> 1) Families with toddlers should live in safe, stable, and adequate housing
Elders for Infants Prenatal to age 3 framework for optimal development	<ol style="list-style-type: none"> 1) Families have safe, adequate, stable housing

Source	Housing/Residential
<p>Mayor Betsy Hodges: Cradle to K Cabinet Plan to Address Early Childhood Disparities in Minneapolis</p>	<p>1) Goal 2: All children are safely and stably housed</p> <ul style="list-style-type: none"> - Increase housing options for lowest income families at 30% area median income A) The city of Minneapolis will find the location and leverage funding to develop 10 affordable housing units by the end of 2016 B) Increase state rental assistance for families at risk of experiencing homelessness at 30% AMI or below from MN housing. -Target funding to address the needs of children and families experiencing homelessness to improve stability on the path to housing A) Redesign service funding to focus on families and children living in supportive housing and emergency shelters to facilitate opportunities for high quality early learning services B) Children experiencing homelessness should receive priority access to opportunities for high quality early learning -Provide resources and support for very low income families to become economically stable A) Develop programs to support young parents, especially women with children, to finish high school or receive a GED and develop a career path B) Support efforts to increase income for low-income parents (i.e. raise minimum wage) -Improve conditions for healthier and safer housing and stronger communities A) Build awareness of environmental impacts on health and child development and improve city systems to provide for healthy food, clean air, clean water, and reduced noise pollution B) Increase housing inspections and hold landlords accountable to meet housing codes for healthy and safe subsidized housing. C) Make neighborhoods safer: reduce violence, promote block clubs to foster community well-being D) Increase stop signs and crosswalks for families to safely access parks.
<p>Environmental Scan of State Agency Services and Programs for Prenatal- 3: MDH Healthy Homes</p>	<p>Empower all Minnesotans to live in homes that are dry, clean, safe, well-ventilated, pest-free, contaminant-free, and well-maintained. MDH's role is training, educating, and providing scientifically based guidance and tools to make homes and other indoor places safer and healthier. Focuses on environmental risk factors in homes for both acute and long-term illnesses. Collaborative efforts planned to build on established capacity and expertise of current public health programs (e.g., lead, indoor air, asthma, injury prevention), improve health, productivity, and quality of life of residents; Reduce health care costs from common housing related illnesses and injuries, and help diminish health disparities for at-risk populations. For families, address issues related to asbestos, asthma, carbon monoxide, drinking water, food safety, injury prevention, lead, mold, pest management, radon, ventilation and filtration, and volatile organic compounds</p>

Section 2: Strengths identified in community conversations

Source	Cultural and community strengths	Education	County and State Programs/Resources
American Indian Talking Circle- Cass Lake	<ul style="list-style-type: none"> •Value education •Resilience •Nurturing and caring •Family networks •Elders •Stories •Value respect •Cultural resources 		
American Indian Talking Circle –American Indian Family Center	<ul style="list-style-type: none"> • Native American volunteers in health settings • American Indian Family Center is a good resource •Women’s Circle 		<ul style="list-style-type: none"> •Generally happy with insurance •Some insurance gives cash •Many can access child care assistance •Food Shelf off Summit
African American Babies Coalition	<ul style="list-style-type: none"> •African American women value relationships with family, mental well-being, and work. •Value community self-determination 		
African Immigrant Services	<ul style="list-style-type: none"> •Two parent homes •Extended families (grandparents) and "auntie/uncle" mentality •Village idea to raising kids (your kids are my kids) in the community and family and community are united •Rich culture and cultural values/morals •Respect •Impacting knowledge through stories •Community – we supervise each other •Religious teaching •Parents are very hardworking •Willingness to learn •Discipline style •Parents play strong role in lives of kids • Value all children - no child left behind •Older generation takes care of the kids for free, old people aren't in hospitals or homes •Resilience of children- Our kids can stand tension • Resilience of parents – we are people who don't give up, we take our responsibilities 	<ul style="list-style-type: none"> • We encourage our kids to learn • Commitment to education, success • Going to college is important 	

Source	Cultural and community strengths	Education	County and State Programs/Resources
	seriously <ul style="list-style-type: none"> • Traditions • Children have the ability to navigate two different cultures • Connection to and involvement in the church • Families and elders have high expectations 		
American Indian Talking Circles	<ul style="list-style-type: none"> • Strong and powerful women lead households 		<ul style="list-style-type: none"> • Mothers of Traditional Birthing at DIW- teach about risk of SIDS, effects of behaviors/ choices you make. • Home visiting is valued • Babyspace program • Resource Centers are very helpful, especially ones that are culturally based
Duluth	<ul style="list-style-type: none"> • Resiliency of children and families • Supportive community (e.g., outgoing and welcoming neighbors) • Doula support for children or families with newborns • Bilinguality • Multiculturalism • Fathers • Church- nursery • Multitasking, stay at home parents • Mom's support groups (online, Facebook) 	<ul style="list-style-type: none"> • Duluth school district has a strong early childhood program with qualified professionals. E.g., head start, school readiness, first year ECFE/ECSE. • Qualified teachers for Early Childhood • Summer breakfast and lunch program • Mom's support groups • Pediatric physicians • Women's Care Center • Park spaces • Polinski • Bethany • Steve O'Neil apts • Catholic Schools • School bulletin board • Nite Out - Tuesday 	<ul style="list-style-type: none"> • Northland FD • Thrive Women's Care center- Northland foundation helps pregnant moms with free medical care and education with incentives of earning points towards items such as formula, diapers, etc. • Circle of Security classes and parenting strategies help parents best support their children • WIC • Public health nurses • Duluth Public Library • Home Depot- Craft Time • Aquarium • Children's Museum- Passports for families • Duluth and Woodland YMCA- Tot Time, financial aid for programs and memberships • HDC parenting classes • YWCA Daycare • Childcare Assistance – Steve O'Neil • 24 Physician hotline • CAIR • Parent Aware Training • Kids' Closet • LSS- Duluth Lutheran Social Services – Earn while you learn • First Year Program • Birthright list of resources

Source	Cultural and community strengths	Education	County and State Programs/Resources
			<ul style="list-style-type: none"> • Red Book Shelves • Lincoln Park Center • Scottish Rite • UMD Speech Clinic • Headstart • Early Childhood Mental Health –Amber Wing • First year program • Home healthcare- home visits • Public Health Nurse • Birthright (Baby food, diapers, healthcare, etc.) • Help Me Grow • Free lunch program • Library and community centers • Car seat program • Fond du Lac programs for families • Essential prenatal classes- 6 week classes • Young mom programs (YWCA) • Little treasures • MN WAC – worked with low income medicine
Hmong American Partnership	<ul style="list-style-type: none"> • Hmong families have a strong family oriented support system to help watch/teach our children. • Good social strength due to Hmong culture and traditions • State programs – speech communication – nonprofit organizations • People are usually bilingual speaking in the original language. • Parents emphasize learning respect and manners • Parents tend to be younger and have more energy • intergenerational presence/exposure • Greater likelihood of sibling connections/ caretakers vs peers • Cultural/religious ceremonies/traditions, Hu Pliig • Integration of traditional Hmong and American culture • People switch back and forth between environments (bicultural, wider scope of 		

Source	Cultural and community strengths	Education	County and State Programs/Resources
	experience) <ul style="list-style-type: none"> • Positive reinforcements, encouragement • Kids start reading early • Healthy foods • Constituting, having structure and consistent people around the kids • Parents make sure their kids know the rules and are disciplined • Goes along with structure • Being consistent in the expectations • Using expressive language with children • The whole family feels responsible for the children, not just parents • Children are allowed to be more independent at family events • Collective community - village raising the children, and multi-generational family members teaching and taking care of the children • Structure, rules, expectations • Perseverance and resilience - Hmong people often do not have enough food or money but are able to survive and thrive 		
La Crèche	<ul style="list-style-type: none"> • Parent Involvement • Loving family environment • People in the community are positive influences (aunties, grandparents) • Churches • Culturally exclusive programs • Village approach • Parents •Willingness/eagerness to learn •Home learning •Letting kids be around ages they can relate to • Love-routines • Generations in facility • Family-based meals 	<ul style="list-style-type: none"> • Early hours for centers • Committed educators • High quality childcare and daycares like La Crèche 	<ul style="list-style-type: none"> • Food programs – providing children with healthy foods • Community centers, park board • Big brothers Big Sisters • Pop up parks • Little libraries
Lake Crystal	<ul style="list-style-type: none"> • Safe community • Young families • Community garden • Several churches • Neighborhood gatherings 	<ul style="list-style-type: none"> • Nice amount of childcare providers • Early Childhood Initiative • Daycare providers and teachers 	<ul style="list-style-type: none"> • Community Education • Lake Crystal Area Recreation Center • Swimming Lessons • Toddler activities • New classroom for 0-3 room in Lake

Source	Cultural and community strengths	Education	County and State Programs/Resources
	<ul style="list-style-type: none"> • Daycares meeting at parks –unstructured play 	<ul style="list-style-type: none"> • Preschool program 	<p>Crystal Welcome Memorial Elementary School</p> <ul style="list-style-type: none"> • Children’s Museum in Mankato • ECFE • Help Me Grow • The food shelf at the Baptist Church • Rec center- zero depth pool • Mankato Clinic • Mayo clinic • Playgrounds • Library
St Cloud	<ul style="list-style-type: none"> • Resiliency in children and their families • Strong family values and cultural identity in immigrant families • Communities are recognizing the issues of homelessness and low-income; human trafficking • Seems like there are more diverse leaders emerging in city councils; community leaders • Parents are more engaged and articulate about early childhood • Word of mouth is strong • Technology has added so much. Rural MN is not quite so remote. Social media has made parents more aware • Big extended families raise babies • Strong churches and faith based organizations • Collaboration between services • Families are smart about accessing resources • So many home languages (schools need to be better at adapting to those languages) • Social support and success of various support systems • Parents are resilient and figuring out the system despite high stress • Families working, going to school, raising children and being successful • Families their children’s education • Families are contributing positively to the community 	<ul style="list-style-type: none"> • Preschool programs • More awareness of 0-3 programming in the school districts now 	<ul style="list-style-type: none"> • More mental health services available for younger children now • Parent Aware and coaching available to providers • Coordination of services available for families decreasing duplication of services and looking at gaps in their services • Family Strengths Matrix identify needs • Health Literacy Project • Increased awareness and support for EC MH, SHIP, ReThinkMH, interface of parenting and MH (family-based services) • Grant money going towards overall health services better linked to where kids are • Still medically underserved but coordination of health for kids is better (excluding dental health) • Increased focus – EHS, ECFE, Expanded home visiting state \$ • CAPRW is connected and sees those services in place • HS tracks disabilities and accomplishments of a diverse and large population • Home visitors are in it, developed from community needs assessment • Access to health services • Track hospital visitors, church outreach • Catholic charities free birthing coaches • Early Head Start – Support for income eligible children in homebased and center

Source	Cultural and community strengths	Education	County and State Programs/Resources
			<p>based</p> <ul style="list-style-type: none"> • Community reaching out to families that would not typically come to them including sliding fees. • Parent Aware – supporting increase in quality child care, access to healthcare (not always Dental)
UROC	<ul style="list-style-type: none"> • Increasing awareness of importance of support starting prenatally- community support • Research backs up policies and practices • Ethic and value for children • Pride in self; resilience, persistence, tenacity • Resourceful and creating; want to be involved, not just be told what to do. Extended families as support networks and caregivers including siblings • Complete dedication to children in the absence of all resources • Fathers involved as well • Parent educator goes to hospital/introduction and relationship building • Cultural groups (dance,/drumming) • Desire/willingness to do a better job than they experienced as children • Ability to navigate social service systems • Extended families/friends • Parental involvement in low income families • Extended family still provides cultural support • Friends and family daycares that can encourage cultural identity and belonging •Protective, priority caring especially to infant-1 year old • Community volunteers/doulas • Community based • Parents take info and bring it into home life •Accountability – parents request it • Welcoming safe and respected creating environments for parent engagement and diversity • Cultural specific programming • Communal child rearing • Partnerships and collaboration • Awareness at the city and county level Re: 	<ul style="list-style-type: none"> • Early childhood headstart programs that partner with family providers and centers • School districts trying to include prenatal to K more and willing to partner • MPLS Public Schools/ECSE 	<ul style="list-style-type: none"> • Head Start has prenatal support group – meet 1x/month, Focuses on topics like breastfeeding, prenatal care, postpartum depression, parents as children’s teachers (e.g., singing to babies, infant massage) • EHS 6 weeks-36 months – but always a waiting list • Public health nurse and family advocate makes home visit within 2 weeks of birth • Mental health screening and psych follow-up • Lots of organizations and institutions doing good work but may need a stronger system • ECFE • Libraries – free programs • Community arts – focus on infants and toddlers • Parks and rec – accessibilities varies by community • Faith based communities – classes for babies and other age groups, food shelves, clothing, social services, and public health • WIC • Metro alliance for Healthy Families (2 programs in Hennepin county) • Healthy Families (0-4) /Nurse Family Partnership (0-2) • Nurse-home visiting. Long-term available to all families meeting criteria (many qualifying factors, not just income) • (Hennepin) HUGS Home visiting, enhancement funded through St. Cloud schools. • MPLS Hennepin Parks and Recreation/Libraries • Faith groups in the metro area

Source	Cultural and community strengths	Education	County and State Programs/Resources
	<p>need for 0 to 3 programming</p> <ul style="list-style-type: none"> • Identifying culturally with in populations (lack of evidence-based funding and research) • formal education credentials • Elders in the community who are non-licensed with native language expertise • Neighborhood centric efforts that are culturally specific that have created positive intentionality • Advocacy • Good time management • Resourceful • Committed to continuity of care 		<ul style="list-style-type: none"> • Summer lunch outreach • Family daycare hubs where families can access county services – ECFE birth to 3. • NAZ – extended family support • Healthy Start • Parent-Aware • Trainings for providers and centers • Wilder
Wilder Community Forum	<ul style="list-style-type: none"> • Culture of cooperation • Fortitude – internal strength • Connection to culture and language • Culturally relevant and specific services to American Indian families • prenatal to 3 is getting a voice (maybe even a policy voice?) • Research and translation of research – accessible to general public – neurobiology, ACEs, education • Next generation’s comfort with technology and how accessible things are • Resiliency of individuals and families • Multigenerational families, informal networks • FFN • Many families find their way despite all they have to navigate • Multigenerational aspect – importance of focusing on quality of PC relationship, strengths that grandparents bring to the equation • Negotiation skills, problem solving skills, making it to all appts on time. • Community wisdom – professionals seen as experts, piece of puzzle but not all of it. Incorporate community wisdom into how we measure things. •Bilinguality •Strength of family friends and neighbors who provide culturally and linguistically relevant childcare. 	<ul style="list-style-type: none"> • Programs in twin cities with multigenerational approach: School age child component, family ed component, and ECFE component 	<ul style="list-style-type: none"> • Libraries- early literacy, development of literacy skills • Professional knowledge librarians share– librarians can be resources to direct/refer people to proper avenues and agencies • There are a number of funding streams in Minnesota that are geared toward supporting families in need – head start, early head start, scholarships, WIC, CCAP, farm to food, supports for section 8 • High quality educational resources and trainings (SIDS, safety, infant care)

Source	Cultural and community strengths	Education	County and State Programs/Resources
Centro	Cultural and community strengths Centro is a community center and cultural gathering place Place to share information and be connected to resources		Effective home visiting program for mothers of young children – run by Fairview Hospital and Children’s Hospital

Section 3: Needs identified in community forums

Name of Community Forum	Need for cultural centers that can serve as information hubs, support for informal networks, and one-stop culturally appropriate services	Economic development: jobs, affordable housing, business development	Solutions that work: building and collecting evidence in context.	Other strong themes
American Indian Talking Circle- American Indian Family Center	<ul style="list-style-type: none"> • Prenatal care and delivery is confusing, culturally insensitive, and often traumatic- healthcare professionals can be dismissive. • Prenatal health is often poor (e.g., gestational diabetes, substance use) partly due to lack of education/information 		<ul style="list-style-type: none"> • Child care assistance • Health insurance • Groups like the Women’s Circle • Education around drug use • Prenatal healthy start classes 	<ul style="list-style-type: none"> • A need for an approach that addresses both issues of poverty and other social problems that are symptoms of systemic factors that get and keep people in poverty • Substance abuse is a big issue that impedes parenting • Health is poor in the community in general

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<p>American Indian Talking Circle- American Indian Family Center Quotes</p>	<p>“I mean, I have always had to look for the resources [on prenatal care and delivery] basically by myself. Every time I try to get help from somebody, they say they don’t.”</p> <p>“We need More knowledge of (cultural) resources – don’t know who to contact or where to go”</p> <p>“People have conversations about it and say our culture needs to be this. But how do we talk about that more in defining terms.”</p>		<p>“Support families in getting access to elders, naming ceremonies, cultural activities, full moon ceremonies. “</p> <p>“They need more prenatal Healthy Start classes. They cancelled the Healthy Start classes years ago. So there are no Healthy Start program or no incentive to teach you to learn how to take care of your body while pregnant.”</p>	<p>“I have a lot of Native American family friends and their kids, I won’t say the kids, but the women seem like they are very uneducated with what they should be doing as a parent [...] And a lot of women think they can drink throughout the whole trimester. And I think when they hit the second and third trimester they know nothing is going to happen. But that is something they don’t know. Some might not know they are pregnant. Some of them are used to that party life constantly.”</p>
<p>American Indian Talking Circle- Cass Lake</p>	<ul style="list-style-type: none"> • Need resources and contacts in community to put them in touch with resources • Being raised in a village/community/clan has been very beneficial in the past but is not as common now • Cultural practices are being lost (e.g., languages, traditional foods, gatherings like talking circles, ceremonies) 	<ul style="list-style-type: none"> • Many at the meeting have MA and have found it adequate and helpful, but that is not always the case for the larger AA community • Welfare laws are enforced such that you cannot receive cash after 5 years • Transportation is lacking • Many people are living in substandard housing (e.g., mold, drug activity) 	<ul style="list-style-type: none"> • Grandparents, elders, community, family, medicine, ceremonies, values, role models. • Making family, culture a part of our work, life, play. • Addressing food deserts and access to nutrition, obesity, traditional foods, cooking • Education (formal) and education on parenting using cultural approach 	<ul style="list-style-type: none"> • Substance abuse and addiction is rampant and affects children through parental neglect or being born addicted

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American Indian Talking Circle- Cass Lake Quotes	<p>“I know what it is like to be a young mom and to not know where to go for answers when you have different issues going on.”</p> <p>“If you have your kids bring them to the ceremonies when they are young and show them you are doing it. Make it a part of your daily ritual to put your tobacco out, smudge out every night and smoke your pipe once in a while. After a while it will not be engrained in their head, but understanding that this is a part of life and this will help you along your way and along your walk. “</p>	<p>“it is just weird that we [attendees] are all working and we all have medical care. It is not how it really is in the community that we live in. So this is a rarity you would get this many people in one situation that have it. “ There is housing issues. Just being able to pay your light bill every month and being able to afford to pay that light bill. Putting groceries on the table. A lot of transportation and medical issues. There are families that have from one generation to the next generation to the next generation relied on the county and now it is getting to the point where they are actually enforcing that cut off after five years you no longer receive cash. You can continue to get food, but no longer cash. “</p> <p>We live in a food desert. This area is very, very poor. And that has a lot of the cultural aspect with it. People aren't eating traditional like they used to. A lot of them are dependent on the food stamps and that. But even though the options are so limited where we only have one grocery store.”</p> <p>“Many kids are in the poor houses of the drug families. The stuff they breathe in from the drugs or the mold and different things like that it takes a toll on you.”</p>	<p>“So getting back into culture and tying into those elders that know those teachings.”</p> <p>“So it is bringing back like what you guys are saying, the village. The support system and raising the kids together.”</p> <p>Public health programs for nutrition, diet, exercise</p> <p>“Making friends with our elders. It is being respectful. It is teaching the younger kids hey they are here to help you carry on what they did when they were younger.”</p>	

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African Immigrant Services	<ul style="list-style-type: none"> • Contract with existing culturally based organizations/nonprofits that are part of the community to deliver services. • Hire professionals from within the community to deliver training and other services. They are knowledgeable, capable and better informed about context, challenges and opportunities 	<ul style="list-style-type: none"> • Creating more and better paying jobs and growing businesses • Expanding job opportunities particularly for men. • Higher minimum wage • Commitment from businesses to be more supportive of family life • Transportation, affordable housing and child care 	<ul style="list-style-type: none"> • Parenting practices that instill spiritual values, interdependency, focus, discipline, persistence, resiliency. • A communal orientation and strong extended families that serve as the basis for wellbeing. • Maintaining intergenerational connection with cultural knowledge and traditions while learning American ways. 	<ul style="list-style-type: none"> • Persistent systemic racism in the school system in hiring, discipline, sports, and attacks on identity formation; criminalization of particular child rearing practices important to community cohesion and resiliency in a hostile environment.
AIS Quotes	<p>“Our strengths need to be engaged and we need to feel free to ask questions in community settings and let our ideas be known.”</p>	<p>“You need to bring economic development in the African community, because we have the capacity to do these programs ourselves.”</p> <p>I can’t help my child if I don’t have a livable wage.</p>	<p>“Extended family takes care of kids, it’s the village idea of raising kids. Our religious training starts from a very early age, instilling a strong work ethic and discipline. Telling kids early what is good and bad. It’s a failure of the system not to recognize children’s ability and our life experiences.”</p>	

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Centro	<ul style="list-style-type: none"> • Access to a cultural center with activities for all ages, where people can comfortably meet, access information and services, and enjoy social activities without fear or discomfort. 	<ul style="list-style-type: none"> • Better paying jobs, higher minimum wage. • Access to drivers licenses. • Protection from deportation initiated by police checking driver's license. • Access to transportation • Protection from exploitation by ruthless employers. • Employers who commit to respecting family life, via sick leave, reasonable hours, and pay for work that has been done • Affordable and safe housing. • More opportunity for education, especially learning English where there is child care • Affordable health insurance 	<ul style="list-style-type: none"> • Instilling cultural and spiritual values in children when they are very young. • Strong, cohesive families • Affordable bi-lingual activities for families. 	<ul style="list-style-type: none"> • A need for an approach to immigration enforcement on the state level that does not tear families apart and leave children more vulnerable.
Centro Quotes	“We need a public, cultural meeting place with child care, activities for fathers and protection for people without documentation.”	“There are so many barriers to getting a driver's license. I can't take my children places or get a job.”	“I want to transmit the values of my parents to my children.”	

Name of Community Forum	Need for cultural centers that can serve as information hubs, support for informal networks, and one-stop culturally appropriate services	Economic development: jobs, affordable housing, business development	Solutions that work: building and collecting evidence in context.	Other strong themes
La Crèche	<ul style="list-style-type: none"> • La Crèche is like a village and serves as a space where parents can access information, get referrals to resources, exchange ideas, form friendships, and get to know each other's children. • Children form friendships and interact in mixed age groups. • Providing advice to families that help them to thrive • Supporting each other and putting each other at ease. 	<ul style="list-style-type: none"> • Better paying jobs • Affordable child care, housing and transportation • Access to child care for people who work nights and evenings • Programs needed for fathers • Review of public program guidelines to eliminate imposed hardships, e.g. requirements for taking classes at times when people are working and have no childcare. • Agencies requiring people to go to programs where there is a cultural misfit and inappropriate content. • Low cost loans for car repairs, other emergencies • Review program eligibility requirements and cutoff points taking context into account. 	<ul style="list-style-type: none"> • Children are well prepared for school • Strong relationships to the families and the community as the foundation for teaching the children. • Stable staff, low turnover • Finding what works for each child without labeling them • Children socialized in a way that is culturally recognizable. • Recognition of the spiritual self. 	<ul style="list-style-type: none"> • Mismatch between government program requirements and what works for parent and child; good programs starved by insufficient funding
La Crèche quotes	"If you have a question, you can ask someone, and you can get support, peer support."	"We live in a society that has designed things for us to fail."	"La Crèche is an extension of my family, and they have my child's interest at heart."	

Name of Community Forum	Need for cultural centers that can serve as information hubs, support for informal networks, and one-stop culturally appropriate services	Economic development: jobs, affordable housing, business development	Solutions that work: building and collecting evidence in context.	Other strong themes
Duluth	<ul style="list-style-type: none"> • Cultural sensitivity training needed in existing programs • Anti-racism training needed in existing programs • Family events needed with opportunities to speak about what is working well and what is not. • Places to make social connections, like community gardens • Centralized location for resources and information • Culturally appropriate programming • Playgrounds designed for winter play and family fun 	<ul style="list-style-type: none"> • More economic opportunities needed for families. • Higher minimum wage, better jobs with higher pay • More jobs and opportunities for people of color • Access to transportation, particularly lacking in smaller towns and rural areas. • Access to affordable housing and child care, including infant and toddler and extended hours • More access to drug addiction treatment programs for both prescription and illegal drugs • Drivers education classes in high school so licenses are easier to get • Companies/employers who invest in child care 	<ul style="list-style-type: none"> • Networking, extended families, neighbors, neighborhood informal mentors • Many effective programs that could be expanded: Head Start, ECFE, WIC, library programs, parks and recreation, YMCA, faith-based programs, home visiting nurses, doulas, grandparents prog, welcome wagons • Parent Aware and Thrive training for providers • Stay-at-homes moms and dads • Courage Center, started by parents 	<ul style="list-style-type: none"> • Strong programs need the resources to expand; need for more crisis level supports
Duluth Quotes	“In some programs, children are watched while you learn to parent.”	“It’s a two-hour bus ride to get to work.”	“ECFE is working with doulas and public health nurses”	

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Hmong American Partnership	<ul style="list-style-type: none"> • HAP is a resource with activities for families, resources, translation, information, and help with health and social issues. • Presentations and information should be integrated with culture and language, targeting parents and relatives caring for babies and young children • Centers are needed where there is art and music and people learn across generations and feel empowered. 	<ul style="list-style-type: none"> • Higher minimum wage. • Better jobs, higher pay. • Transportation • Low cost loans • Affordable child care and housing • Employers committed to family wellbeing • Revisit eligibility requirements for programs. 	<ul style="list-style-type: none"> • Extended family, children close in age, intergenerational involvement, community cohesion <ul style="list-style-type: none"> • Aunts, uncles, grandparents, intergenerational and multilingual, and exposure to different traditions • Preserving Hmong values re persistence, courage, knowing how to survive and thrive • Intergenerational co-parenting classes. • Lots of younger parents and siblings 	<ul style="list-style-type: none"> • Karen are afraid to discipline their children, because aspects of their parenting are illegal here; systemic racism affecting employment, education.
HAP Quotes	“We need a local center where our families can go and thrive.”	“People need jobs to provide for their families and be more successful.”	“Our parents are social and extended family oriented, so we have good social support. You can go anywhere and feel you are included.”	

Name of Community Forum	Need for cultural centers that can serve as information hubs, support for informal networks, and one-stop culturally appropriate services	Economic development: jobs, affordable housing, business development	Solutions that work: building and collecting evidence in context.	Other strong themes
Twin Cities Open Call Forum 5.23.2016	<ul style="list-style-type: none"> • Support for community rooted efforts to network and connect with each other • Support for community rooted efforts to influence agency services • Multigenerational strategies that are culturally specific and delivered through community based organizations and institutions. • Hubs where older and younger children can receive services at the same time. • Better coordination at the wholesale level (county and state) • Collecting more qualitative data 		<ul style="list-style-type: none"> • Referring people to appropriate resources in their own communities • Connecting community based efforts with existing services • Culturally specific services and community based efforts that also build character. • Cooperation within and across groups. • Building upon family relationships • Using technology, such as texting and cell phones • Recognition that FFN brings cultural and linguistic support • Co-located services and resource circles • Using a strength based lens • Using faith-based connections • Working with existing institutions already heavily involved with family engagement 	
Open Call Quotes	“Community wisdom is a strength. How do we incorporate that into the data?”	“We want access and opportunity like all other families.”	“Talking circles in our community brought families together.”	

Name of Community Forum	Need for cultural centers that can serve as information hubs, support for informal networks, and one-stop culturally appropriate services	Economic development: jobs, affordable housing, business development	Solutions that work: building and collecting evidence in context.	Other strong themes
Lake Crystal	<ul style="list-style-type: none"> • ECFE is a community hub that brings people together. • 21 providers in town, all full of infants • 0-3 population boom. ECFE focus is now expanding to embrace 0-3. • People choose to live in Lake Chrystal because they want a small town and a quiet, welcoming setting. • Relationships are maintained with people who met through ECFE. 	<ul style="list-style-type: none"> • No transportation to ECFE and no buses or taxis in town. • Affordable pre-school needed for working parents • Need affordable health, dental and mental health services • Better access to information for low-income families. 	<ul style="list-style-type: none"> • Neighborhood groups get together for fun, friendships, and sharing information • Neighborhoods look out for all of the children. • 2 or 3 child care providers come together for play days. • Summer neighborhood gatherings in the park. • Social media and churches • Library programs • Community education, recreation Center, Children’s Museum, home child care providers ECFE offer events for children and parents and places for children to play. • Welcoming school and church environments 	
Lake Crystal Quotes	“I looked forward to ECFE. That’s how I met people!”	<p>“Word is spread through ECFE, but participation rate is only 24%.”</p> <p>“We need more jobs, more day care, and more exposure to diversity.”</p>	“Neighborhood groups get together like little communities.”	

Name of Community Forum	Need for cultural centers that can serve as information hubs, support for informal networks, and one-stop culturally appropriate services	Economic development: jobs, affordable housing, business development	Solutions that work: building and collecting evidence in context.	Other strong themes
UROC	<ul style="list-style-type: none"> • Hubs where county services can be accessed in one place • Child care programs that are culturally congruent with families • Honoring the community's own terms • Understanding traditions and language • Provide services in environments where people frequent and are comfortable. • A lot of fathers are active, but systems are not set up to engage them. • FFN caregivers have support and training. 	<ul style="list-style-type: none"> • Funding should follow the child and not the parent's work situation. • Increase CCAP reimbursement • Transportation and higher wages • Have a fund for centers to fill financial gaps. • Basic needs must be met. • Expand income eligibility guidelines. • Family leave policies that don't discriminate against fathers and adoptive parents. • Accessible, affordable, high quality child care 	<ul style="list-style-type: none"> • ECFE classes that are culturally appropriate • Food shelves and faith-based programs • Head Start and prenatal support groups • Services in the first 2 weeks of a child's birth. • A mix of formal and informal supports • Giving parents tools so they can make their own choices • Working with the whole family and putting them at the center • Defining success on the terms of parents and having them hold programs accountable. • New Jersey model: state pays for child care staff with cultural knowledge to work with families. • Value experience as well as formal training. • Acknowledge the impact of trauma. • Build capacity using the services of people of color—consultants and professionals, who are familiar with the community. • A common application for services 	
UROC Quotes	"Kids go to programs and interact with people who don't look like them or interact with them in ways that are familiar."	"There are policy barriers to involving fathers."	"We need evidence that captures the journey, not just metrics."	

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African American Babies Coalition	<ul style="list-style-type: none"> • The creation of cultural community centers (African Diaspora) where elders can inspire and males are appreciated, with images and information that are important to us. • Have a council of our peers who decide if something is appropriate or not • A council that builds relationships with legislators and policy makers and pushes our own agenda • Educate policy makers to prioritize our information and needs. Support FFN • Intergenerational transfer of knowledge, information and values • Services for younger and older children 	<ul style="list-style-type: none"> • Financial support should also support community values • Transportation and more access to services • Employers need to support family friendly policies • Grants, service contracts, and policies should focus on the family, not just the child. • Expand and extend eligibility requirements for accessing services. • More funding for home visits and parental leave. • ID mismatches between program requirements and families' actual circumstances. 	<ul style="list-style-type: none"> • Building close relationships between parents and caregivers • Acknowledge what our communities have to offer • Knowing your city, county and state representatives and educating them on the issues. • Partnering with faith-based institutions to engage the community. • Connect or community to the governing process • Collaboration across agencies • Coordination of wrap around services •Part C CCAP funding flowing through DHS rather than DOE • Empowering people to become advocates 	
AABC Quotes	"Diversity training is not enough. You need the lived experience."	"We need financial support that doesn't require us to give up our values."	"Children want to learn from people who represent <i>them</i> ...That's a problem for African American kids."	

Name of Community Forum	Need for cultural centers that can serve as information hubs, support for informal networks, and one-stop culturally appropriate services	Economic development: jobs, affordable housing, business development	Solutions that work: building and collecting evidence in context.	Other strong themes
Head Start	<ul style="list-style-type: none"> • There is a Somali business that serves as a community center. They have tutoring for children and adults, help with translating forms, sharing information, etc. • A one-stop shop where families can apply for and receive services • Help families navigate and provide help in different languages • Get community input and solutions at every stage of the process when policies are made as a condition for funding. 	<ul style="list-style-type: none"> • More access to affordable, high quality child care by expanding Early Head Start, revising training for Parent Aware to be more culturally appropriate, expanding home visiting. • More access to health care • More jobs in the formal economy • Affordable and safe housing • Employers who support family friendly policies • Transportation• Removal of barriers to employment because of lack of documentation for refugees from war zones • More support for business development and expansion • Shift to more preventive services • More transition services for people coming out of prisons and shelters. • More appropriate eligibility requirements for programs • Eliminate eligibility requirements and have global access for some services 	<ul style="list-style-type: none"> • Using technology and social media to communicate and disperse information • Home visiting • Early Head Start • Some charter schools • Two generation programs • On-site preventive services for children and families • Training providers in more specialized areas • Cultural entrepreneurs who meet the needs of their communities. • Strong extended family help and support • Respecting cultural norms re parenting • Faith-based services 	
Head Start Quotes	<p>“Immigrants are more gracious and shape a different experience in our programs. We capitalize on that in positive ways.”</p>	<p>“Communities should be part of a systemic conversation to look at all these issues.”</p> <p>“We need to remove barriers and support strengths.”</p> <p>“Incarceration is a huge issue, and people don’t know how to talk about it. Look at the number of babies affected by the criminal justice system.”</p>	<p>“We underestimate the resiliency of children and how strong community connections are in immigrant families.”</p> <p>“Head Start parents are at the table, and that keeps us honest and makes us rethink things all the time.”</p>	

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American Indian Talking Circle Notes at White Earth Urban Office	<ul style="list-style-type: none"> • Indian Women’s Resource Center • Mothers of Traditional Birthing, • Focus on health and wellness • Community gardens • Culturally based information about healthy diets • Culturally centered parenting classes for young people before pregnancy happens • Cultural resources • Ceremonies • Information on available resources • Intertribal ceremonies • Gender specific activities for children 	<ul style="list-style-type: none"> • Affordable, safe housing • Jobs • Transportation • Culturally appropriate, accessible mental health services • Treatment for addictions • Access to healthy, fresh, affordable food 	<ul style="list-style-type: none"> • Strong and powerful women lead households • Home visiting can be helpful • Babyspace program – lots of Native kids and teachers there, and it is a good program • Access to doulas • Connection to culture throughout pregnancy and birthing process • Culturally specific hospital sections – some hospitals have a native-based part of the hospital, with Native based practices, medicine, and staff with native cultural beliefs about childbirth • Acknowledging historical trauma • Acknowledging family trauma 	

Overarching themes outside of categories in grid:

- Inappropriate application of laws regarding child abuse to parents who discipline their children.
- Systemic racism in schools, employment, business opportunities, competing for public contracts.
- Criminalizing addiction rather than treating it. Unfair distinction between self-medicating addiction and prescription addiction.
- Program eligibility requirements that are culturally and/or contextually inappropriate
- Current EC quality standards do not recognize community strengths.
- Current EC quality standards do not take experience, culture and community connections sufficiently into account.
- Many existing policies, rules and regulations are weakening families and communities by ignoring their strengths, competing with their institutions, and dismissing their expertise.
- Impact of criminal justice policies and practices on families and communities.
- Some publicly supported systems are more likely to separate and divide families and communities than strengthen them.
- More services are needed for men as fathers and caregivers.
- More education and information to families on how to advocate for themselves and participate in public policy processes

Other strong themes

- A need for an approach to immigration enforcement on the state level that does not tear families apart and leave children more vulnerable.
- Persistent systemic racism in the school system in hiring, discipline, sports, and attacks on identity formation; criminalization of particular child rearing practices important to community cohesion and resiliency in a hostile environment.
- Strong programs need the resources to expand; need for more crisis level supports
- Mismatch between government program requirements and what works for parent and child; good programs starved by insufficient funding
- Karen are afraid to discipline their children, because they are afraid that aspects of their parenting are illegal here; systemic racism affecting employment, education.

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