Preventing child maltreatment by promoting health and well-being for Minnesota families

A thriving childhood and healthy future are linked to a healthy pregnancy and birth; safe, stable, nurturing relationships and environments early in life and throughout childhood; and social and economic security. The ability of communities and families to provide for and relate to their children is impacted by social, economic and environmental factors — including historic trauma, adversity and racism. Minnesota must approach solutions in many ways — taking into account families’ varied experiences, environments and relationships — and with the involvement of families and communities.

Addressing disparities by acknowledging structural racism

Part of the complexity of systems — why one solution or effort may not work for all — revolves around structural racism. The Minnesota Department of Health defines structural racism as the normalization of an array of dynamics — historical, cultural, institutional and interpersonal — that routinely advantage white people while producing cumulative and chronic adverse outcomes for people of color and American Indians.

Structural racism is deeply embedded in society and a potent factor leading to the disparities in wellness for families and communities. The Minnesota Department of Human Services 2018 Child Maltreatment Report indicates that Minnesota has deep disparities throughout the child welfare system.

- Based on population estimates, American Indian children are about four times more likely, African-American children are about two times more likely, and children identified as two or more races are about three times more likely to be reported to child protection compared to white children.
- American Indian children were about five times more likely to be involved in completed maltreatment assessments and investigations than white children, while children who identified with two or more races and African-American children were both approximately three times more likely to be involved.
- American Indian children were around 18 times more likely, African-American children around three times, and those identified as two or more races were around five times more likely than white children to spend time in foster experience out-of-home care.

The department recognizes the complexity of families and systems, including culturally, racially, geographically and community-specific experiences.

A path forward: Engaging partners, communities to promote well-being

Engaging with families and communities, and creating avenues for feedback and partnership are critical to expanding the understanding of what creates health and well-being for Minnesota children — especially those in families experiencing inequities due to race and ethnicity, health, wealth and geography.
Minnesota families have indicated that a web of services and supports are necessary for achieving and maintaining their health and well-being. Families and communities across Minnesota want state agencies, community organizations, counties and tribes to provide culturally appropriate, trauma-responsive, relationship-based services that help children thrive. The Minnesota Department of Human Services and its partners are moving toward a system of prevention that supports families before they enter the child welfare system.

The department and its partners aim to do this by making it easier for families to get what they need, and by increasing access to supports and services.

**The Parent Support Outreach Program:** This voluntary, early intervention program focuses on families’ strengths and needs, and helps parents access the resources they need. The program is available through all Minnesota counties, White Earth Nation and Leech Lake Band of Ojibwe. It aids families in maintaining economic stability, health and child development. Families can refer themselves, or be referred by community or social service agencies.

**Help Me Connect:** This universal system, currently being developed by early childhood partners and various state agencies, will coordinate a broad range of services and resources for families and providers. The system will improve awareness of, access to, coordination of and eligibility for services and resources. The goal is to help families access physical and mental health services as well as early care and education, cash and food assistance and housing.

**Help Me Grow:** This interagency initiative provides resources for families to identify and understand children’s developmental milestones and concerns. It offers information and referrals for families for comprehensive, confidential screening at no cost, and special education and other services for children birth through age five who may have developmental concerns.

The department and its partners also promote family well-being by cultivating community engagement, and leveraging community- and parent-developed solutions.

**Preschool Development Grants:** Minnesota’s Preschool Development Birth through 5 grants focus on supporting families with young children who are experiencing racial, geographic and economic inequities so they can be born healthy, and thrive within their families and communities. Funds support communities to develop universal access points for families and offer culturally appropriate, relationship-based service navigation, and grow community engagement.

**Community Solutions Funds:** The Minnesota Department of Health offers grants to communities to improve child development outcomes related to the well-being of children of color and American Indian children from prenatal to grade 3 and their families. These grants aim to achieve several goals including those outlined in the interagency Early Childhood Systems Reform initiative, which are to reduce racial disparities in children’s health and development, and promote racial and geographic equity.

**Minnesota 2-Generation Network** and **Whole Family Systems grants:** These grants address racial, geographic and economic inequities in accessing state services and supports that promote children’s and families’ well-being. The department is combining efforts across multiple programs to create grants to develop or expand on whole family (child and caregiver) approaches to uncover and address systemic influences to inequities, and support coordination across systems.
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