While Minnesota consistently ranks in the top five states for child well-being according to the Annie E. Casey Foundation’s *KIDS COUNT* Data Book, we know that too many of Minnesota’s youngest generation – including a disproportionate number of children of color and American Indian children – lack access to high quality health care, education, and other basic needs and opportunities required for a strong start in life.

To meet the demands of Minnesota’s future, we must adapt policies and programs to address gaps and improve outcomes for children in every corner of our state. Minnesota’s next governor and legislature will have the power and the responsibility to make choices that accomplish this task and put children and families on a path to success.

Grounded in data from the *KIDS COUNT* Data Center and other sources, the purpose of this nonpartisan election guide is to give you the tools you need to have conversations with candidates on the important issues facing our state’s children and families. Please join us in raising your voice this election season so that Minnesota children can have the strong start they deserve.

**QUESTIONS FOR CANDIDATES**

**ECONOMIC STABILITY**

**LEVELS OF CHILD POVERTY BY RACE AND ETHNICITY, 2015**

U.S. Census Bureau, 2015 American Community Survey. Note: Data for American Indian children in low-income household was suppressed due to low sample size. The 2015 Federal Poverty Threshold (FPT) for a family of two adults and two children was $24,257. Analysis done by Population Reference Bureau.

Election Day is Tuesday, November 6. Learn more at MNVOTES.ORG
In spite of a growing economy, many working families are struggling to make ends meet. The cost of basic needs such as housing, child care, food, and transportation continue to rise, while wages remain constant. What public policies can help more working families achieve economic stability?

**CHILD CARE**
Child care that is affordable and accessible helps parents go to work and provide for their families. Especially when it’s high quality, it gives children a foundation from which to thrive, too. What does a system that supports child development and quality care for all Minnesota children look like to you and what needs to be done to achieve it?

**RACIAL AND ETHNIC DISPARITIES**
Minnesota is ranked fourth nationwide in child well-being according to the 2018 *KIDS COUNT* Data Book, but the high ranking masks persistent racial disparities in health, education, and economic outcomes. Given the moral and economic imperative to ensure that every child has the resources and opportunities needed to meet his or her full potential, what strategies would you suggest to expand access to opportunity and reduce our racial disparities?

**HEALTH CARE**
97 percent of Minnesota children are covered by health insurance, a high rate owed in part to Medical Assistance (Medicaid) and the Children’s Health Insurance Program. In 2016, an average of 476,989 children were enrolled in MA or CHIP each month across the state of Minnesota, providing essential access to prevention services and treatment.

How do you plan to both expand and protect access to children’s health care coverage and benefits, even if the federal government makes harmful cuts or changes to programs or policy?

**IMMIGRATION**
In 2016, 19 percent of Minnesota children were from immigrant families – meaning either they or a parent were born in another country. Research shows that heightened immigration enforcement has harmful effects on children’s well-being. What will you do to better support children in immigrant families?

**FAMILY-FRIENDLY WORKPLACES**
Paid family and medical leave provides a measure of economic security, enhances child and family well-being, and keeps parents in the workforce and off of public assistance. Yet, the United States is the only industrialized nation that doesn’t guarantee access to paid family and medical leave and only 13 percent of Minnesota workers have this benefit through their employers. What do you believe is the best approach to ensuring workers can take time off to care for themselves and their families when needed most?