Thriving Children, Thriving Minnesota 2022
INTRODUCTION

Since the release of the last KIDS COUNT data book in 2020, it has been a momentous three years for Minnesota’s children and their families. While it seemed like everything we knew was upended, three years later, data and policy show that some things did not change at all while other negative trends accelerated. Temporary, successful efforts to reduce hunger, housing instability and poverty for thousands of Minnesota children—disproportionately from the state’s Black, Indigenous and communities of color—appear to be growing distant in the rearview mirror. The transformational change many hoped to build on pandemic innovations and a racial reckoning appears to be waning as the system quickly settles back into its previous structurally unequal state—as if nothing extraordinary happened.

In a real-world 2021 experiment, before our very eyes, we learned about the power and impact of policy choices. Federal policymakers made a clear choice to significantly decrease child poverty and follow the science about the impact of small amounts of additional income on the lifetime trajectory of a child, delivering support to children without deservingness tests or excessive bureaucratic hoops. Then they made an equally clear decision to take those short and long-term gains away from the children.

It will be years before we are able to see a fuller picture of the past three years, one that will likely still leave many children and families in the shadows with their experiences and stories remaining untold. Key data systems that we depend on to measure how children and families are faring were disrupted. Changes to the Census Bureau’s American Community Survey make it more difficult to discern changes over time for Minnesota’s children from communities of color. These challenges reinforce the need to bring forward the lived experiences that generate the numbers and focus on the topics uppermost on the minds of Minnesota families. In this 2022 Data Book, policy areas prioritized by families are the focus, the best data available (some of it, pre-pandemic) is shared but increasingly alongside the faces and stories of Minnesota children, youth, and families and the people that serve them. The goal for this data book is to contribute to a broader conversation about how Minnesota children are doing and what they need from the adults around them to thrive. Thriving children are the foundation of a thriving state.

LETTER FROM CDF-MN

Children need our help early, and they need it now. Our country and state must make some difficult choices that prioritize them going forward. There is no denying we need more of our budget priorities aligned with their well-being, and it would be a mistake to cut programs that help children, specifically poor children. With thousands of children living in poverty, this is not the time to cut investments that work in child health, nutrition, and early childhood development. Unfortunately, child investments are notoriously easy targets. Moving our children from a place of surviving to thriving requires a shift that translates our values and proximity to programs into public policy. Advancing policy transforms outcomes for every child in Minnesota. Evidence shows that safety net programs that boost earnings for low-income families improve both immediate and long-term health, educational, and career outcomes for children in those families. Expanding the social safety net helps address the equity gap that children in those families. Expanding the social safety net helps address the equity gap that children in those families.

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WHAT IS KIDS COUNT?

KIDS COUNT, a project of the Annie E. Casey Foundation, is a national and state-by-state effort to track the status of children in the U.S. by providing policymakers and community members with benchmarks of child wellbeing. KIDS COUNT seeks to enrich local, state, and national discussions concerning ways to secure better futures for all children. As the Minnesota KIDS COUNT grantee, Children’s Defense Fund-Minnesota (CDF-MN) releases periodic reports on the wellbeing of children and families in Minnesota. We thank the Annie E. Casey Foundation for its support but acknowledge that the findings and conclusions presented in this book are those of CDF-MN alone, and do not necessarily represent the opinions of the foundation. Any or all portions of this data book may be reproduced without prior permission, provided the source is cited. Questions about the contents of this book may be directed to Debra Fitzpatrick at dfitzpatrick@childrensdefense.org.

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How are the Children?

Children, particularly our youngest, are Minnesota’s greatest resource. By ensuring that all Minnesota children have what they need—regardless of where they live, their family’s income or education, their gender, or the color of their skin—families and communities are strengthened, and Minnesota moves closer to living up to its promise. So, how are the children?

Regardless of their race or ethnicity, the vast majority of Minnesota youth value education and aim to continue beyond high school.

The vast majority of Minnesota’s 11th graders are motivated to do well in school and have high aspirations for life after graduation. These plans include further education, a key foundation for economic stability later in life.

Minnesota parents from all racial/ethnic groups care about their children and want them to grow up to be socially and emotionally healthy, confident, and empathetic.

Caring relationships with adults, especially parents, are a key protective factor for children. Parents are a child’s first and most important teacher. Strong parental relationships can help buffer the impact of other challenges children face. However, when parents struggle, it has a cascading effect on children in their care. During the summer of 2022, 68% of Minnesotans under 18 in their home reporting in late July 2022 a somewhat anxious, or on edge (compared to 54% for those without children), 52% were not able stop or control worrying, 51% felt hopeless, down, depressed (PULSE, 2022).

Poverty continues to have negative lifetime impacts on hundreds of thousands of Minnesota children across all racial/ethnic groups.

In 2021, 138,621 Minnesota children were experiencing poverty. That’s enough children to fill the Timberwolves’ stadium more than three times over. Poverty is unequivocally linked with poorer child outcomes and disproportionately affects Black, Indigenous and Latinx Minnesotans (Thomson, et al, 2022). Research shows poverty and income are related to brain growth in key areas associated with self-regulation, learning, memory, language, and emotional control. The negative impacts of early childhood poverty can persist well into adulthood, impacting educational attainment, later earnings, and adult health. State and federal programs have the power to lift children out of poverty, but benefit cliffs (see pages 10-13) resulting in short- and long-term benefits for children. When families with children live in poverty, it is a difficult time to be a parent. When parents struggle, it has a cascading effect on children in their care.

Due to longstanding inequities in public policy, lower median earnings among Minnesota Indigenous, Black, and Latinx families create opportunity gaps for their children. Due in part due to occupational segregation, racial/ethnic pay gaps persist among Minnesota’s full-time workers (DOL, 2017-2019; SHRM, 2020). For example, Black Minnesota workers earn just 71 cents for every dollar earned by white workers. Inflationary pressures have compounded economic challenges for families with children, with 46% of Minnesota respondents with children under 18 in their home reporting in late July 2022 a somewhat or very difficult time paying for usual household expenses in the past 7 days (compared to 24% for those without children) (PULSE, 2022). Flexible cash supports, such as tax credits, can help families budget (see pages 10-13) resulting in short- and long-term benefits for children. When families with children have equitable access to opportunities that help them build economic security, it not only lifts the whole economy, but guarantees stronger, healthier, and more resilient communities for generations to come.

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The high cost of housing and historical barriers to home ownership leaves many children without a stable place to call home.

A safe, reliable place to sleep each night, to do homework or eat a home cooked meal is an important foundation for child development. Frequent residential moves can lead to a decline in academic performance as well as higher rates of emotional and behavioral problems (Coley et al, 2016). At its most extreme, unaffordable and unstable housing can result in children and families becoming unsheltered. A study conducted by public and charter schools across Minnesota identified 6,207 students who were unsheltered on October 1, 2020, spanning 293 school districts and 76 counties (Minnesota Housing, 2020). Children and unaccompanied youth aged 24 and younger make up nearly half of the unhoused in Minnesota, with Black, Indigenous and LGBTQ children overrepresented (Wilder, 2018).

Minnesota’s health disparities start early, even before birth.

A healthy baby starts with a healthy pregnant person. But Minnesota is falling short when it comes to maternal health. Affordable, accessible culturally relevant and affirming care is lacking for too many pregnant Minnesotans, including those in rural, Black, Indigenous or other communities of color. Minnesota only gets one chance to get every child off to a strong start. Low birth weight is a preventable public health problem and an important determinant of child survival and development (Anil K.C., 2020). Meanwhile, paid family and medical leave (see pages 24-25) and home visiting (see pages 18-19), among other solutions, have a strong track record of improving both maternal and infant health outcomes.
Minnesota youth are struggling with significant and growing mental health challenges.

Children in Minnesota and America are in the midst of a mental health crisis, struggling with anxiety and depression at unprecedented levels. Responses to the Minnesota Student Survey concur with a recent assessment by U.S. surgeon general that conditions amount to a “youth mental health pandemic.” Minnesota has seen increasing percentages of ninth graders reporting a long-term mental health, behavioral or emotional problem, growing from 12.5% in 2013 to 23.1% in 2019. This trend is repeated across the state and in most counties. Inadequate services, including one of the worst child-to-counselor ratios in the country, mean too many Minnesota children and families wait years or go without care altogether (see pages 26-27 for early childhood considerations). Given the numerous ways in which data on mental health can be quantified (#/% of diagnoses; type of diagnoses; ages), collected (self-assessment; parental reporting; official diagnoses), and impacted by systemic racial/ethnic inequities and cultural variances in accessing mental health services, it is important to look beneath the numbers to better understand how this issue is playing out for children in various communities across Minnesota. For example, a recent study found a statistically significant correlation between indirect racial discrimination and anticipatory racism-related stress, and Minnesota Asian young people’s symptoms of depression and anxiety (CAAL, 2022).

The majority of Minnesota 3 and 4-year-olds are not in a preschool program, a key contributor to healthy child development and educational success.

The overwhelming evidence and research demonstrate that high-quality early care and education is a crucial component of a child’s healthy development (FFYF, 2020). Access to childcare and early learning contributes to economic stability by ensuring all children have the opportunity to build foundations for success in school and life while also allowing parents to work or attend school. Costs are prohibitive (often more than the mortgage) for many families, even those in the middle class, and assistance waitlists for the lowest income families have been years long in the recent past. The pandemic has only exacerbated the untenable economics of childcare for both families and those that provide care and education to Minnesota’s youngest learners. Providers earn poverty wages and parents can’t pay more.

Education opportunity gaps, driven in part by social determinants, continued as pandemic learning loss took a toll.

Despite their aspirations and motivation—and even before the pandemic—Minnesota’s children from Black, Indigenous, Latinx and other communities of color are disproportionately living under challenging conditions that make it difficult for them to get a high-quality education. They continue to face unequal access to everything from basic needs (housing, food) to education related resources (technology, books, counselors, student-teacher ratios, extracurriculars). “Additional stressors like systemic racism and the trauma induced by poverty and violence, both aggravating health and wellness, also pose serious obstacles to learning (Simon, 2021).” All previous indicators of child wellbeing (poverty & income, housing, prenatal and mental health, adverse childhood experiences, early childhood education) have a demonstrated connection to academic achievement. They are all part of the structural system that creates Minnesota’s persistent “worst in the nation” educational and economic opportunity gaps. In 2021, for working Minnesotans 25 and older median earnings for those with a BA were double those who hadn’t graduated from high school ($63,482 compared to $30,000) (American Community Survey, 2021).
Flexible Cash: The Tax Credit Opportunity

A small amount of cash can make a surprisingly large difference for children living with the chronic stress and instability that results from having parents working in low-wage sectors of our economy. Flexible cash is what families need to be able to create a nurturing, stable platform from which they and their children can successfully launch. That’s what Children’s Defense Fund-Minnesota (CDF-MN) heard in 44 listening sessions held across the state.

Evidence backs up what our families said in every corner of Minnesota. The National Academy of Science finds that modest boosts in parental income during a child’s first years have “striking associations with that child’s future school and employment success” (G.J. Duncan 2021).

Policies to increase access to flexible cash, alongside public programs that reduce expenses like housing, food or childcare, are an efficient and effective way to help remove barriers to economic stability. There are multiple ways to deliver flexible cash to families. These include improving the cash assistance portion of the Minnesota Family Investment Program, guaranteed income, and tax credits. In this section the focus is on tax credits.

TAX CREDITS: A PROVEN APPROACH SERVING THOUSANDS OF MINNESOTA CHILDREN

A robust body of research documents that increases in the federal Earned Income Tax Credit (EITC) for low-wage workers with children and the formation of state EITC programs drove increases in birth weight, school achievement, high school graduation rates, and college attendance and completion (Marr et al. 2021). According to the Prenatal to Three Policy Impact Center, research shows that the state EITC is the most effective anti-poverty policy for children in the US, promoting healthier and more equitable birth outcomes, boosting parents’ workforce participation, and improving household economic security, with the greatest effects for single mothers and their children (Prenatal to 3 Policy Impact Center 2022).

According to the Minnesota Budget Project, households in Greater Minnesota are more likely to receive the Working Family Credit: 13.3 percent of tax-filing households in Greater Minnesota receive the Working Family Credit, compared to 11.4 percent in the seven-county metro area. While people of color made up about 18 percent of the state’s population, in 2015 about 34 percent of Minnesota households eligible for the federal EITC (and therefore likely also the state Working Family Credit) were people of color. Among EITC-eligible Minnesota households, 13.9 percent were Black, 17.7 percent were Asian, and 6.5 percent were Hispanic (Minnesota Budget Project 2019).

LEARNING FROM THE PANDEMIC: CHILD TAX CREDIT INNOVATIONS

The pandemic has given us a window into the possible. Across a variety of public programs and policies, innovative approaches previously viewed as impossible suddenly became reality. The combination of additional investments and new mechanisms for delivering them to people, especially people with children, protected many Minnesota families from the possible economic devastation of a global pandemic. Resources flowed more effectively than ever through the federal, state and local government programs to kitchen tables across the state (Chotiner 2022).

MINNESOTA HOUSEHolds WITH CHILDREN USED FEDERAL CHILD TAX CREDIT TO COVER BASIC EXPENSES

<table>
<thead>
<tr>
<th>Basic Expenses</th>
<th>60%</th>
<th>35%</th>
<th>32%</th>
<th>32%</th>
<th>32%</th>
<th>20%</th>
<th>16%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Utilities</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Rent or Mortgage</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clothing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Savings</td>
<td>6%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School books and supplies</td>
<td>7%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paying down debt</td>
<td>4%</td>
<td>4%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vehicle payments</td>
<td>3%</td>
<td></td>
<td>3%</td>
<td></td>
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</tr>
</tbody>
</table>

Among these pandemic related innovations, this suite of changes known as the “Advanced Child Tax Credit” stands out. The 2021 innovations in the Advanced Child Tax Credit revolutionized and centered this federal policy as a largely universal, close to no strings attached support for every child, except those from the most well-off families or without documentation. The one-year changes included increasing the amount with an even larger boost for children under 5, making children from the lowest or no income families eligible, and allowing families to receive half of the credit in advance through six monthly installments. The policy no longer penalized children from the lowest income households with lower support or no support at all. An estimated 322,000 Minnesota children from the state’s lowest or no income families became eligible for the full credit for the first time (Marr et al. 2021). Further, defined, consistent monthly payments stabilized family budgets and allowed them to make plans for the first time.

The Census Bureau’s Poverty in the United States: 2021 report demonstrates the poverty-reducing power of the 2021 Advanced CTC combined with other public supports during the pandemic. The report provides two distinct indicators of economic well-being in the United States. In 2021, this distinction is particularly important because the effects of the American Rescue Plan Act (ARPA), passed in response to the COVID-19 pandemic, are reflected differently in the two measures. Additional resources stemming from stimulus payments, expansions to refundable tax credits including CTC, and pandemic-specific school lunch benefits are considered in the Supplemental Poverty Measure (SPM) but not the official poverty measure (Census Bureau 2021).
CHILD TAX CREDIT CHANGES REDUCED CHILD POVERTY

<table>
<thead>
<tr>
<th>Minnesota’s Official Child Poverty Rate:</th>
<th>Minnesota’s Supplemental Poverty Rate:</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020: 11.2%</td>
<td>2021: 10.8%</td>
</tr>
<tr>
<td>(2021 American Community Survey)</td>
<td>(2021 Poverty in the U.S.)</td>
</tr>
</tbody>
</table>

POLICY APPROACHES: BUILDING ON ADVANCED CHILD TAX CREDIT LESSONS

The following possible improvements to Minnesota tax credit policies are based on lessons learned from the 2021 federal Advanced CTC, government’s ability to efficiently and effectively reduce child poverty by delivering flexible cash support to children and their families during the pandemic, and CDF-MN’s years of experience connecting families with benefits and understanding the intersection of various forms of support through Bridge to Benefits and the Economic Stability Indicator tools.

Create a new Minnesota Advanced Refundable Child Tax Credit

While 12 states have a state level Child Tax Credit, none of them currently deliver payments monthly (National Conference of State Legislators 2021). Minnesota could become the first state to replicate this element of the federal Advanced Child Tax Credit, as well as other important aspects including making the credit fully refundable, basing income eligibility on the previous year and allowing children whose families do not have earned income to qualify.

Improve Minnesota’s Current Working Family Credit

In addition to increasing the overall amount of the credit, especially in the earliest years of a child’s life when costs are greatest and family income lowest, Minnesota’s Working Family Credit could be improved in several ways to better serve families:

- Increase the amount of credit available to the lowest income families.
- Allow families with an Individual Taxpayer Identification Number (ITINs) to receive the credit.
- Give families the option to receive some or all of their credit periodically (quarterly like the Affordable Care Act premium subsidies or monthly like the 2021 Advanced CTC).

Increase access to tax credits with new tools and more navigator support

FIGURE 1: THE ADDITIONAL, FLEXIBLE RESOURCES THAT COME FROM TAX CREDITS HELP FAMILIES ACHIEVE ECONOMIC STABILITY, ALLOWING THEM TO MEET NEEDS AND UNEXPECTED EXPENSES NOT INCLUDED IN A BASIC NEEDS BUDGET (I.E. DIAPERS, FORMULA, INTERNET, CAR REPAIR)

The following table provides a snapshot of expenses and public supports, including tax credits, for a Dakota County single parent with two children (1 and 3 years old) working full-time, year round at $15 per hour.

<table>
<thead>
<tr>
<th>Basic Needs Monthly Budget</th>
<th>Public Supports family is eligible to receive*</th>
<th>Reduced Expenses with all Public Supports*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food</td>
<td>$592</td>
<td>SNAP $131</td>
</tr>
<tr>
<td></td>
<td></td>
<td>WIC $145</td>
</tr>
<tr>
<td>Health Care</td>
<td>$553</td>
<td>Medical Assistance Adult &amp; Child No cost</td>
</tr>
<tr>
<td>Housing/Utilities</td>
<td>$1,089</td>
<td>Section 8 $389</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Energy Assistance $20</td>
</tr>
<tr>
<td>Childcare</td>
<td>$1,542</td>
<td>Child Care Assistance $70 co-pay</td>
</tr>
<tr>
<td>Transport</td>
<td>$422</td>
<td>$422</td>
</tr>
<tr>
<td>Other Necessities</td>
<td>$330</td>
<td>$330</td>
</tr>
<tr>
<td>State Taxes</td>
<td>$31</td>
<td>$31</td>
</tr>
<tr>
<td>Federal Taxes</td>
<td>$262</td>
<td>$262</td>
</tr>
<tr>
<td>Total Expenses + Taxes</td>
<td>$4,841</td>
<td>$2,131</td>
</tr>
<tr>
<td>Income ($15/hr, 15 hr)</td>
<td>$2,333</td>
<td>$2,333</td>
</tr>
</tbody>
</table>

Balance ($2,508) $202

State Taxes
- Working Family Credit (WFC) $714
- Childcare Credit $22

Federal Taxes
- Earned Income Tax Credit (EITC) $329
- Child and Dependent Care $19
- Child Tax Credit (CTC) $167

Total Monthly Tax Credits (currently provided annually, divided by 12 for purposes of illustrating effect of monthly payments) $710

Balance After Including Tax Credits $972

*In this scenario, the family is able to access all forms of support for which they are eligible; however, in reality some public programs (particularly Section 8 housing and Child Care Assistance) are not currently fully funded and have waiting lists that can stretch out over years. Source: Economic Stability Indicator

TAX CREDITS
Throughout this report, data reveals significant, persistent opportunity gaps for children from Minnesota Black, Indigenous, Latinx and other communities of color. Meanwhile, the proportion of Minnesota children growing up in these communities continues to grow. Too often, solutions are ineffective because they do not harness the critical assets of culture and community for these children and their families. A growing body of research documents the power of culture and community for creating healthier children and families (e.g., Burnett-Zeigler et al., 2013; Yoon et al., 2013).

• For African American and Latinx adolescents, having a strong sense of ethnic or racial identity helps buffer against the negative effects of discrimination and racism (Edwards & Romero, 2008; Sellers et al., 2006).

• Having a strong tie to one’s cultural identity strengthens social support networks within families or communities of shared cultural background (Birman & Simon, 2013).

• Cultural socialization, or emphasizing cultural pride and heritage, is an effective treatment in interventions with and for African American families (e.g., Anderson et al., 2018).

• For American Indian youth, interventions that incorporate cultural identity and cultural values have yielded improved outcomes (e.g., Morris et al. 2021).

• Reaffirming cultural identity can be an effective way to empower cultural minority caregivers who are at high risk for stress associated with the responsibilities of raising children (Conry et al., 2021).

(Society for Clinical Psychology, 2021)

Communities have the solutions that build on their cultural strengths, but too often they are denied the resources to implement them. In this section, two examples of solutions rooted in the idea of culture as prevention—the Freedom Schools® out of school time program and the Mi Pequeño Mundo home visiting program—are detailed. Additional funding and re-envisioned systems that center community solutions are needed to unleash the power of similar models for children and families throughout Minnesota.

Two Models

CULTURE AND COMMUNITY

Children Enrolled in Minnesota’s K-12 Schools Come from a Rich Tapestry of Cultures.

2021 Counting All Students report

Data in the Enrollment Report represents the students who were enrolled on October 1 of the school year selected. These data do not encompass all of Minnesota’s student population. Not all districts in Minnesota are yet reporting extended racial and ethnic data. Providing the more detailed level of demographic information to a district and the state is optional for Minnesota families.
CDF Freedom Schools®

At the center of Children’s Defense Fund (CDF) Freedom Schools® program is a research-based Integrated Reading Curriculum (IRC) that fosters literacy. CDF has been at the forefront of raising consciousness about the fact that fewer than 27% of children’s books published in the United States are about nonwhite children. Each year, a group of outstanding authors and illustrators select from a diverse body of children’s literature books that will celebrate and nurture multiple racial identities and cultures. A distinguished group of historians and scholars reviews and recommends books used in CDF Freedom Schools to ensure that children read only those containing accurate narratives of history. IRC instruction is delivered by college-aged Servant Leader Interns (SLIs) who serve as multigenerational mentors for small classes of no more than 10 children. By providing rich, culturally relevant and high-quality books that deepen children’s understanding of themselves and all they have in common with others in a multiracial, multicultural group of historians and scholars reviews and recommends books used in CDF Freedom Schools to ensure that children read only those containing accurate narratives of history. IRC instruction is delivered by college-aged Servant Leader Interns (SLIs) who serve as multigenerational mentors for small classes of no more than 10 children. By providing rich, culturally relevant and high-quality books that deepen children’s understanding of themselves and all they have in common with others in a multiracial, multicultural

While reading proficiency for Minnesota Black/African American students fell to 31% in 2022, CDF Freedom Schools has a track record of success:

- Children’s reading levels measured by the Basic Reading Inventory (11th Ed) have increased.
- Most children (84.0%) maintained or gained in instructional reading levels without experiencing summer learning losses.
- About half of all children (52.9%) improved in their instructional reading levels by the end of the program.
- On average, instructional reading levels increased by eight months.

While reading gains are important, CDF Freedom Schools parent and administrator Paris Timmons explains the broader impacts (See page 17).

SPOTLIGHT ON OUT-OF-SCHOOL TIME

While Out-of-School (OST) programs provide measurable benefits to youth and families on outcomes directly related to program content and academic OST programs can demonstrably improve academic outcomes, access is currently highly uneven. Youth access to enrichment activities (e.g., arts, sports, music, theater, or other types of activities not necessarily related to increasing academic performance) is highly dependent upon family income. The highest-income families spend almost seven times more on enrichment activities for their children, and this spending gap creates an opportunity gap (McCorm et al., 2017). Minnesota Student Survey data reveals similar gaps (IGNITE AfterSchool).

- Average cost of center-based school-age care is $11,752 annually
- 54.4% of Minnesota 5th graders are alone after school one or more days per week
- Only 11% of 9th graders participate in Tutoring, Homework Help or Academic Programs outside of regular school
- Learn more about where each county stands on these measures at: datacenter.kidscount.org

“My oldest one that has had two summers is a relatively confident child in general. CDF Freedom Schools allowed her to be more explicit in her viewpoints on subjects that matter to her. Between the lesson in the IRC and the spaces of learning the SLIs created, it allowed her to magnify, amplify her voice in a way she hadn’t done before. She looked forward to it every day, she loved it, she loved the staff, like the culture, the environment, the vibe. They see themselves. They can hear themselves. They can express their learning in a personalized way [like in the IRC]. They are not learning just reading and comprehension. For me, as a Black mom, I feel like that is what is most important, that they see who they are in what they are reading because like the famous quote “if you can’t see it, you can’t be it.” So, seeing themselves in what they are reading, understanding, learning builds the confidence within themselves to do those great things as well. I always just thought that school was school. You go in and you leave. And seeing the change in interest and the excitement, the change in I can truly do anything I want to do. I truly believe that cultural relevance pedagogy and curriculum were the catalyst for my children as well as for me as an educator.

My kids have never had a Black teacher, ever. And only one of them has had a male teacher. This program we were able to offer them, and when she first started, all of her SLIs [teachers] were Black. And this summer, out of the nine, six were Black men. Like, that’s amazing. And for my son, it opened up a world—just having him see these leaders, these mentors. It’s a face of admiration and it’s so beautiful. Something our traditional school year just doesn’t do.

And so, the model of CDF Freedom Schools and the collectiveness of learning is something that is different than traditional out of school time. And very needed. It’s a community. It’s not just, ‘your job is to go to school, learn, and come back, go to sleep and now go to school again.’ It truly is ‘it takes a village’ and that’s my favorite saying. I say it all the time in just about everything I’m doing. It truly takes a village for us to raise our kids. I believe so heavily in the model of understanding that in order for the whole child to be served we all have to be looking out for each other’s children. I believe that’s how CDF Freedom Schools runs its model.”

PARIS TIMMONS, CDF Freedom Schools parent and Executive Director of Hopkins CDF Freedom Schools® site
Mi Pequeño Mundo

With support from the innovative Minnesota Community Solutions for Healthy Child Development grant, Centro Tyrone Guzman developed the Mi Pequeño Mundo project. The project uses the successful Sembra Montessori early learning program as a guide to engage parent leaders and community partners to develop and pilot a new, culturally affirming, and Montessori-based home visiting program. The new program is designed to proactively provide early childhood development support to Latinx parents with young children, aged birth-three, who speak Spanish in their home. Centro Tyrone Guzman piloted the new community-driven home visiting program in the Twin Cities after developing the Mi Pequeño Mundo program, Centro Tyrone Guzman developed the Mi Pequeño Mundo Healthy Child Development grant program supports community-generated solutions that improve the well-being of young children and their families, with particular emphasis on children prenatal to age three. The Community Solutions Advisory Council, with 12 BIPOC members, reflective of Minnesota’s various ethnic communities supports the administration of Community Solutions Grant Program. They come from urban centers, small towns, and rural areas. This grant program takes a holistic view of reducing racial disparities by concentrating on early learning, health, well-being, economic security, and safe, stable, nurturing relationships and environments. Funding is directed to community-based solutions for challenges that are identified by the communities themselves. Learn more: [https://www.health.state.mn.us/communitysolutions](https://www.health.state.mn.us/communitysolutions)

1I had the opportunity to participate in the program of virtual visits because of my daughters. The first one is called Abigail, she is 6 years old, and the second is Camila, 7 months old. For me, it was a very nice experience to be able to share those months together with Maria Andrea, who was the person who was my Connector for the appointments. I learned a lot with her regarding breastfeeding and daily living with the children. We shared many beautiful moments. For example, we shared about our lives since we are both mothers and we could understand each other very well. We listened to many tips and if I needed something, she helped me find the solution or the place where I could go. She was a lot of help for me and what I needed. At that time, there was always someone who was thinking about me and worried about my well-being and my family. Even though I had the support of my family, this program was an extra help to my home, to my knowledge as a mom, of being able to know what to do at the right time. Thanks to the whole group of people who made this possible at the right time and for all the support they gave me. God bless all so they can continue to develop many more support workshops for us parents since we have a very great responsibility to be able to teach and guide our little ones for the future that awaits them."

2Tuve la oportunidad de participar en el programa de visitas virtuales porque de mis hijas. La primera se llama Abigail, tiene 6 años, y la segunda es Camila, 7 meses de edad. Para mí, fue una muy bonita experiencia ser capaz de compartir esos meses junto con María Andrea, quien fue la persona que me hizo de la conexión para las citas. Con ella aprendí mucho sobre amamantar y vivir con los niños. Compartimos muchos momentos hermosos. Por ejemplo, compartimos sobre nuestras vidas, y como madres nos entendíamos muy bien. Escuchamos muchos consejos y si necesitaba algo, ella me ayudaba a encontrar la solución o el lugar donde yo podía ir a buscar lo que necesitaba. Fue muy útil para mí, y lo que necesitaba. A ese tiempo, siempre había alguien que pensaba en mí y se preocupaba por mi bienestar y el de mi familia. A pesar de que tenía el apoyo de mi familia, este proyecto fue una ayuda extra a mi hogar, a mis conocimientos como mamá, de poder saber qué hacer en el momento correcto. Gracias a todo el grupo de personas que hicieron esto posible en el momento indicado y por todo el apoyo que me brindaron. Que Dios los bendiga y que puedan seguir desarrollando muchas alianzas más de apoyo para nuestras pequeñas para el futuro que les espera."

JENNY C.

3“Para mí, este programa de visitas a casa Montessori, fue de gran ayuda. Pude entender mejor lo que es el desarrollo de mi hijo aplicando la filosofía Montessori sobre la vida práctica. Durante el programa se fijaron metas de acuerdo a lo que yo deseaba trabajar o enfocar con mi hijo y se realizaban actividades que me ayudarían a lograr esas metas. Por ejemplo, una de ellas fue establecer una rutina con mi hijo para la hora de dormir ya que tenemos problemas para que él duerma temprano. El establecer una rutina de sueño nos brindó seguridad y mi hijo ya sabía que después de esas actividades se llegaba la hora de dormir y mejoramos mucho su horario de ir a la cama. No solo el programa ayudó en mi hijo si no que a nivel emocional me ayudó a mí ya que no me sentía sola en este proceso de ser mamá primeriza y no saber sobre todos estos aspectos del desarrollo de mi niño, este programa me sirvió mucha a mí como a mi hijo."

LILLY S.
One Step Forward, Two Steps Back:
Addressing the Benefits Cliff Barrier to Family Economic Stability and Mobility
BY NATLETHA SUMO AND ELAINE CUNNINGHAM

Many experts point to cliff effects as the primary reason low-income families fail to achieve self-sufficiency (Urban Institute, 2022). Cliff effects occur when benefits from public work support programs (such as medical assistance, SNAP, childcare assistance, etc.) decrease or end completely as household income increases. Because program eligibility and benefit amounts are based on income, as families earn more money, public work support benefits phase out or end abruptly (Indiana Institute for Working Families, 2012). Often the increased amount of income a family may receive by accepting a new job, getting a raise or increasing hours worked does not make up for the loss or decrease of benefits (Urban Institute, 2022; Indiana Institute for Working Families, 2012). The result is that families are stuck on a one-step forward, two steps back pathway that delays their progress toward economic stability and prevents them from successfully making the transition to self-sufficiency.

OPPORTUNITY AND OUTCOME GAPS EXACERBATED BY BENEFIT CLIFFS

Most low-income families that rely on public work support programs to make ends meet will experience benefits cliffs as their income increases. Although some of these cliffs are minor, the losses’ accumulated impact creates a bumpy pathway to self-sufficiency. Families often stall out, making the difficult decision to forgo opportunities to increase earned income since they cannot afford to lose program benefits.

The issue of benefit cliffs disproportionately affects families with young children. The family highlighted in Figure 1 sees their resources drop precipitously even before they have achieved enough combined resources to cover a bare-bones budget. Young families are more likely to live below the poverty line, be employed in low or lower-wage work and lack sufficient assets to manage fluctuations in expenses or income. At the same time, they face significant childcare costs that, for Minnesota families, are among the most expensive in the nation. Because the market rate for childcare, along with health care, is a major portion of the expenses for young families, there is a rational reluctance to accept higher earnings that would precipitate a loss of these two benefits.

Families that are Black, Indigenous, Latinx and from other communities of color are also disproportionally burdened by the negative effects of benefits cliffs due to the added layer of racial disparities in income and workforce participation and the systems through which work support programs are administered (Federal Reserve of Atlanta, 2020). Female-led households and other marginalized groups, including immigrants, people with disabilities, and youth involved in the foster care system also encounter higher levels of disruption to their economic mobility due to benefits cliffs and the complexities of the eligibility rules for public programs (National Center for Child Poverty, 2020).

POLICY APPROACHES: OPPORTUNITIES TO SOFTEN CLIFF EFFECTS

A variety of approaches can be taken to address the benefits cliff challenges faced by struggling families. Using CDF-MN’s Economic Stability Indicator (ESI) tool, we can build scenarios that allow us to analyze and evaluate potential solutions that would soften the impact of cliff effects. These analyses support the following policy recommendations:

• better alignment and coordination of eligibility and administration across public work support programs,
• continuous program eligibility for longer periods of time to support family financial planning
• full funding of programs to eliminate wait lists and ensure benefits for all families that qualify,
• increased use of flexible cash programs that allow families to allocate funds where they are most needed, and
• reformed tax credit programs to better support families throughout the year (see pages XX).

IN 2021 THOUSANDS OF MINNESOTA CHILDREN DEPENDED ON KEY PROGRAMS WITH STEEP BENEFIT CLIFFS

• 56,000 on the Minnesota Family Investment Program
• 36,000 on the Child Care Assistance Program

Learn more about how many children are supported by these programs and others in your county at datacenter.kidscount.org
REALIZING THE POTENTIAL OF WORK SUPPORT PROGRAMS

Public work support programs provide critical support to low-income families, especially those from marginalized communities and those with young children. These programs aim to fill in the gap between low wages and a family’s basic needs, enabling families to be more economically stable while they move toward self-sufficiency. For children, economic stability is particularly important as research shows the link between economic stability and improved childhood outcomes. However, some of the current structures and policies governing public work support programs pose barriers to the very families they were intended to support. Low-income families that progress in the workforce and increase their income are often faced with benefit cliffs that significantly impact their economic stability and often leave them worse off.

FIGURE 1: TOTAL FAMILY RESOURCES TUMBLE BEFORE REACHING SELF-SUFFICIENCY

MONTHLY INCOME: Wages.

FPG: Federal Poverty Guidelines

BREAK-EVEN POINT: Income equals reduced expense (family’s expense after they have enrolled in all of the programs for which they are eligible).

NET RESOURCES: Income minus reduced expense

Benefit Cliffs Occur across the Income Scale in Minnesota Examples based on a family of three. One parent and two children (ages 1 and 3) living in Dakota County.

CDF-MN Economic Stability Indicator tool (ESI) was used to run scenarios and generate analysis. ESI is a tool that illustrates the interactions between wages, tax liabilities, public work support programs and tax credits and how they can or cannot bring a family to a place of economic stability. Learn more: economicstabilityindicatormn.org

*Federal Poverty Guidelines (FPG) levels for exit levels are approximate.
The paid leave opportunity to create healthier Minnesota children and families

Access to paid time off to care for a new child, seriously ill family member, or oneself carries with it a wide range of economic and health benefits. Conversely, lack of access to low-income, rural, or Black, Indigenous, Asian and Latinx families contributes significantly to systemic opportunity gaps in Minnesota. Whether it is healing from cancer more quickly or avoiding a preterm birth, the intertwined health and economic ramifications for families of having paid leave—or not—can be enormous. For young families—when the budget is stretched thinnest, and savings are sparse—three months without income and a loss of job can start a destabilizing negative spiral that has lifetime impacts for them and their children. In addition, historical barriers created by discriminatory policies prevent many families of color from building the wealth needed to cope with family events requiring time off from work. Furthermore, gig and part-time workers—disproportionately younger and from Black, Indigenous and other communities of color—are also often excluded from paid and unpaid leave policies and programs (see Minnesota Policies box for examples).

Recent research documents the resulting inequities. New Minnesota mothers from Black, Indigenous and Latinx communities or with low incomes (less than 200% of the poverty line) take shorter leaves and more leaves without pay than their higher income or white counterparts (60% completely unpaid versus 34%, for example) (MDH, 2022). Low-income and Black, Asian, Indigenous and Latinx working parents are also less likely to qualify for federal FMLA (Family and Medical Leave Act) protections or afford to avail themselves of entitled leave due to lack of pay (Yoshi et al., 2020).

HEALTH DISPARITIES START WITH LEAVE DISPARITIES: THE BREAST-FEEDING CASE

Minnesota mothers that reported breastfeeding took longer leaves (11 weeks) while those that were not breast-feeding only took an average of 7 weeks. Exclusively providing breastmilk to babies until they are 6 months old carries many benefits which have been widely documented. Benefits for infants include lower rates of mortality, malnutrition, and infection. Benefits also extend to the mother and include lower risk of high blood pressure, type 2 diabetes, ovarian cancer, and breast cancer.

Minnesota policies expand access for some workers but also exacerbate unequal opportunities for others.

• MN’s Pregnancy and Parental Leave law provides a right to leave and employment protections to additional workers, but not pay. Workers at smaller employers and without a year of tenure are excluded. https://tinyurl.com/yb3k3nku
• MN’s Sick and Safe Leave law requires employers that already provide sick leave to allow workers to use it for care of family members. 90% of top 25% workers have paid sick leave compared to 30% in bottom 10%. https://tinyurl.com/3dhleuyg
• Inadequate dissemination of other Minnesota policies compromises their impact.
  • The MN Human Rights Act protects parents with minor children living at home (‘familial status”) from employment, housing, other discrimination. https://tinyurl.com/2t5s5l6z
  • MN’s unemployment insurance system allows workers to receive support (under some conditions) when they quit a job due to loss of childcare, a serious health condition or to care for a family member with one. https://tinyurl.com/4zpmnfxk

The average length of maternity leave in the US is one week. Only 5% of new dads take at least two weeks of parental leave (MDH-PRAMS 2016-2020). When men can take parental leave, they, their children and families, and the state gain:

• more involvement in the child’s direct care nine months after birth;
• more likely to have a stable marriage or relationship with the other parent;
• promotion of children’s educational attainment and emotional stability;
• fewer postpartum health complications, reduced stress and improved mental health for mothers;
• higher incomes for mothers (and their families);
• more comfort as active, responsible co-parents;
• less public assistance in the year following their child’s birth

“"Our fathers, when they take it, if they take it at all, it happens to be in a shorter duration than mothers. It’s not just whether they are allowed but simply put for economic reasons. We know that having our fathers more involved during the birth process altogether really helps to mitigate health and economic issues but more importantly...the best chance for all of our children to meet their developmental milestones is to have both parents involved in a co-parenting role.”

WILLIAM MOORE, Ramsey County Perinatal Health Educator, testimony on paid family and medical leave before the Minnesota House Early Childhood Policy and Budget Committee, February 23, 2021.

Eleven states have passed a statewide paid family and medical leave program; Minnesota isn’t one of them.
Infant and Early Childhood Mental Health:
Healing Young Children, Healing Whole Families
LAURA LACROIX-DALLUHN

Babies and young children can show signs of anxiety, depression, posttraumatic stress disorder, and other mental health challenges. Nationally, approximately 10-16% of babies and young children under age 5 experience mental health challenges as a result of disruptions or risks to their relationships, biology, or environments (Zero to Three, 2022).

The rapid pace of learning, and brain development, during the first five years of life provides unique opportunities to shape a child’s future. The interaction of our genes and our life experiences during these early years shapes the development of our brain and lays a foundation for our future physical, cognitive, and mental health. In addition to learning how to walk and talk, babies and young children are also learning how to regulate their emotions and build healthy relationships.

A major ingredient in the developmental process is the interaction a baby or young child has with its parents, relatives, and caregivers. Responsive and nurturing relationships with a parent, relative, or caregiver are critical at this time in their life. The absence of these nurturing relationships leads to increased cortisol in babies and young children as they cope with threatening situations, potentially leading to cognitive, physical or mental health challenges.

Not all caregivers have the support needed to provide a predictable, stable, responsive environment for their children. Many caregivers struggle to manage child development challenges; others struggle with their own trauma or mental health challenges waiting months or years to obtain needed services; still others lack the resources necessary to secure the basics for themselves and their children—stable housing, nutritious food or reliable childcare. Infant and early childhood mental health provides important opportunities to focus on family well-being.

Providing families access to proven parent-child therapies and early childhood caregivers access to mental health consultation are key strategies to mitigating potential long-term physical or mental health challenges and disorders caused by trauma, neglect, biological, or environmental situations. Parent-child therapies can help parents and other caregivers build skills to form nurturing relationships and be responsive to behaviors and signs of distress. It can also help a child build trust with their parents and caregivers and form healthy attachments. One key to success is understanding the infant’s attachment style and how best to support them.

One of the key challenges is the high demand for infant and early childhood mental health services. Although the need is high and services are effective, the access to services is limited. To address this issue, families can advocate for services and support and explore the environment and learn—all in the context of family, community, and cultural expectations for young children.

Healing Young Children, Healing Whole Families—Responsive Caregiver, Responsive Child: What we know and why it matters (Zero to Three, 2022) is a foundational resource for understanding infant and early childhood mental health.

To learn more about infant and early childhood mental health services, visit the Minnesota Department of Human Services’ website at https://www.mndhs.gov/

Healing Young Children, Healing Whole Families—Responsive Caregiver, Responsive Child: What we know and why it matters (Zero to Three, 2022)

Provider Directory, Minnesota Department of Human Services

“Little people, through their behaviors and interactions with family and caregivers, share if their lives are well or not. Sometimes they are sharing through their behaviors that their family needs support. They are communicating their needs, or the fact their needs aren’t getting met, through various behaviors. Little people are wise and generous and often take on a lot for their families. We acknowledge this and provide the safety and nurture they need. We now know through the science of ACEs, their generosity is evident and has lifelong effects.

As a foster to adoptive mom for my two youngest children who moved between 6 foster placements before I received them at ages 1 & 2, I wasn’t given specific information or tools to understand what types of supports would be best to help them heal after early trauma in their lives. It was a hard time. I knew my young children were holding onto their trauma, even if they didn’t know, and they were grieving the loss of their family. It took several calls for help and months waiting for appointments to get the services we all needed if people are accessing services, it’s common for them to wait 6-12 months.

It is clear, little kids and little children cannot just ‘move on’ the way we expect adults to do after experiencing trauma or hard times. Some family systems don’t function well, but we have an opportunity to engage with families and provide supports to lift them up through early childhood mental health services. We have to focus on the whole family when helping babies and little kids heal; and it is most useful when we consider a cultural approach.”

LUCY LITTLEWOLF ARIAS
Gun Violence Prevention: Reducing Deaths and Damage

In recent years, firearms have become the leading cause of death among Minnesota children. In 2020, 46 Minnesota children and teens died from guns—they joined 4,320 children from other states, enough to fill the State Capitol in 2020. Jones and his favorite cousin, Da’Qwan’s mother Monica, brought their story to the Minnesota law requires school districts to conduct five lockdown drills per year. While mass shootings grab fleeting public and policymaker attention, routine firearm incidents kill more children. Children of color continue to face the greatest risk. Minnesota children also experience collateral damage from firearm related homicides and suicides in their families and communities. Children also live with psychological trauma related to the prevalence of and expectation for firearm related violence in their communities, including lockdown or active shooter drills in their schools. “Generations of students are learning to hide under their desks and barricade their doors. They are taught to block windows to avoid being seen by a potential shooter. Researchers found the drills associated with increases in depression, stress, anxiety, and physiological health problems for students, teachers, and parents (ElSherief et al 2021).”

While mass shootings grab fleeting public and policymaker attention, routine firearm incidents kill more children. Children of color continue to face the greatest risk. Minnesota children also experience collateral damage from firearm related homicides and suicides in their families and communities. Children also live with psychological trauma related to the prevalence of and expectation for firearm related violence in their communities, including lockdown or active shooter drills in their schools. “Generations of students are learning to hide under their desks and barricade their doors. They are taught to block windows to avoid being seen by a potential shooter. Researchers found the drills associated with increases in depression, stress, anxiety, and physiological health problems for students, teachers, and parents (ElSherief et al 2021).”

Over 500 Minnesotans died from gun violence in 2020, an average of 1 person killed every 17 hours. Firearm deaths affect children from every Minnesota county. County fact sheets available at cdf-mn.org.

“Everyday gun violence romps through their playgrounds, terrorizes them in their classrooms and child care centers, follows them down the street, waits at the bus stop, and shoots them through their bedroom windows. It nags at their minds and spirits, snuffing out the promise and joy of childhood. It gives them recurring nightmares and endless worries. It makes them plan their own funerals because they don’t think they’ll live to adulthood. And it makes them wonder if adults will ever make it stop and keep them safe.”

PROTECT CHILDREN, NOT GUNS, https://tinyurl.com/mrkr43ux

MINNESOTA MOTHERS HEAL, TAKE ACTION

“I was so busy making sure my kids were kept safe outside of our home, I didn’t think about conversations around guns in our home. Although I know I was and am a good parent I wonder if the situation would have been different if myself or the school provided education around guns. Maybe my son would be alive today if someone had talked to him or his friends. If just one child had spoken up about the gun making the rounds at his school in the days leading up to his death, things could have been different. He might still be staying after school helping the kids with special needs.”

Monica Jones lost her 17-year-old son Da’Qwan when two teenage boys brought a gun into her home and passed it around while playing video games. Monica, a professional youth advocate, has turned her pain into action, envisioning a curriculum to teach young people about guns in hopes of preventing senseless deaths like Da’Qwan’s. State law requires school districts to provide health education and encourages them to include violence prevention (MDE, Health, Pandemic). As their prevalence and role in child deaths grows, Monica is hoping to produce a readymade curriculum that will help schools and other programs that connect with youth to add guns to the list of important topics they cover.

Pastor Marea Perry reached out to Monica in the days following Da’Qwan’s death. Perry created the nonprofit Secrets2Truth after her 19-year-old son Marquez was murdered, turning her hope that families impacted by gun violence would have needed support into action. “A lot of it is heavy but it is important to have someone big and powerful – like a little angel — to hold your hand and walk with you. Someone who is patient, helps you try on a new normal and teaches you how to love yourself so you can love your children and your children can continue to love others. Someone to show them how to heal healthy.” Secrets2Truth sprang from Marea’s own experience.

Marea Perry remembers her son Marquez, with his car, the site of his murder.

“Even after being out in community for so long, doing the work around gun violence prevention, the impact it leaves on families and how it is harming our communities, I never thought it would hit my door. May 3rd of 2019 it hit my door. That was the last morning I saw his face. Marquez always looked nice and his smile was to die for. He was a beyond talented musician, very creative, athletic. He was loved by so many, just an amazing young man. That was the worst day, worst morning, worst afternoon. When I picked up the phone everybody was screaming ‘Marquez’ Marquez?’ My first response was ‘God wouldn’t do this to me’. I went to the location and there he was lying on the ground by his vehicle, maybe three feet away. I saw yellow tape. I thought that when I get there I was going to be able to save him. I was used to mothering him and saving him. He was my first son; he was the beginning of motherhood and parenting for me. That morning something was stolen, something was taken. In that moment I wanted to know who hurt him, who murdered him, what happened. The young man who murdered my son had some mental health problems and trauma that no one paid attention to. Because they didn’t pay enough attention, he was causing the same harm that could have been inflicted on him or someone that he knew. After that came the trial; going back and forth for a whole year. You know, for a whole year they kept my son’s body. Marquez left behind seven siblings. It was traumatic, sleepless nights listening to their moans and the crying. I didn’t know if they were going to be angry or treat people badly because they were hurt, because hurt people hurt people. But today I can say that I have the most resilient kids in the world. They did a really good job healing and I love them dearly. It’s hard. They still cry. We all still cry. He is one young soul we will never forget. It not only scarred our family, but it scarred the community. So many people showed up at his funeral, because they knew him. He left a mark on this world.”
### Demographics

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#### Child Race/Ethnicity

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### Family and Caregivers

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#### Births

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<thead>
<tr>
<th>Category</th>
<th>Number</th>
<th>Rate</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total births, Rate per 1,000 children</td>
<td>66,033</td>
<td>11.7</td>
<td>2019</td>
</tr>
<tr>
<td>Births by maternal education</td>
<td>4,328</td>
<td>7.8%</td>
<td>2019</td>
</tr>
<tr>
<td>4 years of high school or GED completed</td>
<td>7,105</td>
<td>13.1%</td>
<td>2019</td>
</tr>
<tr>
<td>Some college credit but no degree</td>
<td>8,989</td>
<td>16.3%</td>
<td>2019</td>
</tr>
<tr>
<td>Associate's Degree</td>
<td>7,774</td>
<td>13.9%</td>
<td>2019</td>
</tr>
<tr>
<td>Bachelor's Degree</td>
<td>17,000</td>
<td>22.2%</td>
<td>2019</td>
</tr>
<tr>
<td>Graduate or Professional Degree</td>
<td>9,675</td>
<td>13.9%</td>
<td>2019</td>
</tr>
<tr>
<td>Births to foreign-born mothers</td>
<td>13,104</td>
<td>20%</td>
<td>2019</td>
</tr>
</tbody>
</table>

#### Children Born Preterm

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
<th>% of Total Population</th>
<th>Rate</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children born preterm</td>
<td>9.2%</td>
<td>2019</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Early Childhood

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
<th>% of Total Population</th>
<th>Rate</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children born at low-birthweight</td>
<td>6.9%</td>
<td>2019</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children age 3 and 4 not enrolled in preschool</td>
<td>84,625</td>
<td>61%</td>
<td>2021</td>
<td></td>
</tr>
</tbody>
</table>

#### Early Childhood Education

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
<th>% of Total Population</th>
<th>Rate</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children served by the Child Care Assistance Program</td>
<td>36,650</td>
<td>2022</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Families on waiting lists for the Child Care Assistance</td>
<td>873</td>
<td>Aug 2022</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children enrolled in Head Start or Early Head Start</td>
<td>11,681</td>
<td>2019-21</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### K-12 Education

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
<th>% of Total Population</th>
<th>Rate</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students enrolled in non-public schools</td>
<td>69,971</td>
<td>2021-22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CT Students enrolled in K-12 public schools</td>
<td>872,083</td>
<td>2022</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CT K-12 public school students who are English Learner Identified, As % of K-12 public school students</td>
<td>77,473</td>
<td>9%</td>
<td>2022</td>
<td></td>
</tr>
</tbody>
</table>

#### Fourth-graders who scored below proficient reading level by race and ethnicity (NAEP) (Percent)

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
<th>% of Total Population</th>
<th>Rate</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>59%</td>
<td>2022</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black or African American</td>
<td>87%</td>
<td>2022</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>86%</td>
<td>2022</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asian or Pacific Islander</td>
<td>78%</td>
<td>2022</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Two or more races</td>
<td>72%</td>
<td>2022</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Eighth-graders who scored below proficient math achievement level by race and ethnicity, (NAEP)

- White - 61% 2022
- Black or African American - 89% 2022
- Hispanic or Latino - 93% 2022
- Asian or Pacific Islander - 59% 2022
- Two or more races - 66% 2022

Students who graduated in 4 years, As % of public school students

- 57,137 83.3% 2020-21

Students who graduated in 5 years, As % of public school students

- 58,498 86.6% 2020-21

Students who dropped out within 4 years, As % of public school students

- 2,776 4.1% 2020-21

CT Students who dropped out within 4 years, As % of public school students

- 2,776 4.1% 2020-21

CT Students who graduated in 4 years, As % of public school students

- 57,137 83.3% 2020-21

CT Students who graduated in 5 years, As % of public school students

- 58,498 86.6% 2020-21

ECONOMIC STABILITY

- Households with children that had difficulty paying for usual household expenses in the past week - 38% 2022
- Entire population living in poverty, As % of population - 520,000 9% 2021

CT Children living in poverty, As % of children

- 139,000 11% 2021
- White, Non-Hispanic - 60,450 7% 2021
- Black or African American - 29,035 23% 2021
- Asian or Pacific Islander - 13,710 19% 2021
- Hispanic or Latino - 18,914 16% 2021
- Two or More Races - 23,124 14% 2021
- Immigrant children in poverty, As % of all immigrant children - 55,000 21% 2019
- Children age 5 and under living in poverty, As % of children age 5 and under - 46,000 12% 2021
- Children living in extreme poverty (50% of poverty), As % of children - 61,000 5% 2021
- Children living below 200% of poverty, As % of children - 349,000 27% 2021
- Families living in poverty, As % of families - 56,000 9% 2021
- Married-couple households with children in poverty, As % of all married-couple households with children - 14,000 3% 2021
- Single-parent households with children in poverty, As % of all single-parent households with children - 41,000 22% 2021
- Median family income of households with children (in 2019 dollars) - $97,200 2019
- White, Non-Hispanic - $108,600 - 2019
- Black or African American - $41,600 - 2019
- American Indian - $34,000 - 2019
- Asian - $90,000 - 2019
- Hispanic or Latino - $52,900 - 2019
- Two or More Races - $52,000 - 2019

HEALTHY DEVELOPMENT

- CT Children without health insurance, As % of children in age group

- 42,000 2.6% (0-5) 3.5% (6-17) 2021

- CT Children enrolled in Medical Assistance (Monthly average)

- 520,034 - 2021

- CT Children enrolled in MinnesotaCare (Monthly average)

- 1,400 - 2021

- CT Children whose mothers received inadequate or no prenatal care, As % of births

- 6,261 9.5% 2019

- Children (3 to 17 years old) who have depression or anxiety

- 149,600 14% 2020

- CT 9th Graders with long-term mental health, behavioral or emotional problem

- - 23% 2019

- CT Children who have one or more emotional, behavioral, or developmental conditions, As % of children

- 221,015 21% 2018-2019

- CT Children 24-35 months who are up-to-date with the vaccine series, As % of children 24-35 months

- - 63% 2021

- CT Children age 13 who have received the recommended adolescent vaccines, As % of children age 13

- - 28% 2021

SAFE HOMES AND COMMUNITIES

- CT Children under age 6 testing positive for lead poisoning

- 493 - 2020

- CT Children living in crowded housing, As % of children

- 133,000 10% 2019

- CT Housing units where housing costs exceed 30% of income, As % of all housing units

- - -

- CT Housing units with children by housing type

- Owner - 511,501 - 2021
- Renter - 134,909 - 2021

HOMES AND COMMUNITIES

- CT Homeownership, As % of households

- Black or African American - 39,095 30.5% 2021
- Asian - 7,702 49.5% 2021
- American Indian - 56,451 66.1% 2021
- Hispanic or Latino - 50,296 56.6% 2021

- CT Black or African American, As % of all African American households

- 39,095 30.5% 2021

- CT Asian, As % of all Asian households

- 7,702 49.5% 2021

- CT American Indian, As % of all American Indian households

- 56,451 66.1% 2021

- CT White, Non-Hispanic, As % of all white households

- 1,464,524 77.5% 2021

- CT Two of More Races, As % of all households headed by someone with Two or More Races

- 61,512 59.7% 2021

- CT Hispanic or Latino, As % of all Hispanic or Latino households

- 50,296 56.6% 2021

- Tax households who claimed the Earned Income Tax Credit (EITC)

- 304,000 - 2020

- Average EITC amount

- $2,210 - 2020

- Tax households who claimed the MN Working Family Credit (WFC)

- 388,074 - 2019

- Average WFC amount

- $715 - 2019

CT Families receiving child support, As % of eligible families

- Female-headed families receiving child support, As % of families headed by unmarried women

- 29,000 30% 2019-2021

STATE DATA TABLES

STATE DATA TABLES
**STATE DATA TABLES**

| CT | Children age 10 to 17 arrested for serious crimes | 2,833 | – | 2020 |
| CT | Children who died from unintentional injuries | 94 | – | 2020 |
| CT | Children abused or neglected, rate per 1,000 children | 6,250 | 4.8% | 2020 |
| CT | Firearm deaths (all ages) | 513 | – | 2020 |
| CT |Suicides | 354 | – | 2020 |
| CT |Homicides | 118 | – | 2020 |
| CT |Other | 21 | – | 2020 |
| CT |Firearm deaths for children and teens (0-19) | 46 | – | 2020 |
| CT |Children (0-19) who committed suicide or were murdered | 76 | – | 2019 |

**FOOD AND NUTRITION**

<table>
<thead>
<tr>
<th>NUMBER</th>
<th>%</th>
<th>RATE</th>
<th>YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Households with children where children were not eating enough because food was unaffordable, as percent of households with children</td>
<td>–</td>
<td>32%</td>
<td>2022</td>
</tr>
<tr>
<td>K-12 students approved for free school meals, as % of K-12 students</td>
<td>274,886</td>
<td>32%</td>
<td>2022</td>
</tr>
<tr>
<td>Children enrolled in SNAP (Monthly average)</td>
<td>173,163</td>
<td>–</td>
<td>2020-21</td>
</tr>
<tr>
<td>Participation in the WIC nutrition program</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Women (pregnant, breastfeeding and post-partum)</td>
<td>40,583</td>
<td>–</td>
<td>2021</td>
</tr>
<tr>
<td>Infants born and enrolled in WIC</td>
<td>42,668</td>
<td>–</td>
<td>2021</td>
</tr>
<tr>
<td>Children (1 to 5 years old)</td>
<td>69,777</td>
<td>–</td>
<td>2021</td>
</tr>
<tr>
<td>Children living in households that were food insecure at some point during the year, as % of children</td>
<td>114,000</td>
<td>9%</td>
<td>2019-2021</td>
</tr>
<tr>
<td>Children in families visiting food shelves (non-unique, counted each visit)</td>
<td>1,376,001</td>
<td>–</td>
<td>2020</td>
</tr>
</tbody>
</table>

**TECHNICAL NOTES**

- Children, if not otherwise defined, refers to those under age 18 (0-17). A "parent" may be either biological, adoptive, or a stepparent. "Families" refers to a parent raising one or more children in their household. A "household" may contain a single family, more than one family, a family and one or more sub-families (such as three generations living together), or it may contain members that are unrelated. Statewide poverty estimates are based upon the universe for which poverty status is determined in the American Community Survey (ACS). The federal poverty definition consists of a series of thresholds based on family size and composition, for 2021 it was defined as an annual income below $36,500 for a family of four with two children. Hispanic/Latino children/families can be from any racial category. For additional information, please refer to the original data source or contact Children's Defense Fund-Minnesota.

**DEMOGRAPHICS**

- **Child population, 2021**
  
  
  **Source:** U.S. Census Bureau, 2021 American Community Survey. Table B01001.

- **Child population by age group, 2020**
  
  
  **Source:** U.S. Census Bureau, Population Estimates 2020.

- **Child population by race/ethnicity, 2021**
  
  
  **Source:** U.S. Census Bureau, 2021 American Community Survey. Tables C00301A-C00301F.

**ECONOMIC STABILITY**

- **Households with children that had difficulty paying for usual household expenses past week**
  
  

- **Children living in extreme poverty, 2021**
  
  
  **Source:** U.S. Census Bureau, 2021 American Community Survey. Table B19020A.

- **Children living in poverty, 2021**
  
  
  **Source:** U.S. Census Bureau, 2021 American Community Survey. Table B19015.

- **Children age 5 and under living in poverty, 2021**
  
  
  **Source:** U.S. Census Bureau, 2021 American Community Survey. Table B19020A.

- **Children below 200% of the poverty line, 2021**
  
  
  **Source:** U.S. Census Bureau, 2021 American Community Survey. Table B19002.

- **Children living in poverty, 2021**
  
  
  **Source:** U.S. Census Bureau, 2021 American Community Survey. Table B19002.

- **Children being raised by grandparents, 2021**
  
  
  **Source:** U.S. Census Bureau, 2021 American Community Survey. Table B19002.

**FAMILY & CAREGIVERS**

- **Households raising children, 2021**
  
  
  **Source:** U.S. Census Bureau, 2021 American Community Survey. Table S0201.

- **Married-couple households with children in poverty, 2021**
  
  
  **Source:** Population Reference Bureau analysis of U.S. Census Bureau, Poverty and SPM by Family Type, 2021.

- **Single-parent households with children in poverty, 2021**
  
  
  **Source:** Population Reference Bureau analysis of U.S. Census Bureau, Poverty and SPM by Family Type, 2021.

- **Children in poverty by race/ethnicity, 2021**
  
  
  **Source:** U.S. Census Bureau, 2021 American Community Survey. Table C00301A-C00301F.

- **Children in immigrant families, 2021**
  
  
  **Source:** U.S. Census Bureau, 2021 American Community Survey. Table C00301A-C00301F.

**SPARKING CONVERSATIONS, IDEAS AND CHANGE: THE KIDS COUNT DATA CENTER**

datacenter.kidscount.org

The KIDS COUNT Data Center provides one comprehensive website of national, state, county, and city information to help community members stay up to date on key trends in child wellbeing. The website contains hundreds of indicators and allows users to:

- Create custom reports for a specific county or state;
- Compare and rank data for different states and counties; and
- Design graphics like maps and trend lines to use in presentations and publications, including websites or blogs.

The KIDS COUNT Data Center provides state and county level data on selected indicators for all 87 counties in Minnesota. Indicators in the State Level Data Table with comparable county level data are denoted with a CT. These are not the only county level data available, however.
Children under age 6 with all available parents in the workforce, 2021
Source: Population Reference Bureau analysis of 2021 American Community Survey. Table B21008

Children in the Child Care Assistance Program, 2022
Source: Minnesota Department of Human Services, Minnesota Child Care Assistance Program, February 2022. Personal contact Laurie Possin

Families on the waiting list for CCAP, Aug 2022
Source: Minnesota Department of Human Services

Children served by Head Start or Early Head Start, 2019-21

K-12 EDUCATION

Students enrolled in non-public schools, 2021-22

Students enrolled in K-12 public schools, 2022

K-12 public school students with limited English proficiency,

K-12 public school students enrolled in special education
Source: MN Dept of Education, Data Center, Minnesota Report Enrollments, On Feb 3, 2022
https://education.mn.gov/MOE/Data/

Fourth-graders below proficient reading level by race/ ethnicity, Eighth-graders below proficient math level by race/ ethnicity, 2022

Students who graduated in 4 years or 5 years, 2020-21

Students who dropped out in 4 years, 2020-21

Fifth-graders alone afterschool one or more days, 2019
Source: Minnesota Student Survey 2019 https://tinyurl.com/3jtjjauy

FOOD & NUTRITION

Children whose mothers received inadequate or no prenatal care, 2019

Children (2 to 7) who have depression or anxiety, 2020

Children who have one or more emotional, behavioral or developmental conditions, 2018-19
Source: Child Trend’s analysis of the U.S. Department of Health and Human Services, National Survey of Children’s Health

9th graders with long-term mental health, behavioral or emotional problems, 2019
Source: Minnesota Student Survey 2019 https://tinyurl.com/3jtjjauy

Children 24-35 months who are up-to-date with the vaccine series, July 2021

Adolescents age 13 with recommended adolescent vaccines, July 2021
Source: MN Department of Health, Immunization Program Childhood Immunization Coverage in MN. Personal Contact with Sydney Kuramoto https://tinyurl.com/tnby85u

CHILD MALTREATMENT

Children age 10-17 arrested for a serious crime, 2020
Source: Minnesota Department of Public Safety, 2020 Bureau of Criminal Apprehension, Minnesota Justice Information Services, Uniform Crime Report (August 2020). Note: Refers to arrests of juveniles age 10-17. “Serious” crimes (Part I crimes) include murder, rape, robbery, aggravated assault, burglary, larceny, vehicle theft, and arson. Not all children arrested for serious crimes may have committed these crimes, and not all children who committed serious crimes may have been arrested. https://tinyurl.com/5yqez76

Children who died from unintentional injuries, 2019
Source: Minnesota Health Statistics. Personal contact Staph Gingerich https://tinyurl.com/5yqez76

Children abused or neglected, 2020

Total deaths by firearm, 2020

Firearm deaths for children and teens (0-19), 2020

Children (0-19) who committed suicide or were murdered, 2019
Source: Minnesota Department of Health, 2019 Minnesota Health Statistics Note: Combined causes of death Assault (Homicide) and Intentional Self-harm (Suicide). https://tinyurl.com/3jtjjauy

SCHOOL FOODS

Children receiving SNAP, 2021
Source: Minnesota Department of Education. https://education.mn.gov/MOE/Data/

Total participation in the WIC nutrition program, 2021
Source: Minnesota Department of Health, WIC Category and Race and Ethnicity Annual Reports. Contact Joni Geppert https://tinyurl.com/cw4y4mm

Households that are “food insecure,” 2019-2021

Children in families visiting food shelves, 2020
Source: Hunger Solutions Minnesota. Personal contact Jill Westfall https://tinyurl.com/3jtjjauy

SAFETY & COMMUNITIES

Children under age 6 positive for lead poisoning, 2020
Source: Minnesota Department of Health, Environmental Health Division. https://data.web.health.state.mn.us/lead_query

Children living in crowded housing, 2019
Source: Population Reference Bureau, analysis of U.S. Census Bureau, 2019 American Community Survey

Housing units in children, 2021
Source: U.S. Census Bureau, 2021 American Community Survey, Table B25012

Housing costs exceed 30%, 2021
Source: U.S. Census Bureau, 2021 American Community Survey. Social Explorer Tables A004AIA00030R

Homelessness by race/ethnicity, 2021
Source: U.S. Census Bureau, 2021 American Community Survey. B25003A-1

Children age 10-17 arrested for a serious crime, 2020
Source: Minnesota Department of Public Safety, 2020 Bureau of Criminal Apprehension, Minnesota Justice Information Services, Uniform Crime Report (August 2020). Note: Refers to arrests of juveniles age 10-17. “Serious” crimes (Part I crimes) include murder, rape, robbery, aggravated assault, burglary, larceny, vehicle theft, and arson. Not all children arrested for serious crimes may have committed these crimes, and not all children who committed serious crimes may have been arrested. https://tinyurl.com/5yqez76

Children who died from unintentional injuries, 2019
Source: Minnesota Health Statistics. Personal contact Staph Gingerich https://tinyurl.com/5yqez76

Children abused or neglected, 2020

Total deaths by firearm, 2020

Firearm deaths for children and teens (0-19), 2020

Children (0-19) who committed suicide or were murdered, 2019
Source: Minnesota Department of Health, 2019 Minnesota Health Statistics Note: Combined causes of death Assault (Homicide) and Intentional Self-harm (Suicide). https://tinyurl.com/3jtjjauy
(CAAL, 2022) Contact with researcher Kara Carmosino.


(Coley et al, 2016) “Children’s social, academic functioning is impeded when their families move more often.” https://tinyurl.com/cvem43p.


(MDE, Health Standards) Health Standards. https://tinyurl.com/5j1f.


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MINNESOTA KIDS COUNT IS A PROJECT OF CHILDREN'S DEFENSE FUND–MINNESOTA

ABOUT CHILDREN’S DEFENSE FUND Celebrating 50 years in 2023, Children’s Defense Fund envisions a nation where marginalized children flourish, leaders prioritize their well-being, and communities wield the power to ensure they thrive. The only national, multi-issue advocacy organization working at the intersection of child well-being and racial justice, CDF advances the well-being of America’s most diverse generation, the 74 million children and youth under the age of 18, and 30 million young adults under the age of 25. CDF’s grassroots movements in marginalized communities build power for child-centered public policy, informed by racial equity and the lived experience of children and youth. Its renowned CDF Freedom Schools® program is conducted in nearly 100 cities and 30 states and territories. Learn more at www.childrensdefense.org.