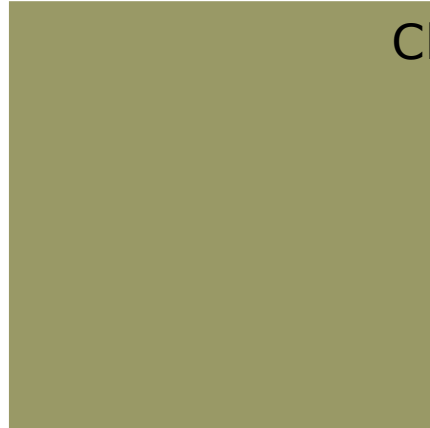




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Investing in Minnesota's Youngest Members:
Science Informed Advocacy and Early Childhood

Alexandra Fitzsimmons

Marcie Jefferys

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“Many things can wait. Children cannot. Today their bones are being formed, their blood is being made, and their senses are being developed. To them we cannot say tomorrow. Their name is today.”

~Gabriela Mistral

+ Children's Defense Fund-Minnesota



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Second level
Third level
Fourth level
Fifth level

Children's Defense Fund
MINNESOTA

Private, non-profit organization

No public funds

KIDS COUNT

Freedom Schools

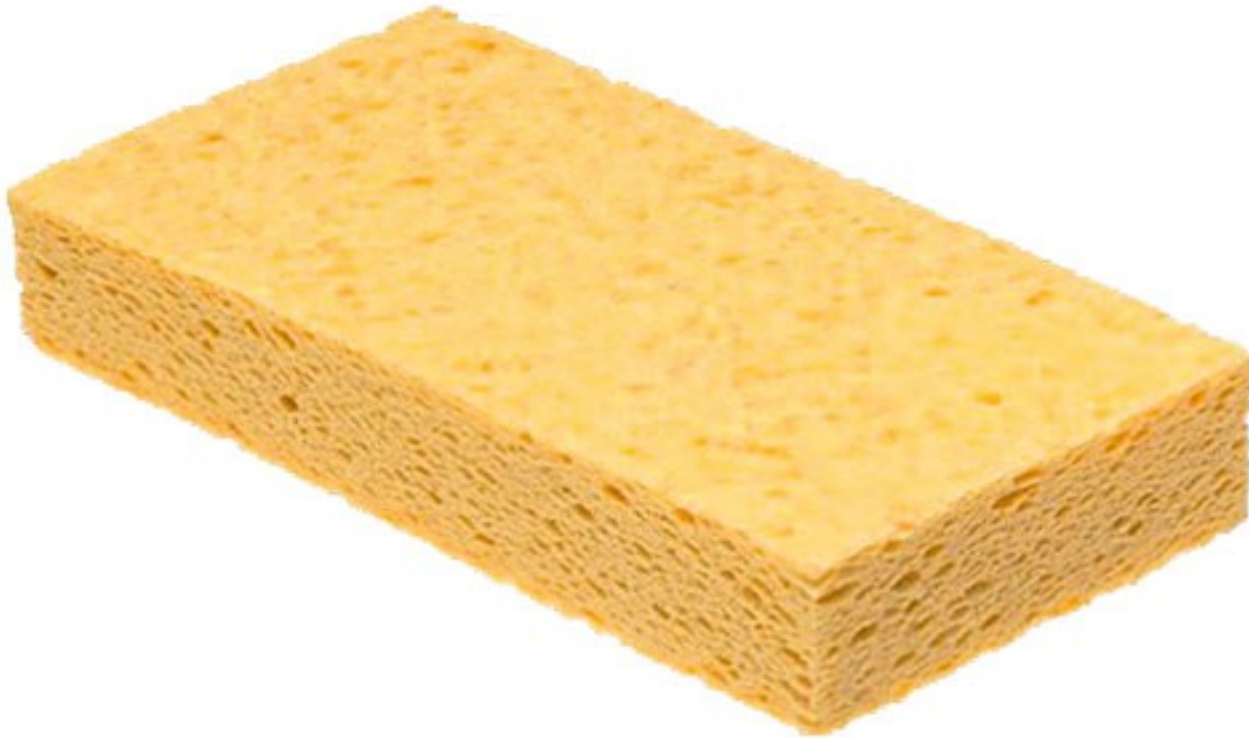
Beat the Odds

Bridge to Benefits

+ A lot is happening in this picture



+ Public Policy & Children



+ Agenda



- I. Early Childhood Science
 - A. Early childhood brain development
 - B. Toxic stress
 - C. Adverse Childhood Experiences (ACEs)
 - D. Prevention and intervention
- II. Minnesota Children At-Risk
- III. A Call to Advocacy
- IV. Early Childhood Advocacy Resources
- V. Questions

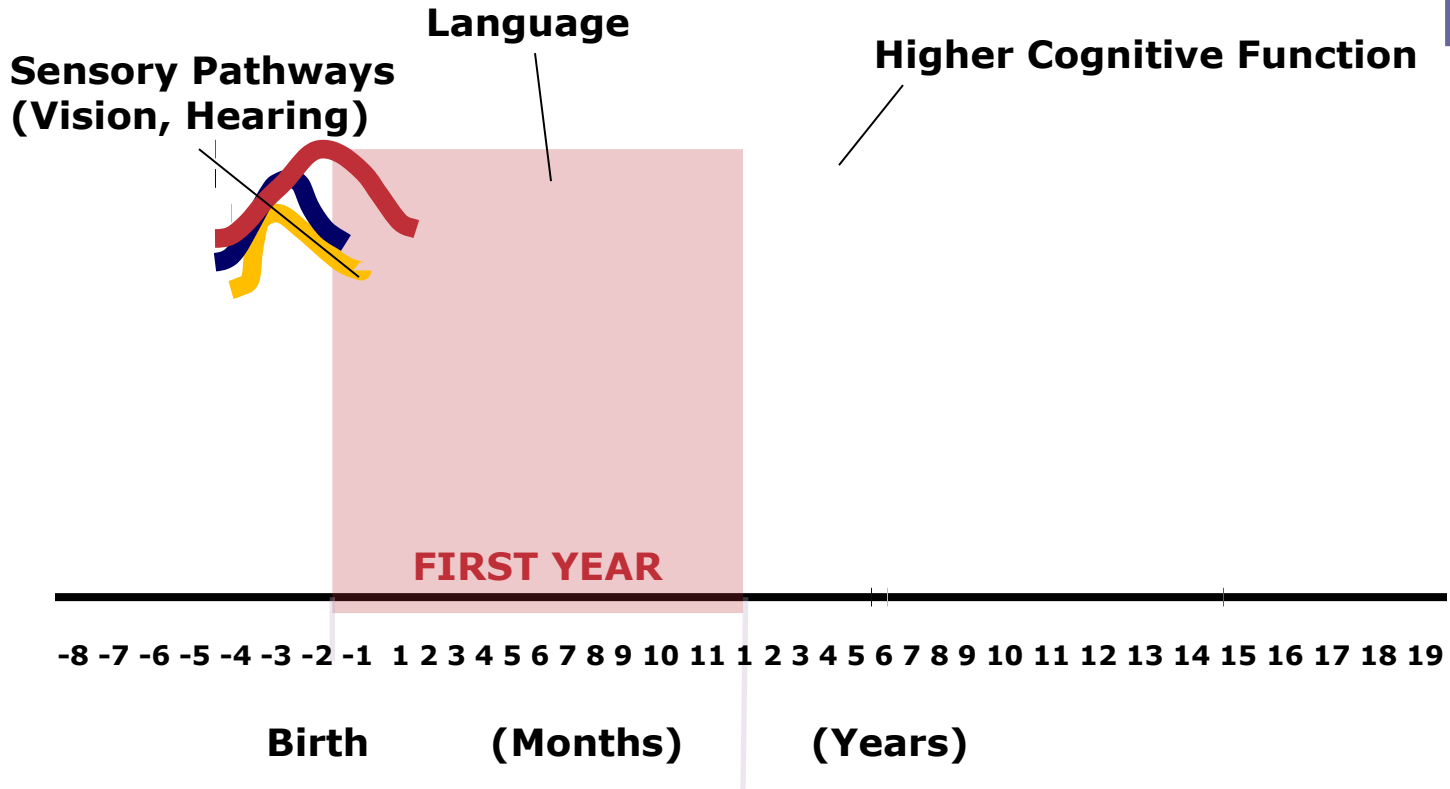


Part One:

Early Childhood Science



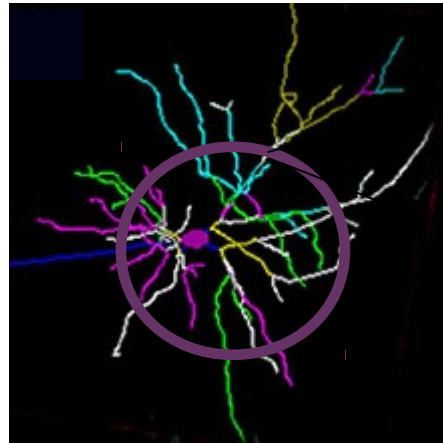
Neural Circuits are Wired in a Bottom-Up Sequence



Source: C.A. Nelson (2000)

Toxic Stress Changes Brain Architecture

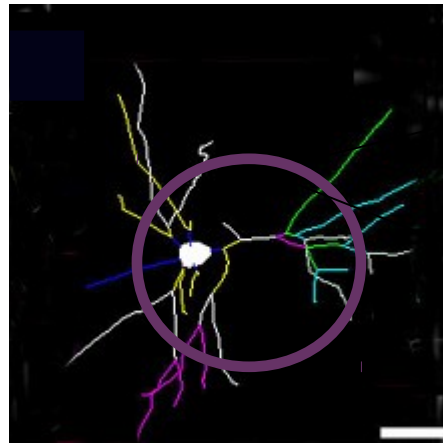
Normal



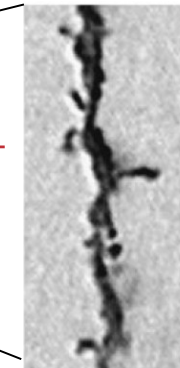
Typical neuron—
many connections



Toxic
stress



Damaged neuron—
fewer connections



Prefrontal Cortex and
Hippocampus

Sources: Radley et al. (2004)
Bock et al. (2005)

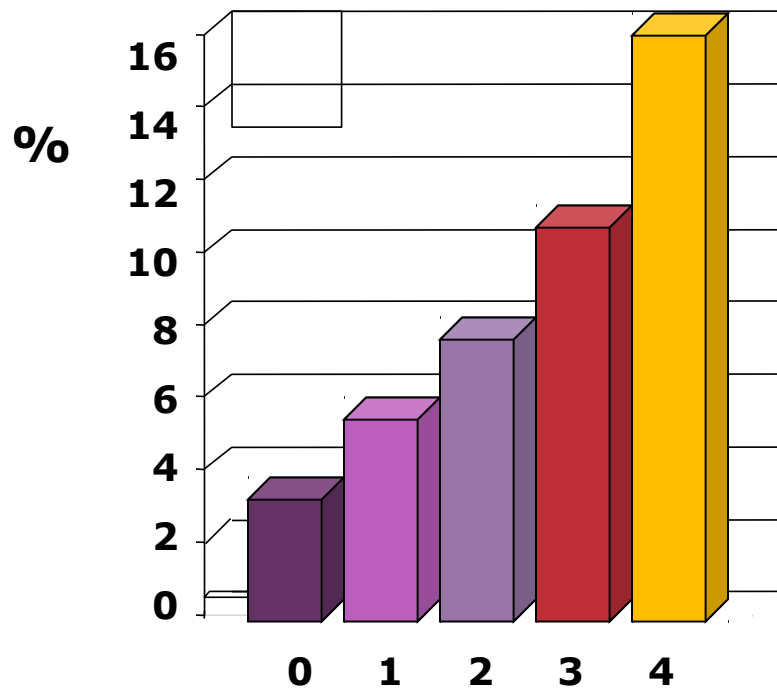
+ Sources of Toxic Stress in Young Children

- Risk Factors
 - Neglect and abuse
 - Poverty
 - Parental mental illness
 - Parental substance abuse
 - Homelessness/High mobility
 - Exposure to violence
 - Death of parent
 - Incarceration of parent



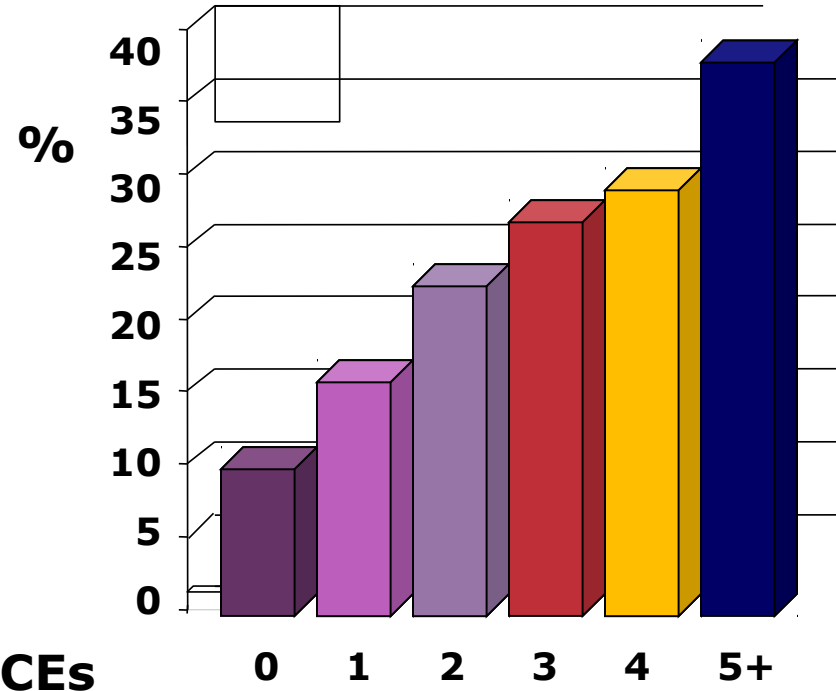
Risk Factors for Adult Substance Abuse are Embedded in Adverse Childhood Experiences

Self-Report: Alcoholism



Source: Dube et al, 2002

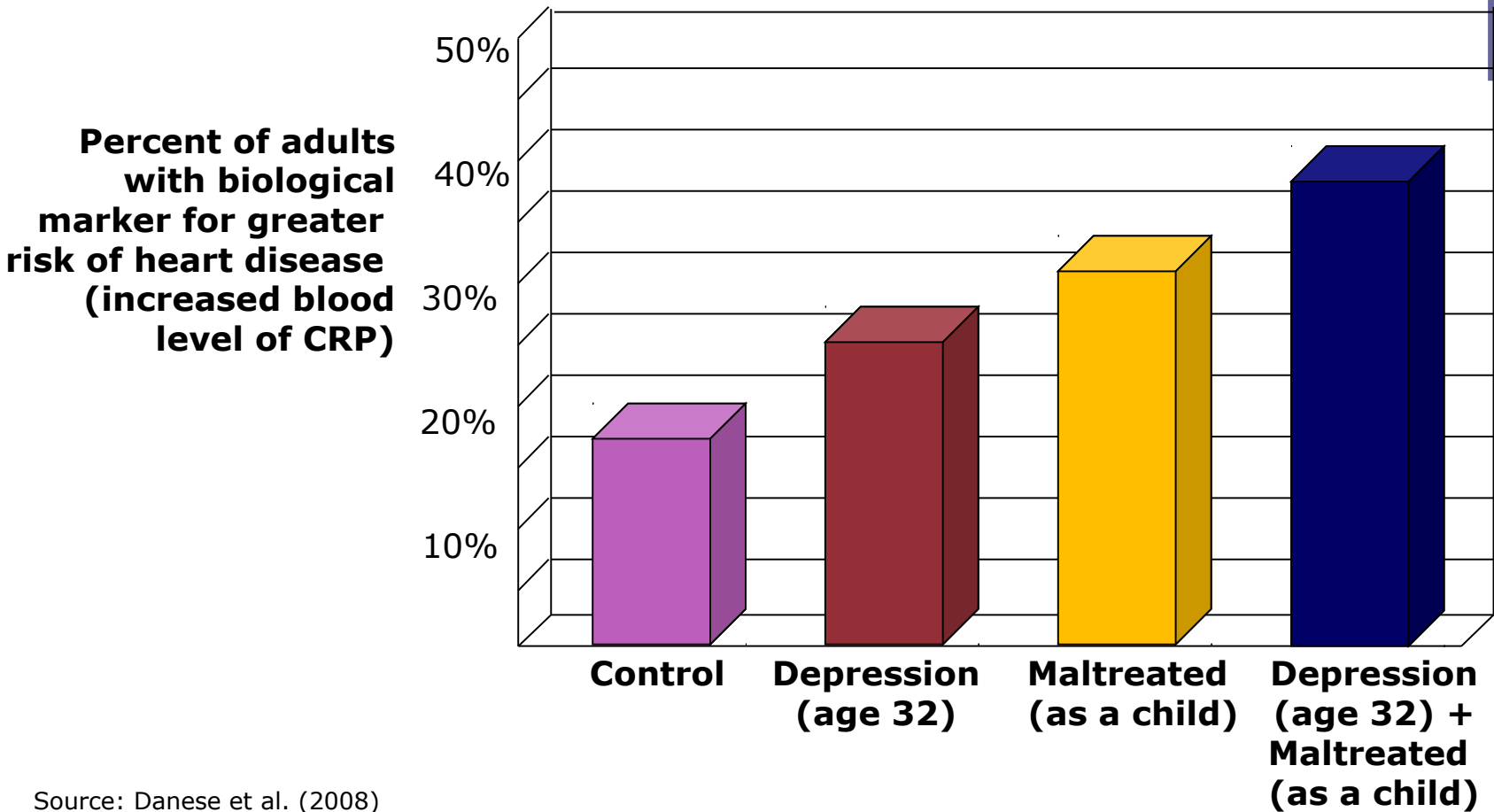
Self-Report: Illicit Drugs



Source: Dube et al, 2005

Schilling et al, BMC Public Health 7 (2007)

+ New Biological Evidence Links Maltreatment Childhood to Greater Risk of Adult Heart Disease



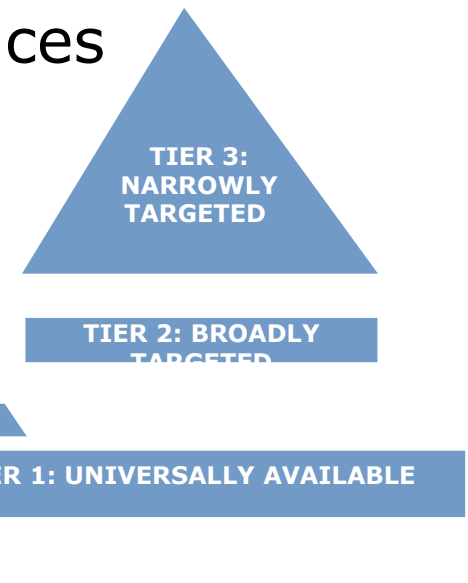
Source: Danese et al. (2008)

Science Points Toward a 3-Tiered Approach to Ensuring Healthy Development

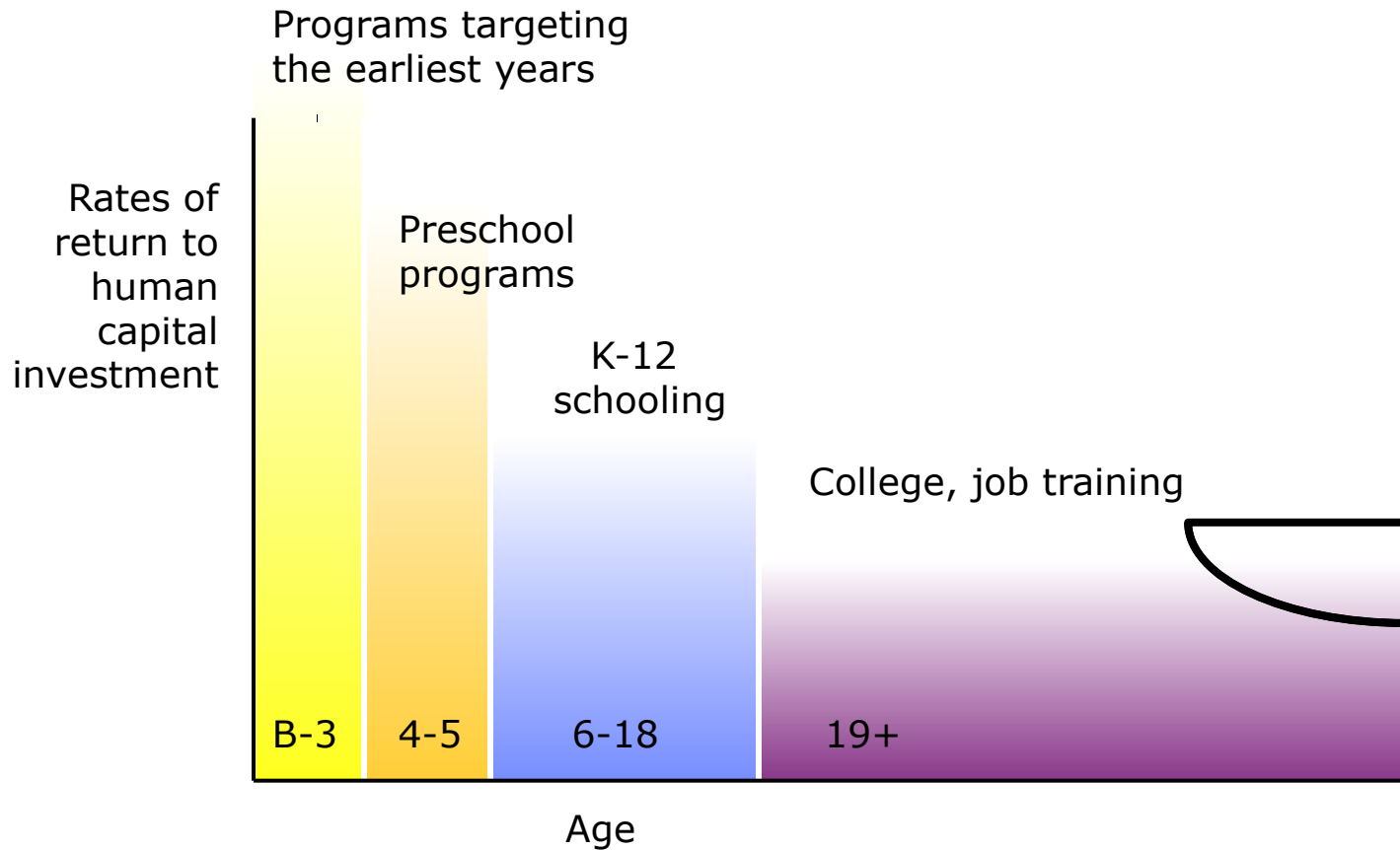
3: Narrowly targeted, specialized services for children experiencing tolerable or toxic stress to prevent later problems.

2: Broadly targeted interventions for children in poverty (e.g., income supports and early enrichment) to give all the chance to succeed.

1: Basic health services and early care and education available to all children to help build and sustain strong brains and bodies.



+ Preventive Intervention is More Efficient and Produces More Favorable Outcomes Than Later Remediation



Source: Heckman, J. (2007)



Part Two:

Minnesota Children At Risk

+ Minnesota infants and toddlers at risk



- 17% of Minnesota's young children are poor (\$22,000 for a family of four)
 - About 75% of Minnesota families living in poverty had all available parents in the workforce in 2009
- Infants are reported for neglect at the highest rate of any age group
 - Nearly 5,000 infants and toddlers were reported for neglect in 2010
- 1 in 10 new mothers experiences major depressive symptoms in the year of their babies' birth
 - Poor mothers experience depression at 2 to 5 times that rate
- 7 out of 10 MFIP assistance recipients are children
 - Most live in deep poverty (\$11,000 for a family of four)
 - 40% under five
- One-third of homeless Minnesotans are children
 - Half under age five

+ We Must Start Seeing Kids

- Consider the parenting status of adults receiving services
- Consider the environment (including parent's well-being) in which children receiving services are growing up
- Recognize the unique developmental needs of children in the design of public policies and services
- Track child well-being across programs





“If we truly care for
our children, we
must cherish their
parents.”
~John Bowlby





Resources on Early Childhood Development



Center on the Developing Child at Harvard University

<http://developingchild.harvard.edu>

University of Minnesota Institute of Child Development

<http://www.cehd.umn.edu/icd/>

Minnesota Department of Health Help Me Grow

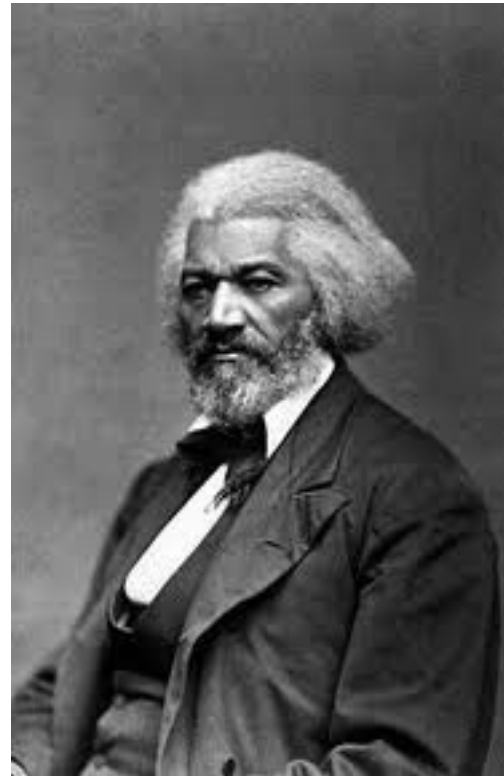
<http://www.health.state.mn.us/divs/fh/mcshn/ecip.htm#>

Zero to Three Institute

<http://www.zerotothree.org/>



“It is easier to
build strong
children than to
repair broken
men.”
~Frederick
Douglass





Part Three:

A Call to Advocacy



Together we can make a difference!



“Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has.”

~Margaret Mead



+ What is advocacy?



- Building support for an issue
 - Educate about a topic
 - Share illustrative stories
 - Work on a solution to a problem
- Possible audiences
 - Public (faith community, school, neighborhood, workplace, general)
 - Elected officials
 - Media
 - Key community leaders

+ Why should you advocate for Minnesota's youngest members?

The goal of early childhood advocacy is to improve the lives of infants and toddlers, their families and our community by influencing legislators' and policy makers' opinions, decisions and actions concerning early childhood.





How can you advocate for Minnesota's youngest members?

- Register to vote and vote in elections
- Attend precinct caucuses and bring a resolution
- Attend candidate forums and ask questions
- Call, e-mail and visit your elected officials regularly
- Testify at a committee hearing
- Write a letter to the editor
- Conduct a local letter writing campaign
- Host a community event
- Sign-up to receive action alerts



+ Who represents you?



<http://www.gis.leg.mn/OpenLayers/districts/>



Part Four:

Early Childhood Advocacy Resources

+ Resources



- **Children's Defense Fund-Minnesota**
 - www.cdf-mn.org
- **Child Care WORKS**
 - www.childcareworks.org
- **Prevent Child Abuse Minnesota**
 - www.pcamn.org
- **Interfaith Children's Advocacy Network**
 - jrlc.org/ican.html



Part Five:

Discussion



+ Contact Information



Alexandra Fitzsimmons

Children's Defense Fund-Minnesota

Legislative Affairs and Advocacy Director

fitzsimmons@cdf-mn.org

651-855-1178

Marcie Jefferys

Children's Defense Fund-Minnesota

Public Policy Director

jefferys@cdf-mn.org

651-855-1187



“There can be no keener revelation of a society's soul than the way in which it treats its children.”

~Nelson Mandela