



Thriving Families Safer Children (TFCS) Family Voice Summary

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We thank the community partners and families who participated in the focus groups for sharing their experiences.

For more information, contact:

Megan Waltz

Supervisor – Promotion and Prevention
Child Safety and Permanency Division
Minnesota Department of Human Services
Megan.h.waltz@state.mn.us

Maisha Giles

State Services Liaison
MGiles@BUILDInitiative.org

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The Children's Bureau, the Centers for Disease Control and Prevention, Casey Family Programs, the Annie E. Casey Foundation, and Prevent Child Abuse America have joined with parents, youth, and community organizations in their new initiative, Thriving Families, Safer Children: A National Commitment to Well-Being. The goal of the Thriving Families, Safer Children (TFSC) partnership, which spans the public, private, and philanthropic sectors, is to assist jurisdictions in creating a more just and equitable child and family well-being system that benefits all children and families and breaks harmful intergenerational cycles of trauma and poverty.

Minnesota was selected in January 2021 as one of the jurisdictions to receive technical assistance through this initiative. Minnesota's TFSC working group – made up of state, county, tribal, and community-based organizations – has been focused on defining practice, program, and policy recommendations that support the following working goal:

Define and advance policy and practice changes that reduce unnecessary involvement of Black, Indigenous, and children and families of color in the child protection system and, instead, equitably connect families to services and supports that will more appropriately promote child and family well-being.

Minnesota's focus on the combination of qualitative and quantitative data-driven decision making, inclusion, and belonging fits with the national partners' focus on inclusion of families with lived experience. Minnesota's TFSC working group took time to develop partnerships with counties and community organizations and an engagement plan implemented by the BUILD Initiative through an ongoing technical assistance contract supported through The Casey Family Foundation. This report summarizes the qualitative data developed through those efforts.

Background

There are significant racial disparities that exist across Minnesota's child protection continuum. Based on population estimates, during 2020, American Indian children were about four to five times more likely than white children to be reported to the state's child protection system. Children identified as being two or more races were about four times as likely, and Black children about twice as likely, to be reported to child protection.¹ In 2021, American Indian children were approximately five times more likely and African American/Black children two times more likely than white children to be the subjects of maltreatment assessments or investigations.

¹ Minnesota Department of Human Services (2022). *Preventing child maltreatment by promoting health and well-being for Minnesota families*. Retrieved from <https://edocs.dhs.state.mn.us/lfserver/Public/DHS-3922-ENG>

The most common type of maltreatment is neglect, with 53 percent of reports alleging non-medical neglect in 2020². Once involved, Black and Indigenous families in 2022 were overrepresented in out-of-home placement, with American Indian children approximately 16 times more likely than their white counterparts to experience out-of-home care; those of two or more races were seven times more likely, Black children approximately twice as likely, and children reported to have Hispanic/Latino ethnicity twice as likely.³

Methods

The Department of Human Services, Child Safety Permanency (DHS CSP) Division research staff overlaid and mapped child maltreatment reporting data (2019), child poverty rates (2019), and Child Opportunity Index 2.0 rates by census tract to determine areas across the state with high levels of need, child maltreatment reporting, and racial disparities. The mapping identified census tracts with the following criteria:

- Very low levels of child opportunity on the Child Opportunity Index 2.0⁴
- Child poverty rate above the state average of 12.2 percent⁵
- Child protection neglect reporting rate above the state median of 3.3 percent⁶
- Percentage of alleged victims in child protection neglect reports who were Black, Indigenous, or children of color above the state median of 40 percent⁷

The workgroup utilized this information to narrow engagement efforts to 12 priority areas across the state. Priority areas were selected from the identified census tracts that met the criteria based on a combination of factors including diverse community representation across the state; number of children/alleged victims in the area; concentration of census tracts in a geographic area; and areas with the highest levels of child protection reporting, poverty, and alleged victims being Black, Indigenous, or children of color.

METRO – FIVE AREAS

- Minneapolis – North Minneapolis, South Minneapolis (Elliot Park/Ventura Village/Whittier-55404 zip)
- St. Paul – East St. Paul, Midway
- Suburbs – Brooklyn Park

GREATER MN – SEVEN AREAS

- Northeast – Duluth
- Northwest – Leech Lake, White Earth
- Central – St. Cloud/Waite Park, Willmar
- Southeast – Rochester
- Southwest – Worthington

2 Minnesota Department of Human Services (2022). Child protection in Minnesota: Keeping children safe. Retrieved from: <https://edocs.dhs.state.mn.us/lfservlet/Public/DHS-4735-ENG>

3 Minnesota Department of Human Services (2022). Foster care: Temporary out-of-home care for children. Retrieved from: <https://edocs.dhs.state.mn.us/lfservlet/Public/DHS-4760-ENG>

4 Diversitydatakids.org (2022). *Child Opportunity Index 2.0 database*. Institute for Child, Youth and Family Policy, Heller School for Social Policy and Management, Brandeis University. Waltham, MA

5 Minnesota Department of Health (2019). Poverty in Minnesota Neighborhoods. 2019 American Community Survey 5-year estimates. Retrieved from: <https://mndatamaps.web.health.state.mn.us/interactive/povertytract.html>

6 Research and Evaluation Unit, Child Safety and Permanency Division (2022). *Social Service Information System (SSIS) 2019 data*. Minnesota Department of Human Services. Accessed July 2022.

7 Research and Evaluation Unit, Child Safety and Permanency Division (2022). *Social Service Information System (SSIS) 2019 data*. Minnesota Department of Human Services. Accessed July 2022.

The BUILD Initiative and work group members developed an engagement plan and protocol. In addition, they leveraged the work group members' existing relationships in the community to develop a list of potential priority-area organizations with which to partner.

Over a five-month period from late 2022 to early 2023, the Thriving Families, Safer Children initiative partnered with the BUILD Initiative to conduct focus groups with families previously involved with the child protection system. BUILD's Sherri Killins Stewart Ed.D directed the design and implementation of the groups. To reach families, we started our outreach by interviewing community partners that work closely with families in the identified priority areas. A total of 11 community partners and one county were interviewed. The interviews with community partners were designed to learn about 1) their experience with child protection, 2) what actions the state can take to make it easier for families to access the support needed, and 3) what government or community-based supports have been the most helpful. In addition, each community partner was invited to collaborate with the BUILD Initiative and TFSC Leadership to host a family focus group. An honorarium was provided for the community partners who assisted with a focus group and the families who participated.

We invited a total of 12 community partners to host focus groups. However, due to time constraints and capacity, some community partners could not assist in coordinating a focus group. A total of six focus groups, including one father-specific focus group, and three individual interviews for thirty families across seven unique census tracts were held. Sixteen Black, twelve Indigenous and two white families, and ten men and twenty women participated in the family focus group. Following the focus groups, the families and community partners were invited back to attend one of four scheduled sessions to provide feedback and check the accuracy of themes generated by the BUILD Initiative based on the initial round of listening. The focus groups aimed to:

- Identify **gaps and barriers** in accessing support for essential needs that support family well-being.
- Identify **preferred methods for seeking essential supports** for family well-being, e.g., education, housing, employment, economic, health, social, and community support.
- Identify **institutional and structural barriers** to programs, services, and initiatives designed to support family well-being for families referred to child safety and permanency.
- Identify **misalignment of opportunities** designed to support the health and well-being of children, families, and communities with family goals, interests, and approaches.
- Identify **referral indicators and triggers** from the perspective of the family-supportive services versus child safety and permanency from the perspective of mandated reporters. The following community partners were interviewed and/or hosted a focus group:

- ◆ Family Rise Together (Duluth)**
- ◆ FamilyWise (Minneapolis)**
- ◆ Minneapolis Youth Coordinating Board (Minneapolis)
- ◆ Family Enhancement Center (Minneapolis)**
- ◆ Division of Indian Work (Minneapolis - Elliot Park/Ventura Village/Whittier)
- ◆ Ain Dah Yung Center (St. Paul - Midway)

- ◆ NorthPoint Health and Wellness (North Minneapolis)
- ◆ MN One Stop for Communities (Minneapolis, St. Paul)**
- ◆ Indigenous Visioning (White Earth Nation)**
- ◆ Walker Pregnancy Center (Leech Lake)**
- ◆ Scott County (Scott County) *

***Hosted a family focus group | *Referred a parent for individual interview*

The focus groups were organized by topic: family goals and strengths; experience with government services, including CPS; experience before child protection involvement; and prevention resources and services. Six key themes emerged from the focus groups.

Key Themes

Theme 1 | Families need access to resources that support their well-being

Theme 2 | Families face difficulties navigating prevention supports and services

Theme 3 | Families fear increased surveillance when seeking prevention services and supports

Theme 4 | Culturally responsive services are critical for family well-being

Theme 5 | Increased visibility and program/service opportunities for fathers promote whole-family wellness

Theme 6 | Peer mentors connect with families due to shared experience

THEME

1

Families need access to resources that support their well-being

Throughout all focus groups and individual interviews, parents identified a need for housing and crisis resources that could prevent involvement or further involvement in child protection services. Several parents talked about not knowing where to turn for resources to help with a financial crisis. Rural families expressed the shortage of resources available in their community.

"I think it's much harder for people on the reservation to get connected with programs and stuff. I feel like there's not a lot of help in Bemidji, especially for the kids with programs like Evergreen – we need more programs like that."

Other families talked about being denied resources. One parent said: *"They say we lived in poverty, and the child care that I had to get was expensive. When I tried to get child care assistance, I called the county, and basically, they said you have a bachelor's degree, you can get a good job. We're not going to give you child care assistance; you need to get a job."*

Housing, respite, and emergency financial resources outside of behavioral health were the top three identified resources. Other resources identified were affordable child care, health care, transportation, home visiting resources, food support, legal resources, and sexual abuse resources. In almost all cases, families talked about needing access to more than one resource to support their family.

Families need access to permanent housing that is safe and affordable.

Finding: Several families identified housing as a challenge: families experiencing homelessness said they couldn't access housing within their counties and were forced to move their family to another county; families living in transitional housing were worried about not having access to

permanent housing; families that have stable housing shared concerns about its affordability; and one family member noted the lack of housing resources for families not experiencing substance use.

“My goal is to get into my own Section 8 housing again and be able to maintain stability...I haven’t really had that for the past three years.”

“We’re in transitional housing. We’ve been in it for four years now because of COVID, and then we couldn’t find anything. That would be my family goal.”

“I became homeless for 15 months, and I had to run to a different county to get help...I was dealing with [one county] because I was living [there] for four years, and I didn’t get the help that I needed.”

“When they built all these brand-new houses, you had to be an addict in order to live there...where’s the financial help for people that are struggling but yet need help too? So should I run off and start doing this and that in order to get services that help?”

Crisis centers and respite resources intended to serve families are not serving Black and Indigenous families adequately.

Finding: Oftentimes, families recognize when they need additional support, and they are willing to use crisis centers when they cannot safely care for their children. Further, families talked about the need for respite resources as an option during difficult periods. However, some of the families we talked to shared that they were discouraged from using crisis services as a tertiary prevention option. A couple of families talked about their desire for and the benefit of having respite services provided by family members they trust with their children and the confidence they have that family members have their best interest in mind.

“There was a situation that happened where I called a crisis shelter because I was losing my mind a little bit, becoming a new mom and all of it. It was just a lot, and like I said, I suffered from postpartum depression. I needed someone to take my child, just for a weekend, just for a week, some type of respite care or something, and my caseworker from Child Protective Services said that if I use those services, that means that I’m not capable of taking care of her and taking care of myself.”

“One of the things they do have available is the crisis shelters and me using them was going against the plan that I had set up with my caseworker from Child Protective Services.”

“Family-oriented respite instead of a stranger. One, it’s less traumatizing on the kids, it’s less traumatizing on parents, and knowing that they’re coming back home, they’re going just for a couple of hours. The parents know in their heart they’re safe. They’re not being taken away. But they’re giving me a breather. I feel like that would help a lot with the out-of-home placement with kids.”

Lack of economic stability leads to financial crisis.

Finding: Even when families are able to cover expenses, they do not have the financial resources to manage financial crises as they arise.

Once mom recently reunited with her children after a three-year out-of-home placement. Within months, her car broke down. She wasn't able to get to work unless she used public transportation, which would require that she leave her house at 3 a.m. and take three buses to arrive to work on time as well as find an affordable child care provider that can accommodate early morning hours. She ultimately was forced to resign from her job and is struggling to find employment.

Another parent, who has a degree in early childhood but can't find a job in the field that pays enough, recently bought a home for her family and was working hard to keep her head above water when her furnace broke in the middle of winter and needed to be replaced. She talked about struggling to find financial resources to help her pay an unexpected \$6,000 to replace it: *"It's hard to save when you have to pay every bill in the home and you know, I don't get any other help from the state...you have to buy food, and like everything from your paycheck, that isn't always a big paycheck... I was very, very hesitant to reach out because even them questioning me when I did reach out for resources and help, they were asking a lot of questions that I was afraid to answer because I didn't want them to think that I am mistreating my kids and my kids would be taken away."*

Other parents said: *"I lost my only source of transportation. So, I'm trying to find a resource that will either help me repair my car or help me get a new car."*

"I'm actually a first-time homeowner, and it is a challenge within that as well because...we're not making big money and homeownership does cost a lot of money and sometimes with the jobs that we have, you know, trying to work to stay afloat, but also trying to save. For example, last year, I had some things break down in the home that cost like thousands of dollars that was like back-to-back, and it was just trying to find, you know, the resources to help with these things like hot water heaters or furnaces. That was very challenging."

THEME

2

Families face difficulties navigating prevention supports and services

Prevention supports and services are often complex, burdensome, and not always culturally responsive.

Finding: Parents expressed frustration over their attempts to access responsive services in a timely manner. The complexity and quantity of paperwork and processes families must complete before receiving services can be a barrier. Some families face difficulties navigating services that aren't provided in their preferred language or when a translator is unavailable.

A single father who lives in the southeastern region described his experience:

"I think there's a thing that's it's really a problem for me in my county because sometimes when you don't have people who speak for you, you tend to put yourself in a process where you find it very difficult for you to get things done and sometimes they treat you as an outcast or see you as someone who doesn't have the same access as other people so that's a problem."

Others noted: *“I think a lot of paperwork, it’s one of the problems we’re facing. You know, sometimes you got to do a lot of paperwork, and sometimes it is annoying; you have to pass through a lot of processes.”*

“Another thing is agencies don’t talk to each other. I get that there’s a lot of prejudice, and all that plays into it [working together] big time, but I feel like if the county and the tribal try to work together instead of against each other so much... I feel like [CPS] wouldn’t have to get involved as much.”

“It’s hard to figure it out [supports and services], it gets frustrating. Definitely, that was [complex processes], and then not knowing how to fill out paperwork, not understanding what I was filling out or what I was asking for.”

“There are parents in this group that are trying to get resources that don’t have, they have access to those resources, but to a certain extent, they’re just cut off, and then they’re at a roadblock and they’re like, what do I do? And the people who are supposed to know how these programs work, have no idea how they work. They don’t know where you need to go, they send you to dead ends, and it’s frustrating, after a while, like that’s why these agencies like CPS and all that get bad reputations. There’s so many roadblocks, there’s no communication with the agencies.”

“There’s supposed to be these programs out there that you can rely on the 211 people or the 411 people, they are supposed to give you these resources. And they’re supposed to be for my usage and so if they’re there for whatever challenge that I have, if these resources are for me to fix them, why are the people [CPS] at my door? Or why am I being sanctioned, or why I am I experiencing a penalty because I’m having a challenge?”

“What I tried to get first was child care, and then I tried to get assistance from the county as far as financial support, food stamps, and housing assistance.” This parent described her experience as “a whole lot of hoops and jumping through a lot of hurdles” until she finally gave up and tried to figure it out on her own.

THEME

3

Families fear increased surveillance when seeking prevention services and supports

Families view prevention services and supports as a pathway to child protection and therefore are hesitant to access services.

Finding: Almost all the 30 families interviewed shared their concern about accessing prevention services and supports due to their fear of further involvement with child protection services. Families believe that seeking help for themselves or their children would be seen as child neglect or abuse and would result in a child protection referral. For this reason, some families use services and supports as a last resort. This mistrust runs deep in Black and Indigenous families and, despite improvements made in practice and service delivery, families are hesitant to seek services.

"They like to say things have changed. They have not; the system is still the same, it's still set up to oppress Black people, definitely. Black women...and it's doing its job... they smile in your face and tell you that they're there to help. But then people show up at your job, at your kid's school, at your house because they're mandated reporters. And they had to tell this or that and all I was doing was asking for help..."

"Like it's scary. It's terrifying as a parent, as a caretaker of any small children, of any age, to get that call saying 'Hi, this is blah blah blah from CPS,' like it makes your heart drop...because it automatically makes you fear, are my kid's being taken away? That's the first thought in your head. You're gonna take my kids away, what did I do wrong? You know, it makes you go into panic mode and defensive mode. "

"...All the time, I'm in fear [to ask for help]...my mom asked for help and it seemed like every time she asked for help, the people [CPS] were at our door, that's what we call it, it was literally the people. The people was at our door. I was in and out of foster care so much from the time I was five to seven that it was ridiculous. And then at seven, they completely took us out. So yes, you know, because of that trauma. As an adult, like I said, I will suffer before I ask for help, for fear as to what could happen."

"The fear comes in because of your record, because of your pedigree, so they tend to stereotype you because you're Black, so this is one of the things that serves as a constraint, Black [people] especially."

"I was concerned about [seeking] medical services for anxiety and depression. Sometimes in medical services, they will ask about your background and try to do a kind of background check."

"That's why I didn't go get help because my biggest fear was, they were going to take my kids away, and I'd have to go through all of this stuff to get them back."

THEME

4

Culturally responsive services are critical for family well-being

Behavioral health (mental health and substance use) services must be culturally responsive to be effective.

Finding: Almost all families identified mental health and substance use services as a critical resource for families. However, the need for culturally responsive services was emphasized throughout the focus groups and individual interviews. Families feel understood when receiving services from a provider who shares their identity. For example, one Indigenous mother talked about her current experience attending an outpatient treatment program that uses traditional healing practices to maintain sobriety:

"It's helped a lot. I mean, when I first went there, I was, like, really depressed and went through a lot, but it helped. They have [tribal] ceremonies; a cedar ceremony is when they wipe you down with cedar water and it helps remove negative thoughts or negativity and grief. They have cultural arts every Wednesday, so I started doing a jingle dress for my daughter and moccasins."

"I wish there were more support programs for African American families. There weren't a lot of support programs, not a lot of therapy programs."

"Therapists and counselors run by African American programs that understand the culture and can help you get through and provide resources."

"Treatment services where families can go together, they have a cut-off limit. Some families have teenagers. [Treatment centers] call you and say you can come, but your two oldest kids can't come because they don't meet the age limit, which isn't fair."

"A lot of people don't drive up here [to the reservation]; there should be like a ride service for them to be able to get to and from that group. I think that would be a big help to have...that support group for parents who are struggling with sobriety or just stay on the weekend."

Bias, discrimination, and lack of cultural competence prevent families from feeling safe and heard when seeking supports and services.

Finding: Families shared numerous examples of unfair treatment when accessing services. Oftentimes, Black and Indigenous families encounter discrimination and inequities in school, health care, employment, and housing systems. Parents acknowledge that there is a cultural barrier that continues to lead to a lack of understanding between Black and Indigenous families and white health care providers and social service professionals. These inequities and cultural differences make it uncomfortable for families to access preventive services when they need them.

"I think just people's understanding first and foremost, like the household of Black and Brown people, because I do feel that we, we parent differently, discipline differently, you know, we struggle differently. It's not a lot of great opportunities for us that you know, or less, that we feel that is good for us, or that works in our favor."

"I'm finding a lot of discrimination in health care and how you're treated. So, I'll give you an example. I tore my rotator cuff, like tore it--complete tear. And they told me to take Tylenol. I was basically in severe pain for about three months, until the swelling went down...I turned around and fell again and tore my Achilles tendon and they told me to take Tylenol again. I said, 'What Brown people are drug addicts?'"

"My son, he recently got diagnosed with eczema, his sister has left, but he had it severely, and so I didn't know what was wrong with him. So, I took him to [the clinic] here in town...The next day, I got a call from CPS talking about child abuse, I was like, wait, what? Like, what's going on? who reported me? Turns out it was [the clinic] because of his rash because it was all it covered his whole body."

"It's so hard for African American parents, and with white teachers being able just to call [CPS] because they feel like it. And they're not really understanding what's really, truly going on and especially if you have a child with autism or a disability...How can you, you know, defend yourself against that?"

"The other thing is to be at a clinic, they start questioning about a child that was sick, and they just had they were sick, and they had strep throat. And they were questioning me about that. And it made me feel so uncomfortable by the questions that they were giving. So then, I started taking my children to the Native American community clinic, where I felt respected, treated right, and things were explained to me in a good way. You know, just wasn't any issues or problems."

"I think one thing that could prevent that [accessing services] should be equity, like I mentioned before, you know, treating everybody equal...whether you're a person of color, or whether you're white to Black, it's something that could prevent you from getting to services... for example, you're seeking employment, you won't get it because the person of color, you're looking for housing you get discrimination because you're a person of color. I think those things can literally prevent you from seeking services."

THEME 5

Increased visibility and program/service opportunities for fathers promote whole-family wellness

Support the inclusion of fathers or other male caregivers prevention services and supports.

Finding: Families expressed the need for the same type of prevention supports and services for fathers that are available to mothers. Historically, supporting mothers has been the central focus of supports and services, including child welfare; increasing services for fathers will result in better outcomes for the whole family.

A Black father of two shared that he struggles to access affordable health care services:

"Before I got into child protection services, I was really struggling. I didn't have medical assistance. I wasn't able to afford the medication for my son...he actually has cardiac arrhythmia at an early stage of his life, and with the little work I had, I wasn't able to afford the drugs and the treatments that were required."

"I recognized, in my case, that in my town, there wasn't much available for men, as far as getting support or guidance."

"I try to inspire other dads that I see out here. I tell them to hit up this program man...because we need more resources with this program because us dads, we need it out here."

"They are quick to take a woman's side over a father's side, especially a father who tried to do the right thing...they always got to come up with some type of excuse, you know. I don't do drugs, my UA wasn't dirty, I'm complying with everything I'm supposed to do and you know they always come up with an excuse there's always gonna be something."

"Somebody that will come along with me to the court cases, and actually look at all my paperwork because I was in my child's life, I was paying \$1200 a month for child support, that was the hardest part for me, paying child support and providing a life for myself as well...I've been paying that for 10

years now. So, I paid \$120,000 in child support and nobody's ever reevaluated...Hey, is this a healthy amount for you? Or can we reduce this for you somehow? Like, what can we do to help you live? Because I'm basically living off of \$40 a month."

"Without this program, I wouldn't be where I'm at now. I got full custody of my daughter because of this program...they made me do a lot to get my baby back. I wasn't even getting proper visits before. This program helped me out a whole lot. I'm thankful for this program."

THEME

6

Peer mentors connect with families due to shared experience

Families value and trust the perspective and support of other parents.

Finding: Black and Indigenous families value formal and informal peer support resources. For many of the parents, having the support of another parent with a similar lived experience builds trust and meaningful connections. Families expressed the desire to access peer mentor services prior to CPS involvement, which should also extend to fathers.

We spoke to one mother who has committed herself to supporting other parents. She said, *"We need more community involvement and resources. The community brings together people who've experienced it already and been through it to help another family. If you see something, say something like it and not be afraid, but know how to approach it."*

"What Minnesota One Stop for Communities does for our parents is just amazing. I wish I would have had that opportunity to have them walk alongside me."

"I'd get her [at risk parent] a parenting mentor because she will need help. I wish somebody would have done that for me and say there's this program right here that I know about."

"When I came to St. Paul, to Ramsey County, I instantly connected with Minnesota One Stop, they helped me keep my child, the one that I have right now. I was connected with Family Wise, and I do parenting classes."

"I'd rather be with a family member. I don't trust the complete stranger. The counties like, okay, they're okay because they pass all these tests and paid these fees and stuff, so they're good. But really, they're not. I feel like if there was more family-friendly intervention, when it came to out-of-home placement, we wouldn't have a big boom in the foster care system like we do. Like a mentor system, parenting mentors."

"A mentor system mentorship, not necessarily just for kids, but for like parents too, that are going through struggles or dealing with CPS...because when you're working with CPS, like you're already stressed out, you're already on edge, and having another county worker come in and try to be friendly with you isn't always the best."

