



# The Early Childhood Landscape in MINNESOTA

## STATE DEMOGRAPHICS

In order to create efficient and effective early childhood systems, it is important that policymakers first understand the unique demographics and common risk factors facing the children of their states.

### Questions To Consider

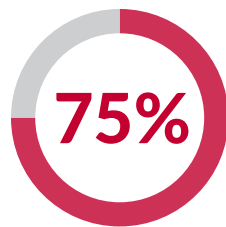
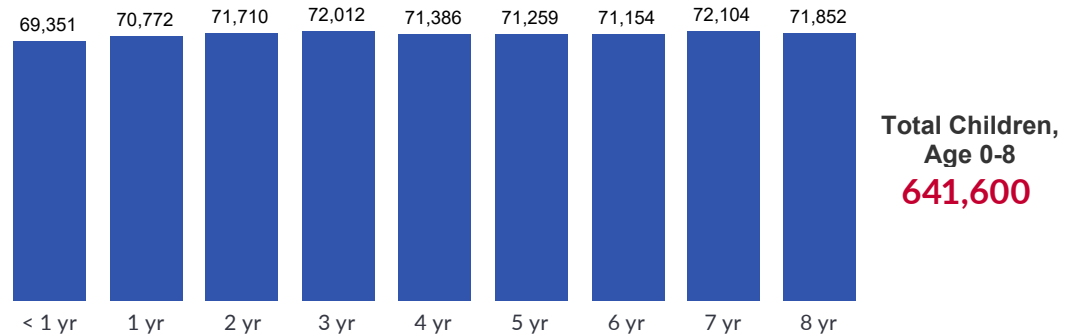
*Are there specific risk factors likely to undermine the healthy and optimal development of young children? What is being done to address these disadvantages?*

*What steps are being taken to ensure equitable access to services among children and families with unique cultural and/or linguistic needs?*

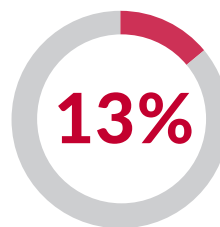
## OVERVIEW

School readiness is shaped by many factors, each with the power to influence learning and development – both for better and for worse – from the days young children are born. For this reason, policymakers interested in promoting the long-term academic and life success of children must be prepared to consider their needs on a holistic basis – addressing not just access to high-quality early learning environments, but their health, safety, social-emotional development, and the economic and other stressors facing their families. While far from comprehensive, this state data profile is intended to provide a snapshot of both risk and reach. That is: what are the significant risk factors experienced by the children of my state, and how well are services reaching the children and families for whom they are intended?

### Number of Children Age 8 and Younger, 2017



**Children with All Available Parents in the Labor Force**  
Age 0-5 (2017)

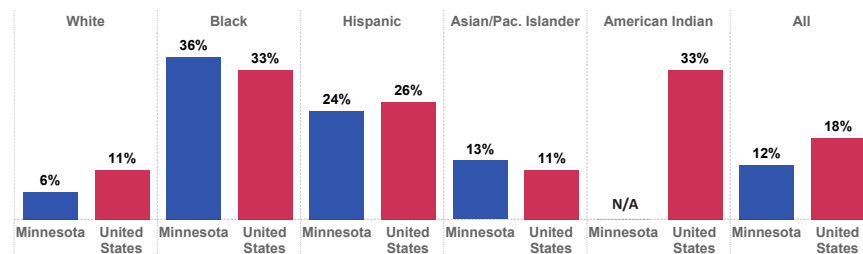


**Children in Poverty\***  
Age 0-5 (2017)



**Children in Low-Income Working Families\***  
Age 0-5 (2017)

### Children in Poverty, by Race, 2017



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\*The federal poverty level for a family of four was \$24,600. "Low income" is defined as having a family income less than twice the federal poverty level.



## INFANT AND TODDLER SUPPORT

The first three years of life are a unique and critical period of development, during which up to 1 million new neural connections are formed in the developing brain each second. Infants and toddlers develop and learn at exponential rates as they explore and engage with the environments and adults around them. In order to best support their **health and development**, families need access to information and services.

### Questions To Consider

*Are women and children receiving health care services before and after birth?*

*Are families prepared for and educated about the needs of young children through home health visits, regular well-baby checks or both?*

*What areas of maternal and child health is my state focusing on?*

## Current Status of Infant and Toddler Well-Being

INDICATOR	MINNESOTA	NATION
Unintended Pregnancy <sup>1</sup> (% of all pregnancies)	40%	45%
Prenatal Care Before 3rd Trimester <sup>2</sup> (% of live births)	96%	87%
Home Health Visit <sup>1</sup> (% of children ages 0-3)	31%	14%
Well-Baby Check <sup>3</sup> (% of babies)	90%	91%
Developmental Screening <sup>2</sup> (% of children ages 10 months to 5 years)	44%	31%

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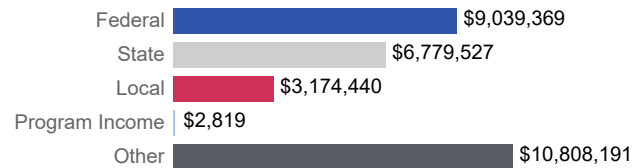
## Maternal and Child Health Grant

The federal government allocates the Title V Maternal and Child Health (MCH) Block Grant to states. **Minnesota** provides additional funding to the MCH program (as shown below).

The state has identified eight national performance measures to focus on:

- **Well-Woman Visit**
- **Breastfeeding**
- **Safe Sleep**
- **Developmental Screening**
- **Adolescent Well-Visit**
- **Medical Home**
- **Transition (Children with Special Needs)**
- **Adequate Insurance**

### Minnesota MCH Funds by Source



## Minnesota | MCH 2017 Expenditures

POPULATION SERVED	INDIVIDUALS SERVED	2017 EXPENDITURE
Pregnant Women	3,618	\$9,432,551
Infants	4,163	\$3,404,351
Children (Age 1-22)	17,689	\$5,683,921
Children with Special Needs	5,295	\$10,190,281
Others	2,330	\$499,862
<b>Total</b>	<b>33,095</b>	<b>\$29,210,966</b>

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## INFANT AND TODDLER SUPPORT

### Questions To Consider

*Are disparities in access evident in your state's data? What steps might be taken to increase access to - and utilization of - prenatal care by expectant mothers?*

*Are there racial/ethnic disparities evident in the teen birth data? What steps is my state taking to reduce teenage pregnancy?*

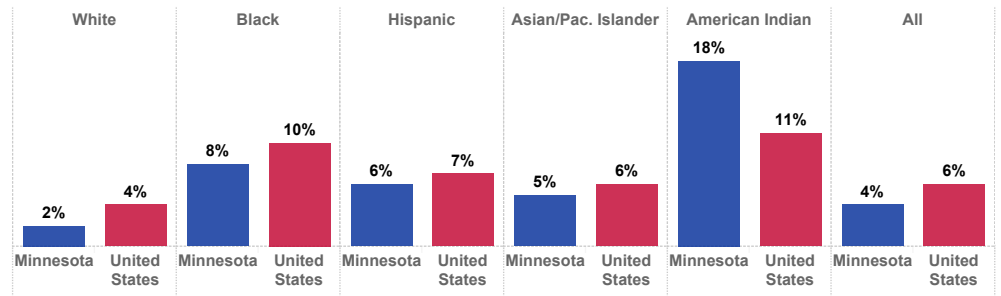
*Are there disparities evident in the number of children born at low birthweight? What steps might be taken to reduce the prevalence of this outcome, particularly among high-risk populations?*

## Prenatal Care and Birth Outcome, By Race

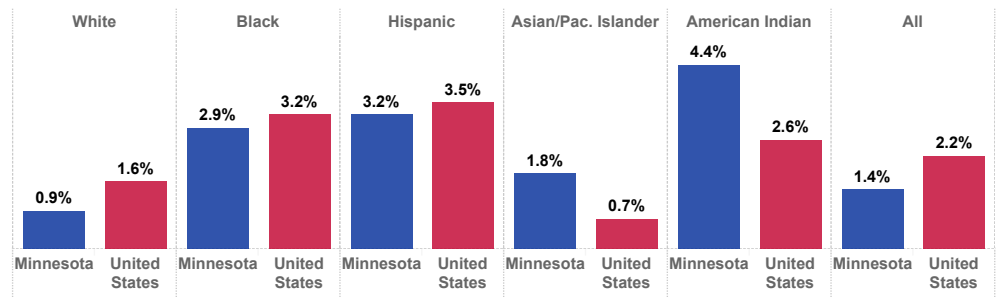
Receiving appropriate prenatal care helps reduce the likelihood of negative birth outcomes, including low birthweight and premature births, which are often linked to developmental delays and elevated rates of early school failure. Furthermore, births to teenage mothers increase risk for both children (increasing the likelihood of being born at a low birthweight and infant mortality) and their mothers (who are less likely to graduate from high school, maintain steady employment).

Often these outcomes vary significantly across demographic groups, which results in systematic inequities in infant and maternal health and well-being.

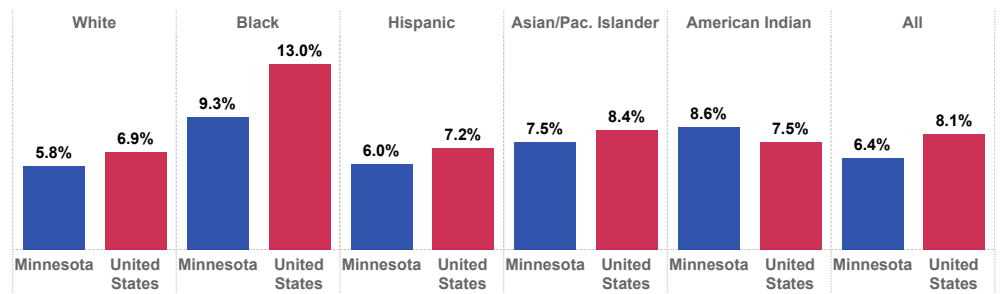
## Births to Women Receiving Late or No Prenatal Care



## Teen Births



## Low Birthweight



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## INFANT AND TODDLER SUPPORT

### Questions To Consider

*What is the prevalence of paid family leave across the country? Are conversations about paid family leave happening in my state?*

*What percentage of at-risk families are able to access evidence-based home visiting programs in my state? Are post-partum home visits an MCH priority in my state?*

*What home visiting models is my state utilizing? Are these models recognized as evidence-based? How are different models used to support families' unique needs?*

## Paid Family Leave

Paid family leave policies support employees requiring time off to bond with a newborn baby, adopted or foster child – or to care for a seriously ill family member.

**Minnesota** does not have a statewide paid family leave policy.

## States with Paid Family Leave Policies

State	First Year	# Weeks	Benefit (% Income)
CA	2004	6	Up to 70%
DC	2020	8	Up to 90%
MA	2021	12	Up To 80%
NJ	2009	6	Up to 66%
NY	2018	8	Up to 50%
RI	2014	4	Up to 60%
WA	2020	12	Up to 90%

## Home Visiting

Home visiting is a type of service targeted to expectant parents and parents with children ages 0-5 to support healthy child development. Though models and programs vary, home visits typically allow trained experts to provide services, share best practices, and connect families to other resources all within the home setting.

**4,225**

Number of Families Served Through Home Visits in 2017

**43,980**

Number of Home Visits Provided in 2017

**Minnesota** uses the following evidence-based models for home visiting programs:

- **Attachment Biobehavioral Catch-Up Intervention**
- **Early Head Start Home-Based Option**
- **Family Spirit**
- **Healthy Families America**
- **Nurse-Family Partnership**
- **Parents as Teachers**

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## INFANT AND TODDLER SUPPORT

### Questions To Consider

*Is the cost of high-quality infant care in my state affordable to low-income and working-class families?*

*What percentage of families have all available parents in the labor force? What does that mean for the demand for infant care?*

*What types of public support are available in my state for families seeking infant care? What percentage of eligible families are actually able to access these supports?*

## Cost and Affordability of Infant Care

**\$14,366**

Average Annual Cost of Infant Care in **Minnesota**

**19%**

Infant Care Cost as a Share of Median Family Income in **Minnesota**

Licensed child care is delivered in both center-based and home-based settings. According to the U.S. Department of Health and Human Services, this care is affordable if it costs no more than 10% of a family's income, with efforts underway in some states to ensure subsidized child care costs are capped at no more than 7%

By the 10% standard, only

**18%**

of families in **Minnesota** can afford infant care.



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## Public Support for Infant Care

PROGRAM	FUNDING SOURCE	DESCRIPTION	NUMBER OF CHILDREN AGES 0-2 SERVED	% OF ALL CHILDREN 0-2
<a href="#">Early Head Start</a>	Federal (with optional state supplement)	Funds early education programming for children ages 0-3 from low-income families in addition to health and family services.	<b>3,762</b>	<b>1.8%</b>
<a href="#">Child Care and Development Fund</a>	Federal and State	Provides financial assistance to low-income families to access child care for children under age 13 so they can work or attend a job training or educational program. The majority of infants and toddlers are in center-based care, and approximately 30% are in some type of home-based care.	<b>5,600</b>	<b>2.6%</b>





## THREE- AND FOUR-YEAR-OLDS

At ages three and four, children may be eligible to enroll in one or more types of publicly-funded pre-kindergarten. This includes state-funded pre-K, often delivered in both public and private settings, and Head Start, a federally-funded preschool program operated by local grantees. State funded pre-K programs generally incorporate child eligibility and provider quality requirements. These programs are typically not compulsory.

### Questions To Consider

*How many children are attending pre-K, public or private?*

*Are certain populations more likely to attend pre-K?*

*How expensive is child care for 4-year-olds?*

*Do the wages depicted for the early childhood workforce permit for the hiring and retention of highly-qualified early childhood educators?*

## Pre-Kindergarten Trends

**6%**

3- and 4-Year Olds Enrolled in **Head Start** Program  
(Estimated **8,449** children)

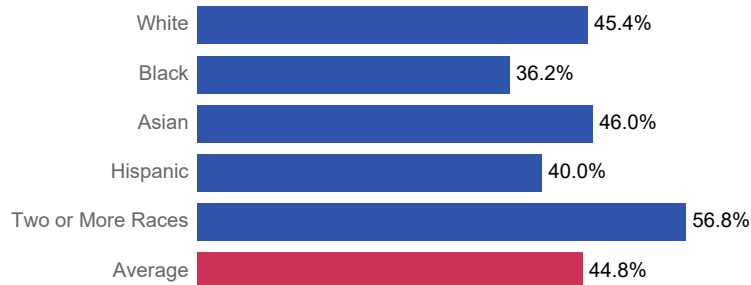
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**3%**

3- and 4-Year Olds Enrolled in **State Funded Pre-K** Program  
(Estimated **4,603** children)

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## Parent-Reported Percentage of 3- and 4-Year-Olds Enrolled in Preschool, Public & Private by Race, Regardless of Funding Source



The following group(s) have enrollment rates in preschool programs that are below the state average: **Black, Hispanic**

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## Wages and Costs

**\$24,150**

Median Annual Wage  
Child Care Worker  
(2018)

**57%**

Median Wage for  
Child Care Worker as Percent  
of State Median Income (2018)

**\$34,200**

Median Annual Wage  
Preschool Teacher  
(2018)

**80%**

Median Wage for  
Preschool Teacher as Percent  
of State Median Income (2018)

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**\$11,960**

Average Annual Cost of  
Child Care for 4-year-old

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## THREE- AND FOUR-YEAR-OLDS

### Questions To Consider

*Does my state support pre-K enrollment? If so, for which children?*

*What are the funding sources for pre-K?*

*What requirements must providers meet in order to be eligible for the state pre-K program?*

## Pre-Kindergarten Policy

### MINNESOTA HEAD START

ACCESS	Family Income - Eligibility	Per Federal Head Start requirements: 100% of FPL
	Other Risk Factors - Eligibility	Child disability or developmental delay; Low parent education; History of abuse, neglect, or family violence; Homelessness or unstable housing; Home language other than English; Parental substance abuse; Risk child will not be ready for kindergarten; Teen parent; Low birth weight or other child health risk; Child history of foster care; Parent on active military duty
	Child Age	3 years old
	Required District Participation	Required for all
FUNDING	State Agency	Minnesota Department of Education; Office of Early Learning Services; Minnesota State Head Start Collaboration Office
	Total Spending (2016-17)	\$11,682,528
	Funds by Source	State: \$11,682,528
	Dedicated Revenue Source for State Funds?	Yes: State legislative allocation
	Agencies Eligible to Receive Funding	Head Start
PROGRAM REQUIREMENTS	Permitted Subcontracting Agencies	Public schools, Head Start, Private agencies, Faith-based centers, Family child care homes
	Minimum Daily Hours	Determined locally
	Minimum Days Per Week	Determined locally
	Annual Operating Schedule	Determined locally
	Maximum Class Size	3-year-olds: 15; 4-year-olds: 20; mixed-age: 20
	Required Screenings	Vision; Hearing; Height/weight/BMI; Blood pressure; Immunizations; Psychosocial/behavioral; Dental; Developmental; Full physical exam



## THREE- AND FOUR-YEAR-OLDS

### Questions To Consider

*Are pre-K standards aligned with goals of the K-12 system?*

*Does my state require pre-K teachers to have a certain degree? If so, what?*

*Has my state developed a system to assess the quality of pre-K and child care providers? Is participation mandatory for state pre-K programs?*

## MINNESOTA HEAD START - CONTINUED

STANDARDS	Early Learning and Development Standards	<a href="#">Early Childhood Indicators of Progress: Minnesota's Early Learning Standards</a>
	Year Revised	2017
	Alignment with College and Career Ready Standards for Early Grades	Yes
EDUCATORS	Teacher Degree	BA (public); AA (nonpublic)
	Required Specialization in ECE	Yes
	Assistant Teacher Degree	CDA

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## THREE- AND FOUR-YEAR-OLDS

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## Pre-Kindergarten Policy

### VOLUNTARY PRE-KINDERGARTEN

ACCESS	Family Income - Eligibility	No income requirement
	Other Risk Factors - Eligibility	None
	Child Age	4 years old
	Required District Participation	Not required, but funding is awarded through an application process allocating the legislatively selected number of seats
FUNDING	State Agency	Minnesota Department of Education
	Total Spending (2016-17)	\$22,100,000
	Funds by Source	State: \$17,300,000; Required local: \$4,800,000
	Dedicated Revenue Source for State Funds?	Yes: State general education and specialty funding
	Agencies Eligible to Receive Funding	Public schools
	Permitted Subcontracting Agencies	Public schools, Head Start, Private agencies, Faith-based centers, Family child care homes
PROGRAM REQUIREMENTS	Minimum Daily Hours	350 instructional hours per school year
	Minimum Days Per Week	Determined locally
	Annual Operating Schedule	School year or academic year
	Maximum Class Size	20
	Required Screenings	Vision; Hearing; Height/weight/BMI; Immunizations; Psychosocial/behavioral; Developmental



## THREE- AND FOUR-YEAR-OLDS

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*Does my state require pre-K teachers to have a certain degree? If so, what?*

*Has my state developed a system to assess the quality of pre-K and child care providers? Is participation mandatory for state pre-K programs?*

## VOLUNTARY PRE-KINDERGARTEN – CONTINUED

STANDARDS	Early Learning and Development Standards	<a href="#">Early Childhood Indicators of Progress: Minnesota's Early Learning Standards</a>
	Year Revised	2017
	Alignment with College and Career Ready Standards for Early Grades	Yes
EDUCATORS	Teacher Degree	Statute requires teachers to be knowledgeable in early childhood curriculum but only has guidelines for degree and licensure.
	Required Specialization in ECE	Preferred but not required
	Assistant Teacher Degree	Determined locally

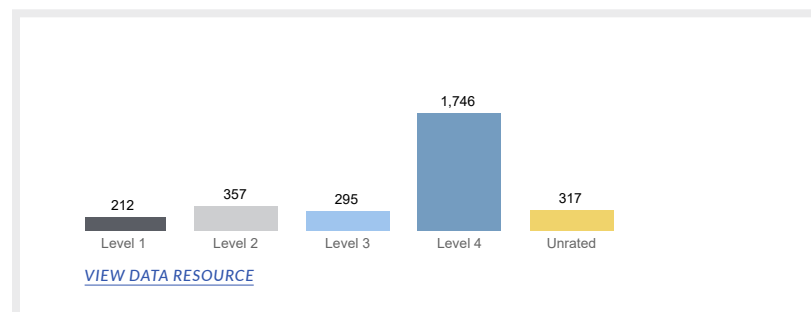
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## Quality Ratings of Child Care Programs

In recent years, many states have designed Quality Ratings and Improvement Systems (QRIS) to provide parents with information about the quality of individual child care providers. The QRIS rating is often a reflection of various measures such as teacher-child interactions, classroom environment, family engagement, and staff educational attainment. Typically voluntary, QRIS systems are meant to help improve the quality of child care providers and help families choose the right provider for their children.

ACCOUNTABILITY	Quality Rating and Improvement System (QRIS)	<a href="#">Parent Aware</a>	
	Provider Participation	<b>Voluntary</b> Licensed center-based programs, Programs with children receiving CCDF subsidies, Head Start/Early Head Start, Licensed family child care, School-operated early childhood programs	<b>Mandatory</b> None
	Number of Levels	4	
	Tiered Reimbursement	Yes	
	Other Financial Incentive	Yes	

### Child Care Providers By QRIS Level





## FIVE- TO EIGHT-YEAR-OLDS

At age five, children are eligible to begin kindergarten—generally considered the start to their formal education. In these early grades, there is a strong focus on learning to read due to research indicating that 3<sup>rd</sup>-grade literacy is crucial for success in school and life.

### Questions To Consider

*Are districts required to offer full-day kindergarten?*

*At what age are children eligible to attend school? At what age is attendance compulsory?*

*How are children assessed in grades K-3? What are assessment results used for?*

## K-3 Policy

	K-3 COMPONENT	MINNESOTA
ATTENDANCE	Compulsory Age of Attendance <sup>1</sup>	7
	Kindergarten Entrance Age <sup>1</sup>	5 on or before 9/01
	State-Required Full-Day Kindergarten <sup>1</sup>	No
	State-Required Half-Day Kindergarten <sup>1</sup>	No
	Required Kindergarten Attendance <sup>1</sup>	No
STANDARDS AND ASSESSMENTS	Required Kindergarten Entrance Assessment (KEA) <sup>2</sup>	The Commissioner of Education may implement a kindergarten readiness assessment. The assessment must be based on Department of Education Kindergarten Readiness Assessment at kindergarten entrance study.
	KEA Results Use <sup>2</sup>	Not specified in statute, rules or regulations.
	Dual Language Learner (DLL) Assessment	ACCESS for ELLS
	Number of States Using DLL Assessment	36
	3 <sup>rd</sup> -Grade Reading Retention Law <sup>2</sup>	Retention is allowed but is not required.
EDUCATORS	Early Childhood Education License Required for Kindergarten Teachers <sup>2</sup>	Not specified in statute, rules, or regulation.
	Science of Reading Test Required for Elementary Teachers <sup>3</sup>	Yes
	Teacher-to-Student Ratio Requirement <sup>2</sup>	Revenue must be used to reduce and maintain the district's average class size to 1:17 in grades K-3.

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[VIEW DATA RESOURCE<sup>3</sup>](#)

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