
United Way
of Central Minnesota



2007 State of Caring Community Assessment

Key Informant Groups

November 2007

Sponsored by United Way of Central Minnesota
Funded in part by Central Minnesota Community Foundation

(Phase 4, 32 pages)



Prepared by:

UpFront Consulting

9752 380th St. * Saint Joseph MN 56374
320-255-9657 • upfront@netlinkcom.com

Contents

Key points summary	3
How the research was conducted.....	5
Financial stability	7
Mental health	13
Childcare	19
Positive parenting.....	25
Common strategies.....	31

Key Points

Central Minnesota key informants were invited to a facilitated session focused on four key underlying needs identified in earlier phases of United Way of Central Minnesota's 2007 State of Caring Community Assessment: a review of recent research, focus groups with service recipients, and an online survey of key informants. The participants explored barriers and recommended strategies to achieve a community vision around their area of expertise. The visions and key strategies are as follows:

Financial stability

Vision—Our community supports all families in achieving and maintaining financial stability.

Priority strategies to achieve this vision:

- Taking education about personal finance and resources to “where the people are”
- Providing education for both providers and recipients about resources
- Working to expand the admittedly finite financial resources available to families
- Maximizing resources available through employers to assist families

Mental health

Vision— Our community helps everyone achieve optimal mental health.

Priority strategies to achieve this vision:

- Increasing access to mental health services by bringing the services to where people need them
- Educate the community and providers, and advocate for mental health with local and state government
- Work to more closely integrate mental health care with physical health care, and with other services
- Increase funding to allow agencies to add and sustain services

Childcare

Vision— Our community helps all families have quality, affordable childcare.

Priority strategies to achieve this vision:

- Expand networking and connections among providers of childcare and providers of other services to families
- Increase scholarships and other funding sources to help families pay for childcare
- Educate the public and advocate with government about childcare issues
- Provide more training and support to childcare providers

Positive parenting

Vision— Our community supports all parents in positive parenting.

Priority strategies to achieve this vision:

- Creating awareness—through technology, the media and the business community—that good parenting is a community issue
- Ongoing, stable funding to support parenting programs
- More support and education for parents of children ages 10 and older

More information about each of these strategies is in the body of the report, following the section on the research methodology.

How the research was conducted

The key informant groups process is the fourth and final phase in the 2007 State of Caring Community Assessment, conducted by UpFront Consulting for United Way of Central Minnesota. It builds on the information uncovered in the first three phases.

Organization

Overall the research has been organized by the key impact areas identified by the United Way Board of Directors: 1) Financial Stability/Meeting Basic Needs, 2) Early Childhood/Youth Development, and 3) Strengthening Individuals and Families (including parenting, diversity, persons with disabilities and the elderly).

Phases one through three

Phase One was a review of other research completed in Central Minnesota since 2007, and a literature review of other research studies that shed light on local needs. This research is summarized in two documents: 1) The review of relevant research is in a document titled “Lit Review: State of Caring 07.doc,” and 2) The update of the 2002 needs assessment is summarized in the document “Key data points.doc.”

Phase Two consisted of focus groups with service recipients from the local community. The discussion centered around needs and assets in Central Minnesota. The researchers created the question path from the Phase One findings. This research is summarized in the document “State of Caring FG Report 2007.doc.”

Phase Three was an online survey of organization managers, program managers and service providers in human service agencies, schools, health care organizations, and churches in the UWCM service area. The questions built on the first two phases, again looking at assets, needs and root causes. This research is summarized in the document “Provider Survey Report.doc.”

This research

Process

Based on the findings from the first three phases, four root causes were believed to underlie many of the community needs. These were lack of financial stability, mental health issues, limited access to affordable childcare, and inadequate parenting skills.

UWCM convened a group to discuss each of these four topics. Each of the four groups contained from ten to fourteen individuals who were, in the opinion of UWCM staff, key informants in that field. Participants were service providers and managers from non-profits, government agencies, schools, health care organizations and businesses in Central Minnesota.

Groups

Dianne Tuff, from UpFront Consulting, facilitated the two-hour sessions using a prepared question path. The process was similar to focus group research, but rather than

uncovering new ideas and concepts, the groups concentrated on creating strategies to impact the root causes determined in the earlier phases of the research.

As part of this process, the group formed a number of lists. The first was individual barriers to achieving a community vision for addressing the root cause; the second was system barriers. In all groups some barriers were placed on both lists.

The third list was strategies that are working well in the community to address the barriers and make progress toward the vision. The fourth was new strategies, or continuations of current strategies, that are key to meeting the challenge of the root cause. At the end of the process participants prioritized by choosing the top three or four barriers, and the top three or four strategies.

Analysis

In addition to one or two UWCM staff, Murdoch Johnson from UpFront observed the groups, and took notes. The researchers also made audio recordings of the sessions.

After the groups the researchers reviewed the recordings and the notes, grouped similar comments, then assigned codes to each grouping. This report is organized by those groupings. Each of the strategies identified as key is described at length. Other strategies are summarized in one or two paragraphs at the end of each section.

The lists created by the groups are in an appendix to this document.

Further information

For further information about this phase of the research, please contact Dianne Tuff at 320-255-9657 or by email to dianne@upfrontconsultingmn.com or Murdoch Johnson at 320-529-4071 or by email to murdoch@upfrontconsultingmn.com.

For copies of reports from other phases of the research, please contact UWCM at 320-252-0227.

Financial stability

The vision

Our community supports all families in achieving and maintaining financial stability.

Participants suggested four priority strategies to achieve this vision:

- Take education about personal finance and resources to “where the people are.”
- Provide education for both providers and recipients about resources.
- Work to expand the admittedly finite financial resources available to families.
- Maximize resources available through employers to assist families.

Personal finance education

The concept behind this strategy was described as encouraging “financial literacy” among families. This includes helping families learn and use budgeting skills, understand credit, and similar topics. The local key informants agreed that this education must be delivered in places that are easily accessible to the community, such as in the schools and in the workplace.

Barriers to delivering personal finance education

There was strong agreement in the group that there are barriers to implementing financial education. Some of these are systems barriers, such as limited time in schools for personal finance content, or lack of employer resources and commitment to provide education about personal finances. Other barriers are with individuals, including lack of personal responsibility or misunderstanding of credit and lending.

Barriers that span both individuals and systems are a sense of shared ownership about financial education, and what responsibility the individual, schools or employers each have in providing this education.

A table of all the barriers to delivering financial education appears in the appendix.

What is working well in personal finance education

There is already some progress in building financial literacy. Participants described individual teachers and schools (for example, the Area Learning Centers) as very receptive to providing financial education. They were less clear about how open employers are to providing education at the worksite, or providing resources for employees to seek assistance elsewhere.

Participants identified learning resources that are already available to the community. Some of these are designed to be delivered in the schools, such as the Junior Achievement program and the FDIC financial curriculum. Others, such as the MoneySmart curriculum, are provided on-line but can be used in schools as well. And there are other resources that deal with some aspects of personal finance, such as Tri-CAP’s “Renters 101” course.

Key strategies for increasing personal finance education

Workplace efforts. Participants began their discussion of strategies with the workplace. Many agreed that providing workplace education opportunities—for example, a series of “brown-bag seminars” during lunch or dinner breaks—is an important strategy. Suggested topics range from “How the world is changing” to “Why it is important that your child takes math.”

There was some agreement in the group that there are people available to come in and teach these types of classes, including some of the group participants themselves. A few have held workplace sessions on similar topics and described them as worthwhile.

School-based education. The discussion next moved to schools. Participants agreed that the demands on schools to meet federal accountability standards mean additions of formal curricula about personal finance are unlikely. Instead, some have had success in working with individual teachers to speak to classes, reporting that “teachers are happy to have you come in, they just need to know you are available.”

They recommended this teacher-by-teacher approach, rather than attempting to get a curriculum established. As noted earlier, some in the group agreed that alternative schools feel a particular need to provide personal finance education and are looking for community resources around the topic.

High school to college transition. The group further noted that the transition out of high school is a critical time to provide education in personal finance. Where the student is entering the job market, or going on to higher education, their personal financial situation is about to change, and they will likely need new understanding and skills.

Information and collaboration. Closely aligned with this strategy are the need to inform people about education opportunities, and the need for collaboration in providing these opportunities. These are both discussed at more length in subsequent sections.

The entire list of strategies around financial stability is in the appendix.

Education about resources

Participants agreed that an important community role is educating both providers of services and the community at large about financial stability resources.

Barriers to education about resources

Lack of knowledge about what is available is both a system and an individual barrier, according to the key informants. There was some agreement in the group that there are many resources available to help families achieve stability, but that knowledge of what they are and how to access them is sometimes difficult. There are also continuing issues around eligibility requirements, with many examples of misinformation.

In addition, the group named lack of communication between service providers as a systems barrier. This has led to duplication of services in some cases, or families going without services that would have helped them.

What is working well in education about resources

Participants praised UWCM as an important information resource. They highlighted the development of United Way 211, a tool important to both providers and the community, as one significant aspect of UWCM's growing role as a central source of information among service providers.

Two other entities named as important sources of information about resources were the Human Services Council (for service providers), and Senior Linkage Line (for seniors in the community).

Key strategies for increasing education about resources

Resource awareness for providers and families. Participants agreed that education efforts need to target both service providers and families. The main focus should be the wide variety of programs and services available in the communities. As an example, one participant noted that personal bankers at many financial institutions provide help with activities like balancing checkbooks and planning budgets. She pointed out that few providers and even fewer families are aware of this service. Another participant noted a new program that supplies loans without interest to Somali residents who can't access traditional lending for religious reasons. Not all the key informants in the group were aware of this program.

Eligibility education. Just as important as information about resources is providing up-to-date and accurate information about eligibility for programs and services. This helps to counter the range of misinformation about programs that currently exists, the key informant panel agreed. Also important is education about consequences that may arise from using a program or service. An example would be a program that raises family income enough so that the family is no longer eligible for another program they are already using. Instances of this are not as common as they were in the past, key informants said, but the group agreed that families need education about how a program or resource currently works.

Community awareness. Participants also discussed how to make the issue of financial stability for families an important part of the community's agenda. Many agreed that situations that bring service providers together to discuss the issue (such as the group they were participating in) are an important part of the solution. Some suggested that a collaborative around the issue, similar to the Success By 6 collaborative in early childhood, would be an important step.

Business involvement. Participants also agreed that the business community should be brought into the conversation, noting that this key informant panel was made up of service providers. Some suggested the Workforce Council would be a good organization to coordinate that effort, as they are already working with businesses on similar issues.

Expanding financial resources

Central Minnesota key informants agreed that the resources available to families are limited, but there may be some ways to increase them. Even small increases in family income can make a big difference, they agreed.

Barriers to expanding financial resources

Participants believe that shrinking resources for families is both an individual and systems barrier. One consequence of this is rising eligibility that limits access to programs, causing further financial stress on families.

Participants described rigorous screening of program participants, driven by shrinking resources and performance standards. They agreed that this is happening in agencies, government programs and schools, who all see the need to provide more services, but have been unable to find the funding.

What is working well in expanding financial resources

The group agreed that there are some resources available, but that the issue is often getting information about how to access them to those in need. An example is childcare programs. The group agreed that financial assistance for childcare is available for some families, but that families lack knowledge both about the programs and about the sometimes complex eligibility requirements. What is working well in these situations is people within agencies who are well-informed and help families navigate the system.

Overall, participants agreed that the shrinking pool of resources has led to more collaboration among government agencies, non-profits, the faith community, and other service providers. “We are looking for partners to provide services that cuts have taken away,” said one participant from government. Others in the group agreed that they are working harder at teaming up with other programs to offer services. One model of this is the partnership between the Workforce Center and St. Cloud Technical College, they agreed.

Key strategies for expanding financial resources

Funds to increase staffing. Participants struggled with strategies for expanding financial resources. They generally believe that there will be fewer resources down the road, so service providers will have to continue to be more efficient with what they have. However, they also point out that agencies need to increase their capacity, increasing staffing when possible, in addition to helping staff become more effective.

Aggressive grant-seeking. Some in the group acknowledged that their agency is becoming more aggressive at seeking grant funding. There was also general agreement that UWCM funds many programs that create family financial stability, and they encouraged the organization to continue this support.

Tax preparation. One specific strategy that participants agreed could be helpful is assisting families with tax preparation. One participant pointed out that she is often able to help individuals obtain a \$1000 property tax credit that they didn’t know about.

Use of volunteers. Finally, a few participants acknowledged that the role of volunteers in the community will grow as a result of shrinking resources. Therefore, assistance to volunteer programs will be an important strategy in the next few years.

Maximizing employer resources

Participants discussed how employers could help families in the community become more financially stable. In general, participants believe an approach through employers would be most successful, and should focus on maximizing access to and using resources that are already available.

Barriers to maximizing employer resources

Participants agreed that there are overarching barriers to financial stability in the employment arena. Often these are systems barriers, such as the many jobs in the area with low pay and/or few benefits, particularly health insurance coverage. One specific example discussed by some participants is the use of temporary workers by some employers to avoid paying benefits.

Another systems barrier is the high cost of childcare, according to participants. Though Central Minnesota leads the nation in percent of women in the workforce that means the need for childcare is critical, and costs are typically high compared to wages. Families on second and third shifts as well as those with infants may have difficulty finding providers.

Misleading or inconsistent messages from the media, especially in reporting employment data and workforce issues, is another systems barrier according to a few participants.

Individual barriers include lack of job skills (including soft skills), limited English skills of some workers, lack of training in the right areas and, for some, criminal backgrounds that limit opportunities for employment.

There was general agreement that efforts to create financial stability among families must include, and start with, employers. Participants generally described this area as one of frustration—area employers need good workers and area workers need good jobs. But the combination of economic conditions, employers' sometimes limited awareness of employee needs, as well as the individual and systems barriers noted above, keep the two groups from creating a mutually beneficial relationship.

What is working well in maximizing employer resources

Participants did not identify strategies that are already working in maximizing employer resources. Instead, they concentrated on key strategies that are needed, as described below.

Key strategies for maximizing employer resources

Employer-sponsored programs. One of the strategies needed is to encourage families to seek out and take advantage of employer-sponsored programs already in existence, panel members agreed. A good example is that some employers have begun offering tuition reimbursement for occupational English classes. Encouraging more employers to do the same would assist employees who are English language learners and improve their value to the business.

Another strategy that could help families achieve financial stability is an increase in the number and type of apprenticeship or internship programs.

Higher-paying jobs. Overall, this group agrees that creating and maintaining higher paying jobs that include benefits should be a key community priority. Further they see this issue as underlying many other community needs. Because of the large size of the problem, and the fact that businesses weren't represented on the panel, this group was reluctant to suggest sweeping strategies to create and maintain jobs. Participants believe that UWCM could help the dialog go forward because of its excellent ties to the business community.

Other strategies

These key informants discussed other barriers, along with strategies to help foster financial stability, although not in the depth of the above four topics. These included:

- **Stigma**—Participants believe that many groups in the community have trouble asking for help. This is true not only of some new immigrant cultures, but also of those from the Scandinavian and German cultures that settled this area and still make up the majority of residents. They believe it is less true for the younger generation in all these cultures. Efforts to remove the “welfare” stigma from accepting assistance could help some families achieve stability, they said.
- **Language**—This barrier was discussed within the previous topics above. It cannot be overemphasized as a barrier to financial stability, participants agreed. Lack of or limited English skills impacts housing, education, medical care, and other factors that are closely tied to financial stability. Providing interpreters in sectors that have difficulty affording them, and creating and supporting mentoring programs with mentors from within cultural communities are both needed strategies.
- **Housing**—This is a critical issue in financial stability, according to these key informants. For example, homes that meet affordability guidelines are still out of reach for many working families; there is a lack of housing suitable for large, extended families; and predatory lending exists in the community. Participants agreed that getting families into housing needs to be a key strategy in creating financial stability.
- **Discrimination**—The group believes that discrimination, both real and perceived, is a barrier to financial stability. Strategies that ameliorate discrimination are important. So are strategies that build trust and knowledge, and seek to correct misunderstandings about programs and services that are common in some cultural groups.

Mental health

Participants in the key informant panel agreed on this vision for mental health:

Our community helps everyone to achieve optimal mental health.

Participants suggested four key strategies to move toward this vision:

- Increase access to mental health services by bringing the services to where people need them.
- Educate the community and providers, and advocate for mental health with local and state government.
- Work to more closely integrate mental health care with physical health care, and with other services.
- Increase funding to allow agencies to add and sustain services.

Bringing services to people

There was strong agreement among the key informants that this is a key strategy for mental health access. It includes a variety of tactics, including providing more in-home services, maintaining and expanding mobile services, and providing more services in schools. Also part of this issue is helping people navigate the system.

Barriers to bringing services to people

Participants listed many of the barriers that prevent families from accessing mental health services. One common systems barrier is lack of flexibility in the workplace that keeps employees from getting to mental health appointments.

Participants reported other systems barriers around where services are located. They noted that support groups are often not available in rural areas. They generally agreed that more school-based services are needed. One piece missing from the local scene is a dual-diagnosis support program for individuals with mental health issues who are chemically dependent (the closest program is in the five counties to the east of St. Cloud metro area).

These barriers make it difficult or impossible for many who need mental health services to access them.

What is working in bringing services to people

There are some programs that are helping with system navigation, according to the key informant panel. These include the care coordinators in the STARS community collaborative program. Also mentioned were Mental Health Triage staff in the schools, the Adult Rehabilitative Mental Health Services (ARMHS) staff, and the Community Support Program (CSP).

In terms of bringing services to where people are, the Mental Health Triage staff working in the schools were again given as an example. So was the program at Recovery Plus

Journey Home for pregnant women and new moms, which delivers mental health and recovery services in a residential facility. Participants also agreed that the Mobile Wellness Center brings mental health providers and assessment services directly to children in their schools. School programs in bullying, violence prevention, behavior intervention, and chemical health are also good examples of providing services where they are most needed.

Overall, the group also viewed the State of Minnesota transition from large regional treatment centers to a community model as moving in this direction. It has provided some programs that bring services closer to people. These include flexible funds for medication, transitions and housing, and a statewide mobile crisis team that can bring services to where they are needed.

Key strategies for bringing services to people

Ongoing funding. Participants didn't suggest many new strategies, but instead discussed the need to support, maintain and extend current services. As an example, one participant described the uncertain funding for the Mobile Wellness service and the need to constantly look for new sources of revenue for that operation.

Many mental health services have marginal funding sources, panel members agreed. As an example, additional funding is needed to expand support groups so they are available close to where people live and work. This is critical, they agreed, because support groups are usually not reimbursable by insurance. In addition, many of the school-based services have funding challenges, the group agreed.

Volunteers. Another strategy to bring services closer to people is to find more volunteers. As an example, support groups often rely on volunteer coordinators and leaders. In order to create groups in more locations, additional volunteers are needed, and stipends would help recruit them.

Educate and advocate

Participants agreed that education and advocacy is needed on many levels. This includes educating the public to help reduce the stigma of mental illness, creating better information sharing between mental health providers and the public as well as among providers, and advocating with government and with insurers about the issues.

Barriers to education and advocacy

The key informant panel described the stigma that mental illness carries as a critical issue. They noted it is both a systems barrier and an individual barrier. To make matters worse, the stigma, quite prevalent in the majority community, is even more pronounced in some immigrant groups.

Another barrier around this topic has to do with licensure. The group believes there are students graduating with degrees in mental health that can't find jobs because insurance companies do not recognize their license. Participants noted that some educational institutions may be misleading students about their job prospects with these degrees.

They also agreed that insurance providers are behind the times in accepting treatment by individuals holding these licenses.

A third barrier is lack of knowledge of the mental health system by some in government, leading to lack of action on important issues facing the field. Further, some regulations around reporting and confidentiality create barriers to quick access to care. An example is a HIPAA regulation that won't allow families to be treated as a single entity for release of information.

Finally, the system has been slow to focus on the mental health of parents as a way to reduce the "next generation" of mental health problems. The panel has seen cutbacks in treatment of the family system instead of just individuals.

What is working well in education and advocacy

Participants reported that a few public education programs are beginning, although they need to become more widespread.

As an example, the Training Opportunities Team workshops on mental health have been well attended, and have provided a good start at creating a common vision among agencies in the community. The group also mentioned the Human Service Council's political action committee as an effective group with goals that are parallel with the needs identified in this discussion about mental health education and advocacy.

Key strategies in education and advocacy

Participants described all the different levels at which education about mental health is needed:

- Educating mental health patients, so they know what services are available and how to access services, such as support groups, that are community-based
- Educating the public, to help reduce the stigma carried by mental illness, to help them understand the delivery system, and to solicit their help in advocating for mental health services with legislators and other government leaders
- Educating employers, to help reduce the stigma, and to help them understand how and when to get help for their employees
- Educating institutions, to help them understand reimbursement policies and how they impact the licenses their graduates hold
- Educating legislators and other government officials, on the critical issues and needs in mental health, as well as for funding of programs and streamlining licensing and other regulatory procedures

The key informant panel also agreed that for all these efforts to bear fruit, the community of providers must get together and hammer out a "common platform," so that the whole community is receiving the same message.

The group also agreed that UWCM should be a key player in this education and advocacy program. They see UWCM's role as the convener, bringing together agencies and funders to work on mental health education and advocacy issues.

Integration of mental health care

Participants described this strategy in part as integrating mental health care into physical health care. They believe that integrating the two delivery systems will help break down the barrier that exists in people's minds, that keeps them from seeking treatment for mental illness. Other integration would include mental health treatment with aftercare and with other services often needed by those with mental illness.

Barriers to integration of mental health care

There are a number of systems barriers around this issue. For example, key informant group participants reported that many being treated for mental health are transient or homeless and that they have no safe, supportive places to go when discharged or when using outpatient services. Others described lack of services for families transitioning from mental health services back into the community. Providers often lose track of patients at this point, participants said.

Another transition issue concerns the adult and juvenile mental health systems. Participants report that those moving out of the children's mental health system into the adult system often "disappear" for a few years because the transition between them is hard to navigate, then come back with more mental health problems. This is an issue with obstacles that cross a number of systems; for example, the difference between "legal" age and "adult" age is confusing, and can get in the way of access to mental health care.

Individual barriers to integration are the energy and time it takes to fill out forms, get transportation to appointments, and juggle basic survival issues while dealing with mental illness.

What is working well in integration of mental health care

Participants strongly agreed that CentraCare's start at moving mental health providers into regular clinics (as opposed to having a separate facility for mental health providers) is an important strategy that increases an individuals' comfort in seeking help. It should be the model for integrating the physical and mental health care systems, participants commented.

The Elder Network program was described as very useful in helping seniors navigate the mental health system, and at integrating physical and mental health care.

Participants also agreed that the number of school-based services has increased over the past few years, which helps to integrate mental health into the normal life of the school. Examples include anti-bullying, violence prevention, and behavior intervention programs, as well as access to the Mobile Wellness Center at the school.

Strategies for integration of mental health care

The participants on the panel agreed that anything that makes mental health part of other community systems is an important strategy. They agreed that doing so will go a long way toward removing the stigma of mental illness, perhaps the biggest barrier to effective treatment for many individuals.

Some examples of integration described by the group includes:

- Continuing integration of mental health and physical health delivery systems
- Integration of the child/juvenile and adult mental health systems; this not only applies to providers, but to insurers and regulators as well
- Integration of the treatment and aftercare systems, facilitating transition back into the community
- Integration of the mental health system with other community services such as shelters, housing access, social services, etc.

This focus on integration should not only reduce the stigma of mental illness, it should also improve access. Until this happens, participants agreed that providing someone to help patients fill out forms, arrange transportation and child care, and perform similar tasks is a critical strategy.

Increase funding to add and sustain services

Participants from both agencies and government agreed there are a number of mental health services they would like to add, but at current levels of funding they are unable to do so.

Barriers to adding and sustaining services

Participants described the current level of funding for mental health as very tight. One reason for this barrier is the result of the state model's shift from providing services in large regional institutions to more local service delivery. Panel members commented that while this shift has largely been positive, it has added funding challenges for local providers and supporting agencies.

One of the biggest systems barriers is lack of reimbursement. Participants reported there are many services that mental health providers should be offering, but that are not covered by insurance. This leaves big gaps in effective treatment.

One example of a non-reimbursable service is support groups. The key informants in the panel believe they are effective and not very costly (many are coordinated and run by volunteers). But because they are not reimbursable, it is hard to sustain current groups and very difficult to create new groups. Another service that is often not reimbursed is in-home care, since some of the people who provide that cost-effective service are not licensed.

What is going well in adding and sustaining services

The key informant panel believes that programs that integrate services (discussed in the previous section) are positive in terms of increasing available funds because they increase efficiency for providers and cut access costs for clients.

In addition, participants believe that this community has a strong track record in collaboration. Not only has this improved efficiency of mental health delivery, it has helped bring grant money into the community.

Strategies to add and sustain services

New funders. Overall, the key informant group agreed new funders need to step up to the plate. To facilitate this, they hope that organizations like UWCM and the Central Minnesota Community Foundation might act as a clearinghouse, matching potential funders with programs in need and soliciting new funders with interest in mental health issues.

Ongoing funding. The participants in the panel also agreed that finding additional ways to sustain grant-funded programs is critical. The community's culture of collaboration and aggressive pursuit of grants has provided many needed services, but these are often not sustained because funding is short-term.

Recruiting providers. Other strategies to help add or sustain programs are incentives to help recruit staff mental health professionals and social workers to Central Minnesota. For example, agencies that report an ongoing shortage of social workers say that a program to recruit students into social work programs and provide scholarships and/or living allowances would help them find employees over time.

Collaboration. Finally, participants also agreed that agencies that provide mental health services must look at ways to provide non-reimbursable services collectively.

Other strategies

This key informant panel discussed other barriers, along with strategies to help make sure all residents achieve optimal mental health. These included:

- More assistance for employment programs, such as WACOSA and Opportunity Services, which can help some with mental health achieve employment stability
- More prevention and early intervention services to reduce the acuity of problems, especially in those with multiple mental health needs
- More use of peer mentors to help the mentally ill
- A forum for mental health agencies to share what is working and to foster collaboration
- Increase recruitment and training of volunteers who are needed in many mental health programs
- Increase recruitment and hiring of people of color in mental health agencies.

Childcare

The vision

Our community helps all families have quality, affordable childcare.

Participants suggested four priority strategies to achieve this vision:

- Expand networking and connections among providers of childcare and providers of other services to families.
- Increase scholarships and other funding sources to help families pay for childcare.
- Educate the public and advocate with government about childcare issues.
- Provide more training and support to childcare providers.

Expand networking and connections among providers

Participants described this strategy as something that is already happening, but needs to increase. It is important that all providers are included. A key outcome would be broader information sharing that improves access to resources for childcare providers and the families they serve.

Barriers to networking and connections

Key informants did not describe specific barriers to networking and connections, but agreed that lack of this support is a key barrier to providing quality childcare. In discussing other strategies, however, participants named a number of obstacles that also apply to networking and connections. These include time pressures, and having enough staff available to maintain care while providers meet.

Strategies that are working in networking and connections

Child Care Resource and Referral was described as very effective in bringing childcare providers together, as well as getting information out to all providers. Participants named Success By 6 as an example of successfully bringing providers and community experts together around childcare issues.

Two resources that some childcare providers are finding helpful are the childcare programs at St. Cloud State University (Child and Family Studies) and St. Cloud Technical College (Child, Adult Care and Education). Participants reported these programs are currently growing and are a source of information as well as providing a graduate pool to fill staff positions. Some have used interns from these programs and report that the interns bring good ideas from their educational programs, while supplying additional help to the childcare provider.

Overall, participants see a good beginning to networking and support among childcare providers, but believe it needs to increase.

Key strategies needed in networking and connections

Broad community involvement. Participants suggested that more use needs to be made of the above resources, as well as development of new ones. One key development would be a better connection to the community as a whole. They suggested convening groups of parents, community leaders, teachers and others to discuss parenting, behavior problems, funding challenges and other topics that are critical to childcare. The discussions and connections from outside the childcare field would be very helpful to providers, they agreed.

Provider networking. Childcare providers need to connect more often as well, the panel agreed. They pointed out that the amount of information about childcare is so voluminous that it is difficult for any one provider to keep up. They suggested that such a group would spend part of the time in formal information-sharing, and the rest in informal networking.

The key informant panel suggested that UWCM could be the convener of childcare provider groups. They also see a role for UWCM in bringing the larger community together, since the organization has close ties with so many businesses and organizations in the community. Some agreed that expanding the role of the Child and Youth-Serving Agencies group that UWCM is already coordinating would make more sense than creating a new entity.

Increasing childcare funding

This strategy includes increasing funding to parents through scholarships and other subsidies. It also includes the supplier end, creating additional funds for childcare providers through incentives, employer programs, and organizational changes.

Barriers to increasing childcare funding

Key informants described childcare affordability as a “huge” issue. Some barriers to affordable childcare are individual barriers: one-income families (single parents), or families with both parents working but for low wages. Local County and Family Services Collaborative funding for childcare subsidies and programs has been shrinking. In addition, some funding programs for families reimburse money already spent, which can cause cash flow problems for families on the edge.

Others barriers are systemic, such as the high cost to providers of adequate staffing (staffing levels are mandated by the state), and growing gaps in reimbursement for families who qualify for childcare assistance. High licensing and regulatory costs are another barrier, according to the key informant panel. Finally, there is a gap in scholarship programs that allows some low-income families to slip through the cracks when they have co-pays or excess costs that aren't figured into the formulas.

What is working well in increasing childcare funding

Participants agreed that there has been some positive movement on the issue of affordability. For example, they reported that both the legislature and the Minnesota Early Learning Foundation are working on the problem. Parents Aware is a pilot program

that provides subsidies to families enabling them to access high quality childcare. Another pilot project funds providers to increase the quality of care. And there is some progress in reimbursing high-quality childcare providers at a higher rate. Currently, none of the pilots are benefiting Central Minnesota.

One new change in regulations that is helping is that for low-income families, someone other than the family can pay the co-pay. This allows scholarship programs to pick up that cost, which wasn't true in the past.

Participants also praised the BAT program (Early Childhood Behavioral Assistance Team) for assessment of behavior issues in undiagnosed children, and consultation with the child's daycare provider. However, they cautioned that the program's funding is year-to-year, and it is currently only available in Benton County.

The scholarship program at KIDSTOP works well to increase access for school-age children who need a safe place to be after school. It has the added benefit of lowering transportation costs for some parents, since it is school-based.

Some childcare providers are giving scholarships to families who are unable to pay a co-pay, but most providers cannot afford to do this since it comes right off their bottom line.

Key strategies in increasing childcare funding

Family scholarships. Participants in the key informant group suggested a number of key strategies to help with childcare affordability. The first was to try to find funding for more scholarship programs for parents. As with other strategies, the group would like to see funders convene around the topic and work together to provide these programs.

The group would also like to see legislation that provides more funding for scholarships. They see a role for the community in advocating with legislators for this to happen (see next section).

Scholarships or grants are especially important for parents who are on the fringes of the eligibility guidelines. Providers sometimes see parents who don't meet guidelines because of living expenses that they have no control over, but that can't be included in figuring eligibility. The new regulation that allows someone other than the recipient to cover a family's co-pay opens the door for a co-pay scholarship program, the panel suggested. Another needy group is parents who are on the waiting list for county funding. Currently many counties in the state have waiting lists, and Stearns is one of those with 150 families waiting. So a grant program to help those on waiting lists is also very important, according to the group.

Accreditation support. Another key strategy, this time from the supply side, is to help childcare providers with the cost of accreditation. The most common accreditation, which allows providers to be reimbursed at a higher rate, is expensive, especially for small providers. A grant program to assist childcare providers in covering this cost would be welcome, helping to raise the quality of childcare they can offer, and lending financial stability.

Employer support. Getting employers more involved in childcare funding is also an important strategy. While participants believe that direct funding, perhaps in the form of a childcare allowance for employees, would be useful, they also see a role for less direct

help. For example, providing more flexibility for employees to stay home with sick children would improve childcare options, since sick childcare is difficult to find.

Expanded staff. Participants also hope that Childcare Resource and Referral can attract more funding so they can expand staff to keep up with increasing needs.

Educate and advocate

Participants in the key informant panel believe that there is a need for more education of the public about childcare needs, and more advocacy with the legislature to pass some “common sense” legislation around childcare.

Barriers to education and advocacy

According to panel members, individual barriers to affordable, quality childcare include lack of knowledge among the public about programs and services, as well as not understanding the issues in childcare.

As systems barriers, the key informants agreed that outdated and/or inequitable licensing regulations, and uneven (and often falling) levels of state funding, are too common.

What is working in education and advocacy

The key informant panel didn't identify any practices that are currently working in this area. They view the need to educate and involve the public, and the need for legislative education and advocacy as newer, and largely unmet, needs.

Key strategies in education and advocacy

The panel discussed both licensing and funding at some length. Both are issues that need to be addressed by the state legislature, they believe, but agree that the community and childcare providers need to work with legislators closely because the issues are complex.

State funding to counties. Regarding funding, participants agreed that a key strategy is straightening out funding differences between counties. Equitable funding would mean fewer counties with a waiting list, a big improvement over the current situation, the group agreed.

Licensing, accreditation. Licensing and accreditation is another legislative issue important to this group. They noted that the cost of accreditation is high and hope the legislature will allow providers to choose other, more reasonably priced, accrediting bodies.

The key informant panel was somewhat hopeful that legislative changes are coming, reporting some “friends of childcare” in the legislature now.

Community involvement. Because these issues are so important to childcare providers, they believe that the community at large needs to know about them, and help advocate for them. They suggested that UWCM is one organization that could coordinate such an effort.

Training and support for child care providers

Providers need additional training and support to increase their effectiveness in working with challenging children, the group agreed. This need is great not only for providers who work with children traditionally defined as “special needs” (those with physical problems or cognitive challenges) but also providers who work with sick children, with infants, and especially with children who have behavioral problems.

Barriers to training and support for childcare providers

Participants agreed that access to care is particularly difficult for parents with children who have special needs, or who are sick. It is also hard to find infant care. Most barriers to finding this care are systems barriers, according to the group.

Providers who care for these children need extra support, which is often not available or difficult to access. As a result, some providers may try to care for children they are not equipped to handle, and the quality of care suffers. Other providers, understanding their limitations, decline to care for these children, creating the access to care barrier described above.

The stress and financial problems experienced by childcare providers working with these children means there is high turnover in staff, as well as providers who go out of business. This is a critical barrier for parents, who need to have their children in a stable environment.

What is working in training and support for childcare providers

Some participants were familiar with the Opening Doors program through ARC Mid-state. They reported the program helps families who have special needs children find daycare, and also supplies some training and support to their childcare providers.

BAT (Early Childhood Behavioral Assistance Team) is very helpful in supporting providers who work with behavior-challenged children, the group agreed, but the program has limited funding and doesn't provide services in all of the area.

A helpful collaborative for special needs providers is PIECC (Partners in Essential Care for Children). Participants described this group as “sharing information, supporting each other in providing services.”

Participants also mentioned the THRIVE group that is just getting underway. This Initiative Foundation program focusing on child mental health and behavior will be helpful to providers, especially those with special needs children, they agreed.

Key strategies in training and support for childcare providers

This key informant childcare panel agreed that the programs described above are a good foundation for training and support of providers. They believe that additional efforts should use the models created by these organizations. As a general strategy, the key informant group recommended that the community needs to offer more support to help providers deal with behavior issues.

Expanded, ongoing funding. In particular, the group hoped that the BAT program could receive more funding, or a similar program could be started. This would allow these services to expand from the program's limited geographic area in Benton County.

Early assessment. The group also agreed that early assessment services are very important in supporting providers. Early assessment makes it easier for the childcare provider to connect with resources and seek additional services for the child.

Other strategies

This key informant panel discussed other strategies to help make sure all families have access to quality, affordable childcare. These are:

- Financial support for childcare providers so they can be open for extended hours. Staffing for extended hours is very expensive so unless utilization is high, the childcare provider loses money. The group suggested both employer funding and grant funds are needed to close the gap and make sure parents who work second and third shifts, or weekends, have access to care.
- Childcare providers need additional training and support to help them work effectively with children from minority cultures. This is especially critical for providers who care for children from immigrant families who know little English. In addition, potential childcare providers from these cultures need assistance navigating and paying for the licensing process. Some efforts have begun with the Somali community, but need to be accelerated, according to the key informant panel.

Positive parenting

Participants in the key informant panel agreed on this vision for positive parenting:

Our community supports all parents in positive parenting

Participants suggested three key strategies to move toward this vision:

- Creating awareness—through technology, the media and the business community—that good parenting is a community issue
- Ongoing, stable funding to support parenting programs
- More support and education for parents of children ages 10 and older.

Creating awareness about good parenting

Participants strongly agreed that good parenting is often overlooked when the community is thinking about priorities. They believe a community-wide effort is needed to change that attitude.

Barriers to creating awareness about parenting

All the barriers described in this discussion were individual. One participant said, “People believe parenting is instinctual,” and the group strongly agreed. They each had experienced this attitude, that everyone automatically knows how to be a good parent. In their opinion, this first barrier must be overcome in order for other parent education efforts to be successful.

Another individual barrier is past experience. Those who have grown up without a good role model of parenting have a difficult time seeing the value of positive parenting.

Family structure is more complex than in the past, with single parent households, absent fathers, and multigenerational households where roles and relationships are not clearly defined. Generational perceptions about good parenting often differ. In extended families a grandparent may take on a parenting role, often out of necessity because parents aren’t available to spend enough time with their children. These grandparents raised their own children in a different age, and may lack important skills and values needed in child-rearing today.

Finally, immigrants new to the community have many parenting skills, but the change in dominant culture presents its own difficulties in learning and using accepted parenting skills. And many of these parents have never had the chance to learn child development stages (a barrier that is fairly common among the majority culture as well). This has led some immigrant parents to have unreal expectations for their children’s growth and development.

What is going well in creating awareness about good parenting

Participants listed access to technology as very helpful for parents seeking information and/or education. For example, the Internet has many resources for parents that are easy to use. The quality of information available is uneven, the group warned, so there is a

need for an evaluation system to help parents determine what is good information and what is not.

Participants also agreed that there has been good cooperation and coordination between agencies in creating awareness.

Key strategies in creating awareness about good parenting

View parenting as a priority. Participants first discussed the change in awareness that they hope for. They want positive parenting to become a community priority. Getting good parenting accepted as a legitimate focus can be accomplished through constant attention by many different systems in the community. This “we’re all in it together” approach will help community members see that it is “normal” to be concerned about parenting, and to seek education and information.

The key informant group suggested the “whole community” needs to work together to help create awareness. In addition to involving the education community, nonprofits, and the media, participants specifically recommended that businesses are needed to help create urgency about positive parenting. They suggest the business community’s role can include providing stable funding for programs but, more importantly, providing the workplace as an important location for promoting the importance of good parenting. Workplace postings and discussions would bring the message to employees.

The key informants believe the faith community can also play an important part in making positive parenting part of the everyday language in the region.

Focused media attention. The group also made a specific recommendation for media. Some recently saw a series on child development stages on television; they hoped that a similar series might run in local newspapers. This is an example of the group’s belief that parenting “messages” need to be informational, rather than motivational. Again, the result should be that the messages become so pervasive that everyone in the community sees it as normal to talk about, and seek information about, positive parenting.

Parenting information service. Responding to a question from a UWCM staff person, key informants also discussed a “Parenting Line” telephone information service. St. Cloud Area Schools had a small, informal service in the past, but key informants were unaware of a current number for parents to call to get instant parenting advice. Some participants were familiar with a service in the Twin Cities, sponsored by a health care organization. While some thought this was a good strategy, others wondered whether parenting help could be added to the United Way 211 information service.

Ongoing, stable funding

There was agreement among the groups that stable funding is a key need for parenting education and support services. This will help programs sustain, and hopefully expand, their programming.

Barriers to ongoing, stable funding

Affordability is a big barrier to providing more parenting education and support in the community, the key informant group agreed. On the systems side, the funds come and go

in “bursts,” according to participants. This means some programs that have been very effective are now gone, because the funding is gone and providers are unable to sustain them.

Another systems barrier is lack of money to pay for interpreters. This makes some classes of limited usefulness to non-English speakers.

A third systems barrier is a lack of licensed parent educators in the local area. Many potential teachers are reluctant to get a degree in parent education when the work opportunities are often part-time.

Affordability is also a barrier for individuals. To keep parenting education and other supports affordable for most parents, fees cannot be high enough to cover costs. But even with low fees, participants agreed that some families must choose between, for example, parent education and cable TV, or in some cases between parent education and diapers.

Overall, participants agreed that the community already has wonderful parenting programs, including those through Early Head Start, ECFE, the home visiting programs from area schools, and some churches. Still, they worry about finding enough funding just to keep these programs stable, to say nothing of expanding them to meet new challenges in the community. Participants noted there is not a mandate to ensure parenting education and support, as there is for child education in the public schools.

What is working in providing ongoing, stable funding

Participants could not come up with many strategies that are currently working to overcome the funding barrier. Some programs are able to offer incentives to families—often in the form of supplies such as diapers or formula—to encourage attendance and mitigate the cost to parents. Still, programs themselves have very limited funds to provide these incentives.

Key strategies to providing ongoing, stable funding

Participants suggested a number of strategies to provide funding for parenting programs:

- Get the business community involved, participants suggested. Not only are they a potential source of additional funding, they can assist in convincing their employees, and therefore the community, how important parent education is. The group implied that scholarships or grants to employees who register for parenting classes might be one way to get money into the system.
- Local non-profits and foundations could pick up funding for some programs that have been cut, the group recommended. Ultimately they hope for a group of non-profits and grantors working together to increase parent education opportunities in the area.
- Involve the faith community more, if not in direct funding then as locations for programs and as a vehicle for informing the community about the importance of parenting education.
- Provide scholarships to individuals who want to become licensed parent educators, to alleviate the teacher shortage.

Education and support for parents of older children

Participants in this key informant group believe that much needs to be done to help parents who have children ages ten to twenty. Reporting on their experiences in the community, participants see many parents of adolescents just “stepping back,” with no real idea of how to parent this challenging age.

Barriers for parents of older children

The group members agreed that there is a dearth of programs for parents of adolescents and, in fact, few supports of any kind for these parents.

One individual barrier that prevents effective parenting of this age group is that parents are getting older by that time. Many simply don't have the energy they did when their children were younger, group participants agreed.

Participants also believe there is a stigma in seeking help for parenting older children that is not there for younger children. This means parents of older children who are having problems are less likely to seek help, believing they should know how to parent by this stage. This may also explain the lack of education and support programs for this group.

A third barrier is cultural. In some immigrant groups the pressure on older children to change their values to match the dominant culture creates tension in the relationship between parents and these children.

The systemic barrier is that parenting education is not “a continuity—continuing through all ages” as one participant described how it should be. In order for parenting education to be effective, it must support parents of children from birth into their 20s.

What is working in supporting parents of older children

Participants noted there is very little happening for parents of older children, so it is hard to define what is working. Some noted that there have been sporadic program offerings in some school districts in the evening, but there have been no regular education events.

Key strategies for supporting parents of older children

Work with parents and adolescents together. Participants had one specific recommendation for helping parents. This was to connect parents and kids at times in their lives when they are brought together. As an example, one participant suggested holding parenting classes at church to coincide with confirmation classes. Another suggested trying to infuse parenting education into sports events. Other participants agreed that looking for times when parents and adolescents are naturally together is an important strategy.

Other recommendations are also listed under other topics but bear repeating here. They are: 1) Increasing funding for parenting programs, 2) Educating the community about the importance of parenting, 3) Involving the business and faith communities, and 4) Increasing the pool of parent educators through grants and scholarships.

Other strategies

Although the key informant panel only chose three strategies as key, they discussed a number of other steps the community could take to build positive parenting skills. These are:

- There is a need to deliver parenting education “where parents are,” the group agreed. This means taking programs beyond traditional settings, such as schools, and holding sessions in locations and at times that are more convenient for parents. The workplace and churches were mentioned as natural settings for programming, but other locations should also be considered. For example, some participants agreed that if you want to reach a group of fathers who need parenting education, a program should be conducted at the county jail. There is already a program at the state prison that is well-attended and is engaging fathers in understanding their parenting role, a participant noted.
- There is a need for more rigorous follow-up of parents once they have completed parenting programs, to make sure their questions were answered, that they are using the skills they learned, and that they are connecting with resources.
- The key informants agreed that a family-to-family support system for parents would be very helpful. There have been some efforts to provide this type of mentoring in the community, but more needs to be done. A program in St. Paul that matches parents of special needs children might serve as a model for a local program.
- As with other community issues, providing easy access to prevention programs as well as early intervention services when families have problems is important, the key informant group agreed. Two specific examples were discussed at length: 1) Increasing the number of pregnant women visited by Public Health, as well as home visits to new parents, would help transfer positive parenting skills. And 2) Intervention specifically with fathers early on would help them learn parenting skills and understand the importance of their role in the family.
- Participants agreed that the parenting education system should be more closely connected to the mental health system. This is important for early intervention, resource and referral for mental health issues that affect parenting. Connecting positive parenting and mental health would also ameliorate the stigma of asking for help.
- The group agreed that two areas often missing from parenting programs are: 1) Support for fathers, and 2) The relationship between the couple, rather than just the relationship between the parents and children. Parent education programs that can address both these areas will provide a stronger basis for positive parenting. Adding these components is especially important for three groups: families from other cultures, where the fathers may be working long hours or late shifts and so are not around much; families where the father is no longer in the home; and families where the father is incarcerated.

- Further progress in “removing silos,” making sure all agencies and organizations in the community are working together to increase awareness and to provide education that is consistent, is critical according to this key informant group.

Common strategies

At the end of each of the four key informant groups the facilitator showed participants a graphic of each of the four visions that address key community needs as overlapping circles, with the area common to all four shaded. They were asked to consider the vision their group had been discussing, “and how it intersects with three other community visions that are the result of the other root causes identified by service recipients and key informants....” The four visions presented were:

Our community...

...helps everyone achieve optimal mental health.

...supports all families in achieving and maintaining financial stability.

...helps all families have quality, affordable childcare.

... supports all parents in positive parenting.

Initially all four groups agreed that these issues are related, and that to make progress in one will often require making progress in another at the same time. The group then discussed whether there were common strategies that could have an impact in two, three or all four areas.

The summary below describes responses to this wrap-up question, and also includes subjects that came up in all groups during the rest of the discussion.

Educating the community

The first strategy mentioned in all four groups was awareness and education. All agreed it is important for the community to continue to increase awareness of these four needs, so people accept the visions as community priorities. It is also important to provide education to increase community understanding of the needs.

Advocating for change

The key informants recommend that beyond awareness and education, these visions need an organization or group of organizations working together to advocate for them. These efforts need to reach community residents, service providers, government officials who could remove barriers to addressing the needs, and others who have some role or influence.

Enhancing knowledge about services

One of the critical education tasks is making sure Central Minnesotans who are eligible for services know about those services. This ranges from making sure people eligible for tax refunds are taking advantage of them, to ensuring those eligible for childcare scholarships know how to access them. Participants in all groups mentioned United Way 211 as a significant resource in helping individuals and providers connect with services.

Taking programs and services to where the people are

Participants agreed that services and programs will be more effective when they can be delivered where people work and live, rather than at provider locations. Examples are bringing mental health care into schools and providing parenting classes in the workplace.

Convening the community

Participants in all four groups agreed that there is a need for a central organization to bring the community together around these issues. They believe that UWCM is well-positioned to be this organization.

Coordinating resources

Participants also see the need for an organization to help in coordinating resources, to make sure that there is no unnecessary duplication and that services are delivered as efficiently as possible. Participants described this as "...getting us out of our silos." Again, some suggested that UWCM is positioned to take some of this responsibility.

Training and supporting providers

Participants agreed that the pressures facing government and non-profit agencies make staff training and other organizational support critical.

Removing stigmas

For two of the issues, mental health and financial stability, participants agreed that working to remove stigmas is an important strategy. However, in the earlier discussion in all four of the groups the key informants agreed that reluctance to ask for help is often a barrier. Whether this reluctance is caused by a community stigma around an issue or by cultural conditioning, it must be overcome in order to make progress toward achieving these visions.

Additional funds in the system

All four groups discussed the need for adding resources to make progress on these community visions. In addressing financial stability, the suggestions were around maximizing available resources, in addition to adding to resources where possible. In the other three areas the key informant groups agreed that service providers need additional funding to deliver expanded, high-quality services. And for childcare and parenting, program recipients need grants or scholarships to help them take advantage of these opportunities.

Other thoughts

Participants also described specific elements that "live in the center," overlapping and connecting the four vision areas. These are: employment programs that help people gain skills and find good-paying jobs with benefits; and early childhood initiatives, critical for the future of the area. Participants believe that making strides in either element will have a positive impact on all four community visions.