

Painting a Brighter Picture of
Infant and Early Childhood Mental Health
in Greater Minnesota



MINNESOTA
THRIVE
 INITIATIVE

MINNESOTA INITIATIVE FOUNDATIONS

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The Minnesota Thrive Initiative promotes the healthy social and emotional development of infants and young children.

Painting A Brighter Picture

A newborn lies in her crib, crying. She could be hungry, wet, or sick. Maybe she just needs to be held. Are her cries ignored, or is she picked up and gently soothed?

A toddler with separation anxiety throws a tantrum each morning at child care. Does the center's staff know how to handle his distress and help him get back on track?

Everyday, very young children are learning about their world. They learn that it is a safe, welcoming place to explore, learn, and grow or that it is cold and unpredictable. Mental health begins at birth and continues to develop through the infant, toddler, preschool, and school years.

Research now underscores what many people have instinctively long believed: early experiences and relationships are the cornerstones of our lifelong social-emotional foundation. It may be a sturdy foundation built

on loving, consistent care, or, it may be shaky and in need of extra support.

How can we ensure that our youngest citizens are given a strong social-emotional foundation and that families of little ones with mental health issues can access the services and resources they need? The six Minnesota Initiative Foundations, local communities, and a statewide network of partners set out to answer that question by creating the Minnesota Thrive Initiative.

Thrive is a groundbreaking, three-year pilot project that has joined hundreds of individuals in a common effort focused on infant and early childhood mental health. Together, we have helped connect practitioners across multiple disciplines, educate community members about healthy social and emotional development, coordinate and expand mental health services, and make Greater Minnesota a better place for children and families.

Here is a picture, painted in broad strokes, of how the Minnesota Thrive Initiative came to be and the steps it has taken to help shape a brighter, more welcoming world for our youngest children.

Why And How Thrive Came To Be

The Minnesota Thrive Initiative is a true collaboration of the six Minnesota Initiative Foundations, Greater Minnesota community members, and a statewide network of partners.

Setting The Stage

Infant and early childhood mental health is simply a child's ability to experience and regulate emotions, form close and secure relationships, and explore their world through play. Yet the concept of infants and young children having distinct mental health needs has not been, until recently, commonly accepted. In the past, early brain development

was neither widely studied nor clearly understood. Thankfully, that is changing.

A growing body of research indicates a vital window of opportunity between birth and age five. Young children who do not receive the care they need to meet early social and emotional milestones are less likely to do well in the first years of school. It launches a domino effect leading to a higher risk of problems later in life—problems that affect children, their families, and society as a whole. Education, early identification of mental health concerns, and proper interventions make a difference.

Call For Action

The idea for Thrive first grew from the Minnesota Initiative Foundations' statewide early childhood care and education

Examples Of Capacity-Building Strategies

EDUCATION & TRAINING	MEDICAL & MENTAL HEALTH INTEGRATION	REFERRAL SYSTEMS	CONSULTATION	PUBLIC AWARENESS
<p>Targeted infant and early childhood mental health trainings held for diverse sectors.</p> <p>Scholarships offered for advanced training on infant and early childhood mental health.</p> <p>Technology such as I-TV and Webinars used to increase access to cutting-edge research.</p> <p>Evidence-based and best practice curriculums implemented in early care and education programs.</p>	<p>Infant and early childhood mental health topics included in prenatal classes.</p> <p>Care Coordinator position established to integrate medical and mental health services.</p> <p>Convenings hosted for public health nurses and educational home visitors to coordinate services.</p>	<p>Infant and early childhood mental health Resource Directories developed and distributed.</p> <p>Interagency Resource Teams formed to coordinate services.</p> <p>Common Referral Form and Guidelines created to streamline services.</p> <p>Monthly convenings hosted to connect professionals from diverse sectors.</p> <p>Outreach Coordinator position created to link families to services.</p>	<p>Reflective Practice/ Consultation implemented in early care and education settings.</p> <p>Expert consultation provided to medical and mental health professionals.</p> <p>Infant and early childhood mental health incorporated into higher education curriculums.</p>	<p>Public awareness and media campaigns on infant and early childhood mental health initiated.</p> <p>Resource Fairs hosted to provide information on community programs and services.</p> <p>Culturally appropriate training and resources expanded.</p> <p>Over 20,000 IQ magazines and parent & community tip cards focused on infant and early childhood mental health distributed.</p>

work, which began in 2003. Thousands of interviews in dozens of Greater Minnesota communities revealed widespread concern over the growing number of infants and young children with behavioral and emotional challenges, and a severe lack of rural capacity to provide help. Research tracing early social and emotional development to academic success and lifelong well-being only served to raise the stakes. Something needed to be done, and it would take a shared vision, serious funding, and long-term commitment. In 2006, the Minnesota Thrive Initiative was born. Through funding partnerships, \$2.5 million was raised to launch this effort.

The overarching goal of Thrive is to strengthen local support networks to ensure the social and emotional well-being of children ages 0-5, with an emphasis on ages 0-3.

Building Blocks

As a first step, each Minnesota Initiative Foundation selected a pilot site in their region. The six sites serve a total of 28 communities and are diverse in terms of race, ethnicity, rural and urban, and socio-economic status. They represent a large geographic area that traditionally has been underserved in relation to infant and early childhood mental health.

In January 2007, each Foundation began building a grassroots Action Team. Early childhood, higher education, mental health, medical, government, and other sectors came to the table. Action Team Managers were hired to provide local leadership, and each team was guided through a Community Organizing Process.

At the same time, a Statewide Learning Community was established to link the pilot sites. An Infant and Early Childhood Mental Health Agency Partners Group was also created to promote information-sharing and contribute to system-building efforts in Minnesota.

Continued Commitment

In three years, much has been accomplished in the Thrive pilot sites. The six case studies highlighted in this publication are among the more than 100 Capacity-Building Strategies undertaken through Thrive. Each of the pilot sites are exploring ways to sustain their efforts well into the future, and the Minnesota Initiative Foundations continue to provide technical assistance,

Community Organizing Process

- **Build a Thrive Action Team with a cross-section of community members and hire an Action Team Manager.**
- **Offer educational sessions on infant and early childhood mental health and early brain development to ensure a base of knowledge across the Action Team.**
- **Interview community members from a broad range of sectors to determine strengths, opportunities, and perceptions related to infant and early childhood mental health.**
- **Map infant and early childhood mental health programs and services and create a local resource directory.**
- **Hold community dialogues to raise awareness about infant and early childhood mental health.**
- **Create a community vision focused on the healthy social and emotional development of young children.**
- **Develop a strategic action plan and implement Capacity-Building Strategies through task forces.**
- **Sustain efforts over time and keep infant and early childhood mental health in the forefront of community discussion and action.**

training, and financial resources to support infant and early childhood mental health efforts in their respective regions.

There is more work to be done. The need remains to ensure that all families in Minnesota have access to infant and early childhood mental health information, resources, and services. We—all of us—must continue to create a more welcoming environment for young children to explore, learn, and grow.

What Thrive Has Accomplished To Date

The Minnesota Thrive Initiative has strengthened the capacity of Greater Minnesota communities to provide mental health services and resources for very young children and their families. Thrive has achieved a number of key outcomes, including:

Heightened awareness and deepened understanding of young children’s mental health concerns. Parents, early care and education providers, K-12 teachers, service providers, and community members have gained a deeper understanding of what infant and early childhood mental

health is and is not. There is also a greater awareness of what resources are available, and what is still needed, from promotion and prevention to intensive intervention.

Increased community engagement and leadership to promote the healthy social and emotional development of young children. More than 400 Action Team Members across the six sites are designing and implementing creative solutions to increase access to infant and early childhood mental health information and services.

Created a network of professionals. Thrive has linked individuals across a wide range of community sectors who previously did not have a forum to intentionally share their work, learn from one another, and join forces to

Infant and Early Childhood Mental Health Agency Partners Group

Integral to Thrive is the creation of an Infant and Early Childhood Mental Health Agency Partners Group made up of Minnesota Initiative Foundation staff members, the Thrive Action Team Managers, funding partners (listed on page 13), and representatives of the statewide organizations listed to the right. The Foundations hosted partners meetings two to three times per year and were a catalyst for statewide conversation and collaboration among key players in Minnesota’s infant and early childhood mental health efforts. Agency partners supported local Thrive sites in a number of ways such as providing access to evidence-based approaches, training, and other resources. In turn, the Foundations and Thrive pilot sites offered an important rural voice to help inform the ongoing work of these partners.

- Foundations for Success funded by the John S. and James L. Knight Foundation
- Minnesota Child Care Resource & Referral Network
- Minnesota Community Foundation
- Minnesota Department of Health
- Minnesota Department of Health - Minnesota Children with Special Health Needs
- Minnesota Department of Education
- Minnesota Department of Human Services- Children’s Mental Health Division
- Minnesota Head Start Association
- Minnesota Association for Infant & Early Childhood Mental Health, a division of MACMH
- University of Minnesota Center for Early Education and Development

“The Agency Partners meetings provided a unique and valuable opportunity to strengthen statewide relationships among organizations and to share emerging best practices in the field of infant and early childhood mental health.”

Candy Kragthorpe, Director, Minnesota Association for Infant & Early Childhood Mental Health, a division of MACMH

strengthen essential resources and services. Through Thrive, professionals have learned more about each other's roles in relation to infant and early childhood mental health and have established mutually beneficial connections. The collaboration Thrive has facilitated has set a new precedent for working together to integrate and coordinate mental health services.

Increased knowledge and skills in relation to infant and early childhood mental health. Nearly 200 diverse trainings featuring experts in the field have provided communities with leading-edge information close to home. Statewide, nearly 7,200 people have participated. As a result, early care and education professionals, mental health practitioners, medical providers, and others are changing the way they interact with families and young children to support healthy social and emotional development.

Improved community capacity to support the healthy social and emotional development of young children. Thrive sites have implemented over 100 Capacity-Building Strategies to ensure all families have greater access to infant and early childhood mental health information, resources, and services.

Increased inclusion of diverse communities. Thrive sites have intentionally connected with diverse communities. Among other strategies, they have increased native-language training opportunities for Latino child care providers; translated an infant and early childhood mental health resource directory into Spanish; promoted healthy early childhood social-emotional development among parents struggling with chemical dependency issues; and strengthened understanding of the mental health needs of Minnesota's Somali community.

Established connections among existing infant and early childhood mental health efforts. The six Thrive sites have convened regularly to learn from one another. In addition, they have built strong connections with the Agency Partners Group. These learning communities have created a new synergy between infant and early childhood mental health work at the local, regional, and state levels.

Infant and Early Childhood Mental Health Certificate Program

The Foundations provided scholarships to 13 rural Minnesota professionals (two to three from each site) to participate in the first cohort of the two-year University of Minnesota Infant and Early Childhood Mental Health Certificate Program. This program enhances the understanding of infant and early childhood mental health and promotes the skills necessary to support young children's social-emotional development.

Scholarship recipients have made presentations to a wide array of community groups and provided leadership on local initiatives. They have participated in reflective practice with early care and education programs and public health nurses, developed resource guides for parents, and helped prepare federal funding applications.

All 13 graduates increased their knowledge and skills based on cutting-edge research, and have embedded infant and early childhood mental health principles in their professional roles. They will be resources to their communities for years to come.

“The partnership with the Minnesota Initiative Foundations helped us reach out to Greater Minnesota communities to engage front-line workers and practitioners in the first cohort of the program. These participants enriched the discussion during classes and offered a diverse perspective. We were pleased that our program could help build capacity of rural communities to support infant and early childhood mental health.”

Dr. Elizabeth Carlson; Director of Harris Programs & Co-Director of the Infant and Early Childhood Mental Health Program, University of Minnesota



Families meet with the Care Coordinator to plan the next step.

Bemidji-Blackduck-Kelliher: Early Childhood Shared Care Model

Northwest Minnesota Foundation

The Bemidji-Blackduck-Kelliher Thrive Action Team's vision is to create a continuum of care in regards to social and emotional health for all young children and their families in the area. Some pieces of the continuum had been in place, but interviewing key citizens and mapping local resources uncovered significant gaps.

Most children were being screened with the ASQ-SE (Ages and Stages Questionnaires: Social Emotional), but screening was not happening early enough, communication among screening sites was inadequate, and the flow from screening to referral to community-based resources and services was not clearly delineated. The medical community

was not closely involved with either screening or the mental health providers, and uninsured or underinsured children were left out completely. A system needed to be built to bring the medical, mental health, and educational communities together in a comprehensive effort to provide consistent and adequate screening, referrals, and service to families.

The Early Childhood Shared Care Model brings it all together beginning at the MeritCare Clinic, with help from PrimeWest Health insurers and the Thrive Action Team. First, parents complete the ASQ-SE screening tool in audio format while in the clinic waiting room. Scores are sent on to the physician.

Elevated scores indicate a need for a closer look, so those families meet with the Care Coordinator, who listens and learns more to help the family decide on the next step – home visits from Public Health, a diagnostic assessment and therapy, connecting with Head Start or ECFE, or a referral for a special education assessment. The Care Coordinator follows up to be sure the family makes the connection they need. Dr. Read Sulik consults with area pediatricians and a child psychiatrist via video to enhance local care.

Other screening sites also connect with the Care Coordinator, including Early Childhood Screening in the public schools and Head Start. Beltrami Area Service Collaborative houses and employs the Care Coordinator. Thrive funds services for uninsured and underinsured children, as well as the Care Coordinator position until it becomes self-sustaining through user fees.

More infants and toddlers are likely to be screened due to these partnerships, and families and professionals alike will see a clear next step when there is an elevated screening score. Medical and mental health professionals will “share the care” of their young children’s mental health, along with the family, in order to provide the best community-based support in a rural setting.

“The Shared Care Model offers area families the best possible care for their young children, bridging medical and mental health.”

*Becky Secore, Beltrami Area
Service Collaborative*

Duluth-Proctor-Hermantown: Reflective Practice Pilot Project

Northland Foundation



Reflective practice is helping early care and education providers gain effective strategies to support young children's social and emotional development.

In northeastern Minnesota, an increasing number of young children in early care and education programs have displayed behavior issues related to their social and emotional development. In response, the Duluth-Proctor-Hermantown Thrive Action Team has created a Reflective Practice Pilot Project to provide additional support for these children and their families, and early care and education providers. Three Thrive Action Team members who participated in the University of Minnesota Infant and Early Childhood Mental Health Certificate Program have provided leadership for this project.

Reflective practice is a strategy that promotes relationship-based practice among early care and education supervisors and staff. They work together with families, to support the healthy social and emotional development of young children. Reflective practice is a powerful catalyst for long-term change in early care and education.

Throughout the two-year pilot project, each of eight participating sites has received consultation services, training, and peer learning opportunities to help integrate reflective practice into their settings. The sites include three child care centers, two Head Start classrooms, an Early Childhood Special Education classroom, an Early Childhood Family Education program, and a Teen Parent program. All together, 60 early childhood professionals and paraprofessionals serving nearly 600 young children and their families are involved.

Reflective practice incorporates a parallel process of support at multiple levels. At each site, the program supervisor provides one hour per week of individual and/or group reflective supervision to their classroom staff. In turn, program supervisors participate in weekly individual and/or group supervision from a community consultant, who is a licensed psychologist with expertise in early care and education. The community consultant receives supervision

from a credentialed Reflective Practice Consultant from the University of Minnesota Center for Early Education and Development.

As the project has evolved, an exciting partnership formed with the University of Minnesota Duluth (UMD) Early Childhood Studies program to incorporate the strategies of reflective practice into pre-service training for early childhood teachers.

Through another partnership with UMD, a comprehensive evaluation has been developed utilizing the Classroom Assessment Scoring System (CLASS), a standardized method of assessing classroom quality. This work is helping to build the body of research on reflective practice as an evidence-based strategy.

The program supervisors from the eight sites have shared that this project has improved the quality of care for young children and resulted in stronger relationships with families. Reflective practice is transforming their organizations.

“This project has helped our teachers develop deeper and more respectful relationships with one another, which in turn greatly benefits the young children in their care.”

Marilyn Larson, Supervisor of Early Childhood Programs for Duluth Public Schools



A new mom offers warmth and care in her interaction with her baby, so he can feel safe as he is learning.

Freeborn County: Welcome Baby Project

Southern Minnesota Initiative Foundation

The goal of the Welcome Baby project is to provide all parents who give birth in Freeborn County with information on building healthy relationships with their children, and to help parents and caregivers understand their role in promoting healthy social and emotional growth.

Research shows that one important way to help young children develop the social and emotional competencies they need is to ensure that those who are closest to them have the necessary knowledge and emotional support to be good guides. Freeborn County Thrive wanted to provide many opportunities for parents to learn about the importance of

“The Welcome Baby class helps parents increase their understanding of attachment and how this bonding helps their children develop a sense of trust and emotional security that will lead to strong relationships throughout their lives.”

Mary Jo Volkmann, Welcome Baby Facilitator

providing a healthy and nurturing environment for their new baby, and help new parents build their support system by learning and sharing with one another.

Freeborn County Thrive and the Albert Lea Medical Center formed a partnership to weave infant and early childhood mental health information into the educational sessions they offer to parents prenatally. At the 28 week prenatal visit and childbirth education class, DVD segments from “I Am Your Child – The First Years Last Forever” are shown to parents. The NCAST Baby Cues video on feeding is shown during the breastfeeding class to provide information on building a nurturing attachment to the baby. In the hospital after the birth of the baby, parents receive a bag filled with the Daddy Book, a Baby Stages infant and toddler social and emotional development wheel, a booklet on play that promotes healthy social and emotional development, and other useful items.

Each month a Welcome Baby class is offered to parents who have given birth in the previous month. Parents have the opportunity to meet other families with newborns and view the NCAST Baby Cues video that explains and demonstrates how to read a baby’s cues. Parents also make a baby toy for their child while the importance of play is discussed. Each family receives a Snuggli infant carrier and is encouraged to participate in other early childhood programming, too.

In addition families will receive a small gift and parenting information delivered by volunteers at 3, 6, 9, and 12 months during the first year, and every 6 months in subsequent years. The information and gifts will provide practical ways parents can integrate social and emotional development into daily activities with their babies.

Through the Welcome Baby Project parents will be armed with tools and resources to form a healthy and secure attachment with their child.

Greater St. Cloud Area: Professional Learning Community

Initiative Foundation

The Greater St. Cloud Area Thrive established its Professional Learning Community (PLC) to expand the skills and capacity of college students, faculty, and practitioners throughout the region. The PLC's goals are to:

- Create an early childhood mental health learning community through St. Cloud State University, St. Cloud Technical College, and area agencies across the disciplines of Social Work, Nursing, Special Education, Communication Disorders Sciences, Child and Family Studies, and Community Psychology/Marriage & Family Therapy.
- Provide specialized training in Infant Mental Health (IMH) utilizing state and national experts.
- Increase communication and collaboration among members of participating disciplines.
- Integrate new IMH knowledge and inter-disciplinary perspectives into current pre-service training for professionals.
- Revise current course work and add new course options to meet competency requirements for the Minnesota IMH endorsement.
- Facilitate collaboration between higher education and area practitioners to provide field placements and reflective consultation opportunities in IMH.

A cohort of practitioners serves as field placement and reflective practice supervisors, and a speakers' bureau has been developed to provide a parent perspective for students in these departments. Recent activities include a three-credit upper division IMH course with presentations by Anne Gearity on Developmental Repair, Dr. Troy Hansen on Integrated Medical/Mental Health, and Huda Farah on Mental Health in the Somali Culture.

While in St. Cloud, Huda Farah, director of the Center for Inclusive Childcare, met with students, practitioners, and Somali parents of young children to discuss early childhood mental health. The Thrive Action Team is also working with the St. Cloud Area Somali Women's Association to conduct



The Greater St. Cloud Area Thrive team is reaching out to serve children and families across all cultures.

focus groups with Somali parents to learn about ways that everyone can support the healthy social and emotional development of Somali children and their families.

According to Dr. Maria D. Chavez, Ed.D., founder of the Family Development Program at the University of New Mexico, "Families need to feel accepted and valued, and they need to see their culture or language reflected in the program's environment and activities."

With greater inter-agency and inter-disciplinary communication and increased educational opportunities, parents in the Greater St. Cloud area are better able to access quality early childhood mental health care. And, they can expect the professionals serving them will have a solid awareness of early childhood mental health and available support systems.

"This Professional Learning Community was a powerful staff-development opportunity which helped me grow in my understanding of the mental health field and allowed me to network with professionals from many different programs."

*Kathleen Ofstedal Ed.D.
Child and Family Studies Department,
St. Cloud State University*



Emergency First Responders can leave a lasting positive impact on children in traumatic situations.

McLeod County: Early Care And Education Training Project

Southwest Initiative Foundation

focused on child care providers and early care professionals, but some included advanced information targeted at community professionals from medical, social services, law enforcement, first responders, and mental health audiences. Examples of training efforts include: DC 0-3, Infant Mental Health 101, When to Be Concerned, Six Keys, and several trainings offered in Spanish for the growing Latino parent and provider sector.

Most recently, Thrive co-sponsored an educational opportunity for area medical and emergency First Responders called, “Helping Children Cope with Traumatic Situations.” First Responders are in a unique position to make a positive and lasting change in the lives of children who experience traumatic events. Participants learned strategies to reduce the traumatic impact for children through on-the-scene interventions. In addition, the importance of providing families with local information to access mental health providers and other local outreach organizations was emphasized. The McLeod County Thrive team knew that its goal was accomplished when one local EMS participant stated, “I will now take a more ‘overall’ look at a scene of an incident where children are involved. I hadn’t considered things from this perspective before.”

Research indicates that the most effective strategies for high-impact results are those that focus on early intervention and meet the unique needs of targeted audiences. The Early Care and Education Training Project has begun to bridge the gap between community resource providers and those most likely to see emerging developmental or mental health challenges in young children. These relationships are leading to improved screening, referral systems, and child care consultation models that will have a positive impact on children in McLeod County well into the future.

When looking at the needs and resources of southwestern Minnesota communities, the McLeod County Thrive Team identified a need for training geared towards professionals and family members who care for young children and for building relationships with these groups to better connect them to available resources.

The team supported a wide array of educational opportunities regarding infant and early childhood mental health topics that reached across the spectrum of care – from prevention to intervention. These trainings primarily

“Give the people who do the work the information they need to do it more effectively, and it changes them forever. This kind of subtle system change stays in a community long term and impacts children for years to come. It’s a small investment with huge returns.”

*Nancy Mellesmoen, Local Migrant Head Start
Director and Thrive Action Team Member*

Pope County: Incredible Years Parenting Program

West Central Initiative



Parents in the Incredible Years receive coaching while children participate in group play, reading, and other activities.

How can a county help parents who are stressed to the limit trying to make ends meet and care for their children? Many times that stress can lead to short fuses and unwise, even harmful, responses to their children's demands and behavior.

Pope County Thrive is having success with its Incredible Years Parent Program, a nationally recognized program developed by the University of Washington. It increases positive, nurturing parenting to strengthen families and support young children's healthy social and emotional development.

Incredible Years parents attend 11 intensive weekly group sessions and receive more than 12 hours of in-home coaching. They learn about child-directed play skills, social and emotional coaching, establishing rules, predictable routines and promoting responsibility, setting respectful limits and following through, and helping children learn to self regulate. Children learn conflict management and calming skills while participating in cooperative play, reading, and learning activities.

Testing indicates that both parents and children are benefiting. The parents take a pre- and post-test to measure the stress levels upon entry and completion from the Incredible Years program. One couple indicated a drop of 84 points in their pre- and post-tests. "The parenting program has increased my confidence in parenting, as well as decreased my anxiety that I wasn't doing a good enough job as a parent," one parent said.

Cathy Kinney, Pope County's Early Childhood Family Education (ECFE) coordinator, has noticed some Incredible Years families attending ECFE classes who have never been involved before. One parent is sharing the knowledge she learned through the Incredible Years program. "Though the parent deals with adult mental health issues, she has gained enough confidence to be able to share and says she is more

emotionally connected to her child due to what she has learned," Cathy says. "Having the tie-in with ECFE gives her continued support as she raises her child using what she learned in the Incredible Years sessions while gaining new parenting skills through ECFE."

That ECFE/Thrive tie continues to be strengthened. Two Pope County Thrive members attended an Incredible Years Train-the-Trainer workshop. One is an ECFE parent educator and the other an ECFE child educator and birth-to-three special education teacher. Whenever possible they infuse what they have learned into their present work. Their hope is to teach others so that the Incredible Years curriculum can be implemented further in ECFE, Head Start, Child Care and preschool programs in Pope County and the surrounding area.

"In an earlier session of Incredible Years, the children were in a child care setting with little structure. A teacher observed that we were missing an opportunity to provide learning and support for them. So, a class was developed by early childhood education staff to further enhance family skills."

Jeannie Pederson, Thrive Action Team Manager

How Thrive Has Changed The Way Business Is Done

The Minnesota Thrive Initiative is contributing to change on the local level by strengthening the links within community systems and improving the way professionals and families work together to support the healthy social and emotional development of children ages 0-5. Thrive has transformed communities. A strong continuum of care—from promotion and prevention to intensive interventions—is now in place in participating communities. Relationship-building across sectors is at the heart of Thrive and its efforts to help change the way business is done.

The momentum and relationships established through Thrive will provide ongoing benefit to communities. Programs and changes are being embedded into local infrastructures. Openness to new ways of working together, coupled with creativity and innovation, is driving systems change. For years to come, these initiatives will help young children thrive and have a healthy life of learning and achieving their full potential.

“The Minnesota Thrive Initiative is what systems-building looks like on the ground. The six Action Teams have established innovative strategies that are increasing knowledge and skills, resulting in more effective programs and better service coordination to promote the healthy social and emotional development of infants, toddlers, and preschoolers.”

Jane Kretzmann, Senior Program Officer of the Minnesota Community Foundation’s Project for Babies and former Senior Program Officer for the Minnesota Thrive Initiative at Bush Foundation

Community Transformation

- Comprehensive screening, coordination, and referral systems are now available for families with young children who have mental health questions and concerns.
- Clinicians and mental health providers are working together to share information, exchange ideas, offer training, and better coordinate services.
- Social and emotional development is incorporated into prenatal classes at hospitals and clinics.
- Culturally appropriate training, services, and other resources are available to diverse populations, especially those underserved in the past.
- Multidisciplinary infant and early childhood mental health partnerships are coordinating programs and services that benefit young children, their families, and caregivers.
- Faculty from higher education institutions representing a variety of disciplines are now collaborating with community agencies to integrate infant and early childhood mental health into career preparation curriculums.
- Reflective Practice is included in the curriculum for teacher training programs in early childhood.
- A training curriculum is designed to help First Responders better support young children in traumatic situations.

Lessons Learned

Make relationship-building a priority for all community-based efforts. Participation in community dialogues allows local citizens from diverse sectors to get to know one another, learn about common concerns, and build the connections necessary to work together.

Build broad-based community support. Commitment and support from a full range of partners (medical, mental health, K-12, early care and education, higher education, law enforcement, social services, etc.) generates energy and spurs local leadership to strengthen resources to promote the healthy social and emotional development of young children.

Guide communities through a systematic planning process. This process builds awareness about local perceptions, issues, and opportunities; creates a shared vision and priorities;

establishes a cohesive network of partners; and motivates the participants to make lasting change.

Use multiple approaches to make ongoing education and training widely accessible. Interactive training sessions deepen participants' knowledge and understanding of infant and early childhood mental health, stimulate the adoption of new practices, and contribute to the development of networking relationships.

Create relationships between grassroots efforts and statewide agencies. Regular meetings facilitate information-sharing, foster collaboration, and ensure efficiency in making infant and early childhood mental health resources and services available for young children and their families throughout the state.

Reach out to underrepresented populations. Seek input from diverse populations to develop culturally appropriate infant and early childhood mental health services.

Funding Partners

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Bush Foundation

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Foundation for Children



Mardag Foundation
A family legacy. A partner for Minnesota.



The Sheltering Arms
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MAKING MINNESOTA GREATER

www.greaterminnesota.net

For more information about the Minnesota Thrive Initiative,
or other Greater Minnesota early childhood efforts, please contact one of
the six Minnesota Initiative Foundations listed below.

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