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#### **ABSTRACT**

This report describes the initial plan, participants, and evaluation of Saint Paul (Minnesota) Children's Initiative (SPCI) during 1993. The SPCI is a family-community program to improve child health, child development, school performance, and to enhance family functioning through formal and informal support systems in Saint Paul/Ramsey county. At 118 meetings, participating parents were asked to identify possible challenges and solutions to improved service delivery. The results indicated several challenges, including poor communication; financial and economic concerns for families; barriers to receiving service caused by the lack of child care and transportation; and difficulty with system access. The suggested priority solutions to the problems included locating family centers and services in neighborhoods; improving communication and information; and coordinating or integrating services. The report contains seven attachments, including a voluntary parent information form, meeting hand-outs and training materials, an SPCI parent meeting response form and problem summary sheet, and an SPCI parent solution summary sheet. (AP)



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# FINAL REPORT:

# THE 1993 PARENT MEETINGS FOR PLANNING THE SAINT PAUL/RAMSEY COUNTY CHILDREN'S INITIATIVE

November, 1993

Edited by

Elizabeth J. Sandell

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#### SUMMARY

The Saint Paul Children's Initiative is about families and communities working together to improve child health, child development, school performance, and family functioning. . . to create more friendly, more comfortable, more easily identified gateways open into the formal and informal support systems.

Parents identified possible challenges and solutions to improved service delivery at 118 meetings held throughout Saint Paul between May and November, 1993. The 1187 parents of young children represented all neighborhoods across the City of Saint Paul. Of the parents who responded to a voluntary questionnaire, 44% were people of color and 35% had annual family incomes less than \$10,000.

### Challenges

- poor communication.
- financial/economic concerns for families.
- creating or ignoring barriers to receiving services (e.g., lack of child care, transportation, education, health care).
- difficulty with systems access (e.g., eligibility, rules, forms, and paperwork).
- difficulty raising children.
- isolation from positive support in the parenting role.
- · poor attitude and lack of respect by workers.

#### Solutions

- physically locating services in neighborhoods, perhaps at visible family centers.
- promoting wellness and preventing problems (e.g., parent education/support programs).
- · improved communication and information systems.
- reducing or eliminating barriers to receiving services (e.g., funding child care, transportation, etc.).
- coordinating and integrating services.
- improved service by family workers who have much in common with community families.



#### INTRODUCTION I.

In late December, 1992, the State of Minnesota was selected by The Pew Charitable Trusts as one of the five finalist states to participate in strategic planning for a Children's Initiative. The City of Saint Paul, Minnesota, along with Becker and Cass Counties, were identified as pilot sites where initial planning would take place. Minnesota submitted a proposal to The Trusts on November 8, 1993, that incorporated the work of the three pilot sites and the state. In March, 1994, three states will be selected by The Trusts to participate in a nine-year project.

There are four main outcomes which the Children's Initiative seeks to implement: 1. Improved child health: improved birth outcomes; reduced incidence of preventable disease; improved overall physical and mental status.

2. Împroved child development: increased prevalence of achieving normal milestones in cognitive,

emotional, and social development.

3. Reduced barriers to adequate school performance: increased number of children entering school with the requisite cognitive and social skills; reduced need for remediation services; reduced barriers to attendance and graduation progression.

4. Improved family functioning that promotes a child's health and development: increased family

stability; adequate functioning; reduced incidence of abuse and neglect.

#### THE SAINT PAUL CHILDREN'S INITIATIVE INITIAL PLANNING II.

In early 1993, a Saint Paul Advisory Committee gave the responsibility for designing a planning process to a collaborative team that included representatives from the city, Ramsey County Human Services, the Saint Paul Public Schools, United Way of the Saint Paul Area, the Wilder Foundation, and a community-based service agency.

The Saint Paul Children's Initiative (SPCI) Planning Team was given the charge to initiate a process that would go beyond preparation of a grant proposal. Participation in planning for the Minnesota response to The Pew Charitable Trusts became a catalyst for a process designed to understand the needs of children and families in the City of Saint Paul and build a response to those needs - whether or not Minnesota is selected as one of the states to participate in The Pew Charitable Trusts Initiative.

The challenge was clear. Throughout the City, there are quality services for children and families. Statistics indicate that the quality of children's lives in the City are inadequate. The social service, education and health systems are struggling to meet more and more difficult needs. Resources are directed more and more to responding to families in deep crisis.

Some of the goals of the SPCI planning process included: (1) To identify the needs of families throughout the city and provide a significant, on-going role for parents in shaping what the Initiative will become in Saint Paul; (2) To develop a plan that builds on the existing strengths of services for children and families; and (3) To plan for major system change that will more effectively provide the support children and families need by reconfiguring current systems.

It was critical that parents have major input from the beginning. Consequently, the SPCI simultaneously engaged parents and organized other necessary planning. The work of parents and professionals was intertwined in ways which respect the expertise of both groups.

Rather than convene focus groups or distribute surveys to parents, the SPCI Planning Team implemented a process that engaed almost 1200 parents in small meetings across the city. The parents gave input into SPCI initial planning, and parents with a continuing interest in the SPCI were identified. Some of these parents, along with others, will continue to contribute to the



design of the Initiative, participate in implementation, and take leadership roles in holding the entire process accountable to families.

Fifty parents and direct-service workers attended a meeting on April 29, 1993. Nearly half of the participants were people of color. People received more information about the SPCI, gave response and input similar to what would be asked of parents in future meetings, and agreed to convene meetings of parents they know. Training sessions were held for those who volunteered to facilitate parent meetings.

Between May 15 and June 4, 1993, ninety-nine meetings were held with parents of young children. The meetings were held quickly, using networks already in place, such as Early Childhood Family Education, Early Childhood Special Education, and the Office of Parent, Community, and Volunteer Involvement through the Saint Paul Public Schools, as well as community organizations and agencies. At a meeting on June 15, 1993, people who had facilitated parent meetings gave feedback. An additional 19 meetings were held throughout the summer and early fall of 1993. This meant that a total of one hundred eighteen meetings were held. The responses of these parents are summarized in this paper.

Parents who attended these meetings talked about problems which children and parents have in Saint Paul and the barriers they face when they reach out for help. They also talked about possible solutions that could be developed, including neighborhood centers for families, family support workers, and parent involvement in decision making. People who participated in these meetings were invited to help synthesize and report the responses.

The parents came to the meetings without having complete knowledge about the SPCI. The questions considered at the meetings were general. Therefore, the responses can only be considered to suggest trends. It is essential that further input and reflection be provided. This information is not adequate for planning specific neighborhood centers, for example. Further meetings will be held in order to build a cadre of parents with knowledge of and investment in the SPCI. Continuing involvement of parents will be built into planning community-level service strategies.

#### IV. PARTICIPANTS

The parent participants included young families in school district programs in every neighborhood in the City. Parents represented families from low-income apartments, teen parents, a mother's support group for women who have lived in a battered women's shelter, parents of children in child care centers, parents participating in programs at family resource centers, etc. In some cases, the contacts were conducted on a one-to-one basis in order to deal with economic, cultural and language barriers. Included were middle class and poor parents, Hmong and other Asian parents, African Americans, Latinos/Chicanos and Euro-Americans. Parents were included from every neighborhood in the city, from a wide range of economic levels. Over 40% were people of color.

There were 1187 parents who participated in the 118 SPCI parent meetings. Each parent was asked to complete a Voluntary Participant Information Form (see Attachment A), which reported their neighborhood of residence, gender, age, ethnic/racial background, level of family income, and size of household. This information was voluntary and anonymous. Some parents chose not to complete the Voluntary Participant Information Form.



Parent participants in the meetings represented all neighborhoods across the City of Saint Paul. Table I shows the distribution of participants among 17 neighborhoods.

Table I

Neighborhood of Residence of Respondents in SPCI Parent Meetings

	Number of	Percent of
Neighborhood of Residence	Respondents	Respondants
Como	38	4%
Dayton's Bluff	42	4%
Downtown	2	< 1%
Greater East Side	120	12%
Groveland-Macalester	61	6%
Hamline/Midway	56	6%
Highland	28	3%
Merriam Park/Lexington/Hamline	84	9%
North End	85	9%
Payne Phalen	129	13%
St. Anthony	6	1%
Summit Hill .	28	3%
Summit University	39	4%
Sunray/Battle Creek/Highwood	55	6%
Thomas Dale	69	7%
West Seventh	28	3%
Westside	96	10%
Total responding with information	966	

Parents who participated in the SPCI parent meetings represented a variety of ethnic backgrounds from the City of Saint Paul. The goal was to reach parents of each ethnic group in proportion t otheir children's population in the City. Children of color are a higher percentage of the city's child population than people of color are overall. In the 1990 census, the percent of the overall population and the percent of children respectively was: African Americans, 7% and 11%; Asians, 7% and 14%; Hispanics, 4% and 6%; Euro-Americans, 79% and 63%; Native Americans, 1% and 2%.

Table II

Ethnic Background of Respondents in SPCI Parent Meetings

Ethnic Background	Number of Respondants	Percent of Respondants
African American	102	10%
Asian	229	22%
Native American	55	5%
Hispanic	51	5%
Euro-American	574	56%
Biracial	18	2%
Total responding with information	1029	<u> </u>



Parents who participated in the first round of SPCI parent meetings represented a variety of income levels from the city of Saint Paul. Table III shows the distribution of 925 participants who responded to the question about their family income level.

Table III
Family Income Level of Respondents in SPCI Parent Meetings

Family Income Level	Number of Respondents	Percent of Respondants
Less than \$10,000	326	35%
\$10,000 to 14,999	70	8%
\$15,000 to 19,999	42	5%
\$20,000 to 24,999	91	10%
\$25,000 to 34,999	132	14% 29%
More than \$35,000	925	2970
Total responding with information	1923	<u> </u>

## V. DATA COLLECTION PROCESS

People who participated in the April 29 meeting and who agreed to lead parent meetings, as well as staff members of early childhood school district programs, were given training in group facilitation and how to approach a parent meeting for the SPCI. Training materials, SPCI handouts used at the meetings, and response forms for recording the meeting results are included in Attachment B.

## VI. CONTENT ANALYSIS PROCESS

Summary reports from the surveys and focus groups were sorted by Saint Paul neighborhood. On July 22, 1993, at a meeting of 13 persons, including parents and agency staff members, each person reviewed all the meeting summary reports for one neighborhood. Summaries were analyzed for themes in problems and solutions. The content analysis process followed these steps:

- 1. Review codes for themes in problems and solutions (see Attachments C and D).
- 2. On the Report Sheet for each meeting (see Attachment E), notations were made at the right-hand edge of the page each time a theme was mentioned in the report. Frequently, one sentence included comments that was coded under more than one theme. When responses did not fit into any theme category, the group defined a new theme.
- 3. On the Summary Sheets (see Attachment F and G), entries were made about each meeting's date and themes identified by participants in that meeting. An entry was made for each theme identified. However, there was no way to weight themes which were mentioned repeatedly in the same meeting. Each theme was only coded once for each meeting.
- 4. Suggestions for good ideas were noted on a separate tablet of paper.



- 5. Suggestions for characteristics of family centers and of family workers were collected separately.
- 6. A similar process was used to analyze the results of the additional meetings held in the summer and fall of 1993. The two sets of data were then combined for the final results reported in this paper.
- 7. After all meeting Report Sheets were reviewed and entered on the Neighborhood Summary Sheet, totals on the Neighborhood Summary Sheet were calculated.

#### VII. RESULTS

#### Problems Identified

The priority problem themes which were identified citywide are summarized in Table IV. Each theme is listed by rank according to the number of parent meetings which identified that problem.

Table IV

Priority Problem Themes Identified Citywide in SPCI Parent Meetings

Priority Problem Theme by Rank	Number of Meetings
1. Communication/Information	71
2. Financial/Economic Concerns	65
3. Child Care	62
4. Transportation	51
5. Systems Access (eligibility, rules)	46
5. Crime/Violence/Abuse	46
7. Education	43
8. Health Care	42
9. Difficulty Raising Children	40
10. Isolation	37
11. Lack of Respect	36
12. Systems Access (forms, paperwork)	35

Communication/information problems involved concerns such as the inability to find the appropriate services to meet a particular family need; inadequate or incorrect information provided by agency personnel; and poor marketing of services already available.

<u>Financial and economic concerns</u> were overriding issues for parents in large numbers of the meetings. Parents emphasized how difficult it was to deal with any other type of problem when the financial situation is unsettled for the family.

Child care issues included finding quality, affordable, and consistent child care providers. Parents reported difficulty in arranging temporary child care for sick children or when regular providers have vacations or sick leave.



Transportation barriers included lack of family vehicle transport; distance from or inability to afford public transportation; inconvenience when travelling on public transportation with several very young children; and lack of specialized transportation for the elderly or for people with physical challenges.

System access around issues of eligibility and rules summarized concerns for families who may have incomes which are too high to be eligible for services but who really cannot afford to pay for the services. Additionally, comments noted that often resources are reserved for expensive services for families in crisis, when resources would make a larger difference when applied to preventive services.

<u>Crime/violence/abuse issues</u> encompassed situations in the home, in the neighborhood, and in schools. Teen-aged gangs and family violence were mentioned as concerns.

Concerns with the <u>education system</u> involved two aspects. First was the need for more educational programs, such as prekindergarten education, parenting education, parent involvement, extended day programs, neighborhood schools, language interpreters, English as a Second Language and General Educational Degree programs, and job skill classes. Another was concerns with the current system, such as student discipline, racial harassment, and siblings assigned to different schools.

Health care issues included unmet health care, dental care, and mental health needs, usually due to economic or system access concerns. In addition, concerns involved finding quality, affordable, respectful, and consistent health care providers.

<u>Difficulty raising children</u> was sometimes described as unsupervised or undisciplined children. Low English proficient parents reported difficulty supervising children who learn English, become more independent, and seem outside the influence of their parents. Other parents mentioned difficulties with children with special needs or due to financial distress.

Isolation as an issue was raised by parents in all economic levels. It included a lack of community and family networks for some families. Suportive networks did not mean, necessarily, economic support. Rather, the comments indicated that parents sought encouraging social connections with others with whom they had things in common (e.g., neighborhood, children of similar ages, etc.). Another kind of isolation reported by parents was physical isolation imposed by difficult financial conditions which resulted in lack of transportation, child care, or telephone services. Isolation was also experienced by families with low English proficiency or other difficult family conditions.

Many parents talked about a perceived <u>lack of respect</u> for them by workers in health, education and social service programs. They report a sense of prejudice and irritation by some workers they encounter.

System access reportedly is inhibited by the level of paperwork and bureaucracy encountered by families. Parents mentioned that many agencies require similar information but on different forms, so that families spend much effort on providing information. This is especially problematic to parents who are not literate in English.



### Solutions Suggested

The priority solution themes which were identified citywide are summarized in Table V. Each theme is listed by rank according to the number of parent meetings which identified that solution.

Table V
Priority Solution Themes Identified Citywide in SPCI Parent Meetings

Priority Solution Theme by Rank	Number of Meetings
1. Family Centers	65
2. Services Physically Located in Neighborhoods	43
3. Improved Communications/Information	41
4. Parent Education/Support Programs	39
5. Family Service Workers	38
6. Education	36
7. Coordinated/Integrated Services	31
8. Parent/Neighborhood Boards	29
8. Child Care Funding	29
10. Increased Respect	27
11. Health Care	27

Parents at 65 out of 118 meetings agreed that <u>family centers</u> were among the solutions which would help their families. In a second scan of parent meeting summaries, it was discovered that many meeting response forms noted that parents were "enthusiastic" or "in favor or" family centers, even though original reviewers did not code these comments as "family centers."

The desirability of <u>locating services within neighborhoods</u> throughout the city was seen as critical since so many families lack transportation or have difficulty transporting young children. Neighborhood locations make services more accessible and more responsive to the community. Services can be provided "right where families are."

Suggestions about <u>improved communications/information</u> included creation of a director, computer data base, or telephone service to coordinate information about available services. Reducing or eliminating paperwork through shared intake systems at service agencies was a common theme.

The benefit of <u>parent education/support programs</u> was described repeatedly in terms of education, support, and referral. Some parents suggested more parent education for all parents, as well as specifically for adolescent parents, fathers, and parents of school-age children.

<u>Family service workers</u> were perceived in various ways. In general, parents imagined them as individuals who would be familiar with the neighborhoods and services, most likely through actually living in the neighborhoods and actually having experience as a user of services.



Suggestions also emphasized the importance of having family service workers who represent the ethnic background of the families in the neighborhoods. In addition, these characteristics were listed: provide for worker autonomy, maintain confidentiality, be friendly, and be trusting and trustworthy.

Suggestions about the <u>education system</u> included re-examining the benefits of neighborhood schools. Parents specifically mentioned the need for teaching children, parents, and service providers skills in leadership, problem solving and conflict resolution. Parent and community involvement in the schools was recommended. Other ideas included: making the system and/or classroom more flexible to meet needs of specific families or children and enabling siblings to attend the same school.

The need for <u>coordinated/integrated services</u> was reflected in comments about how confusing and energy-wasting it is for families to go from one agency to another to find services. Coordination was mentioned as avoiding duplication of applications and services. Integration was seen as improved service delivery from the families' perspective.

Parent/neighborhood boards were viewed favorably by most parent groups. They are a mechanism to allow as much decision-making as possible at the most local level. As with locating services in neighborhoods, parent/neighborhood boards can help ensure that services are more accessible and more responsive to the community.

Solutions relating to <u>child care funding</u> involved, simply, more funding and better referral. Affordable or free child care would help families gain access to many other services (e.g., literacy classes) as well as help parents maintain employment and, therefore, economic stability.

Parents who indicated the need for <u>increased respect</u> referred to a desire to be treated in a non-judgemental fashion by workers in the health, education and social service systems.

Recommendations about <u>health care</u> included improved pre-natal care and follow-up on newborns, reducing eligibility restrictions for health care, enhancing availability of immunization services, and expanding service hours at clinics.

# VIII. RESPONSE TO CHILDREN'S INITIATIVE IDEAS

All three ideas suggested for discussion as part of the Saint Paul Children's Initiative received positive responses: Family Centers, Family Workers, and Parent/Neighborhood Boards. There was strong endorsement for Family Centers by respondents from all neighborhoods. No group reported a negative reaction to these ideas.

When parents talked about family centers they said: Family centers should be in the neighborhood; open evening and Saturday hours; open to all families without eligibility requirements; have a welcoming and non-judgemental atmosphere; have activities for parents and children, as well as access to social services; have support classes and groups for parents; welcome and engage parents from all cultural groups by having a diverse staff knowledgeable about cultures in the area; have child care on site; and have parents involved in decision-making.

When parents talked about qualities the workers at family centers should have they said: Workers should be from the neighborhood if possible; multicultural; accepting, non-judgemental and understanding; culturally sensitive; well-trained and knowledgeable about resources for families; communicate well and be good listeners; and enjoy the work. Many parents said that formal education is less important for these workers than finding the right person and giving training specific to the job.



### IX. OBSERVATIONS AND LIMITATIONS

- 1. In general, parents identified a greater number of problems compared to the number of solutions. This may be due to the fact that families live with the problems day-to-day, and if families could identify solutions, perhaps the problems would no longer be problems.
- 2. The Health Care system and the Educational system are reported both as problems and as solutions. The frequency with which these systems were mentioned may be because most of the groups were conducted through school and health care networks.
- 3. Some comments which were not coded indicated that there is a great deal of scepticism among parents and other community members about what is perceived as "just another coordinating or planning effort" or "adding another layer of bureaucracy" on top of what already exists. It appears to be important that SPCI leaders and facilitators work hard to demonstrate the genuineness of this Initiative.
- 4. Responses were coded by one person at a group session which involved 12 volunteers working together. However, there were not enough people and there was not enough time to double check the codes in order to verify the label. With additional people, the responses could have been coded by two people working at the same time. In this way, they could have discussed the codes assigned and verified the other's work. With additional time, the code could have been verified by a second person reviewing the work.
- 5. There may have been many other ideas discussed at the parent meetings. However, if the group leader did not make notes on the meeting summary sheet, these concerns were not included in this report.
- 6. The responses can only be considered to suggest trends. This was the first exposure of a broad range of parents to the Initiative. The parents came to the meetings without having complete knowledge about the SPCI, and the questions considered at the meetings were general. It is essential that further input and reflection be provided.
- 7. This information is not adequate for planning specific neighborhood centers, for example. Further meetings will be held in order to build a cadre of parents with knowledge of and investment in the SPCI.

#### X. NEXT STEPS

- 1. As parent meetings were being held, the Planning Team also asked over 180 front line workers to respond to surveys around some of the same issues.
- 2. Two data bases have been created with parent meeting information: (1) A record of all the meetings held, including the date, sponsor, facilitator, number attended and demographic information from the voluntary participant forms completed for the meeting; and (2) A mailing list of all the parents who indicated they wanted to continue to receive information about the SPCI and/or be invited to future meetings.
- 3. Information from the parent meetings and front line worker surveys has been and will continue to be used as a critical element of ongoing planning.
- 4. A follow-up mailing is being prepared for all parents who participated and indicated that they wanted to continue to receive more information about the SPCI.



- 5. As community-level planning and implementation proceeds, parents will be contacted for continuing involvement for input into shaping the governance and service delivery strategies. Task Teams will be expanded to include additional Task Teams and additional representatives. Task Teams will be formed in areas such as: Implementation Planning, Governance, Finance, Service Delivery, Health Services Issues, Information Management, Evaluation, Training/Technical Assistance, Front-line Workers, and Stakeholders. Expanded memberships will mean that each Task Team will include representatives of these groups, with consistent commitment to cultural and racial diversity: parents and community members, Family Center staff members, neighborhood centers, staff members from major systems, front-line workers and service providers, business community, hospitals and health clinics, not-for-profit sector.
- 6. Family Centers and satellite sites will continue to involve diverse representation of parents and community members in planning and designing each neighborhood cluster. Sensitivity to issues of language and culture will be central in hiring and training Family Center workers, in developing and delivering technical assistance, and in all stages of evaluation.

#### XI. CONCLUSION

Some of the goals of the SPCI planning process included: (1) To identify the needs of families throughout the city and provide a significant, on-going role for parents in shaping what the Initiative will become in Saint Paul; (2) To develop a plan that builds on the existing strengths of services for children and families; and (3) To plan for major system change that will more effectively provide the support children and families need by reconfiguring current systems.

Over 1100 parents were involved in the Saint Paul Children's Initiative first round of parent meetings. This is a beginning ... again. As one parent wrote, "Part of me is optimistic about what can be done. Part of me feels downtrodden about it. I've gotten to the point where the only change I'm interested in is radical change."



# ATTACHMENT A PARENT VOLUNTARY INFORMATION FORM

# St. Paul Children's Initiative ... Voluntary Participant Information

It is important that the Initiative reach a broad cross section of St. Paul families. By filling out these forms, you help us see who we have contacted. Filling out the form is entirely voluntary. You are not required to give any information.

Where do you live?	Please check the							
f in St. Paul, check neighborhood:	appropriate items:							
Como	Sex							
Dayton's Blluff	FemaleMale							
Downtown	Age Under 1941 - 50							
Greater East Side	19 - 3051 - 60							
Groveland/Macalester	31 - 40Over 60							
Hamline/Midway	ETHNIC/RACIAL BACKGROUND							
Highland	African American							
Merriam Pk/Lex/Hamline	Asian							
North End	Native American							
Payne-Phalen	Hispanic							
St. Anthony	Euro American							
Summit Hill	Biracial/Multiracial							
Summit/University	FAMILY INCOME							
Sunray/Battle Creek/Highwood	Less than 10,000							
Thomas/Dale	10,000 - 14,999							
West Seventh	15,000 - 19,999							
West Side	20,000 - 24,999							
west side	25,000 – 34,999							
If outside St. Paul, which city?	Over 35,000  Number of people in your household:							
ar oddiad St. 1 and, waster y	Number of people in your nouscholds							
IF YOU ARE A PARENT, PLEAS	SE INDICATE:							
How many children do you have?	age group:							



# SPCI PARENTS PARTICIPANT FORM

Meeting Date			
Name			Control of the Contro
Organization which sp	oonsored meeting		<u> </u>
I ATTENDED A PAF	RENT MEETING FOR	R THE SAINT PAUL C	HILDREN'S INITIATIVE.
I WOULD LIKE TO	BE CONTACTED A	OUT THE NEXT PARI	ENTS' MEETING.
YES	NO	<del></del>	
I AM INTERESTED OPPORTUNITIES F	IN THE INITIATIVE OR CONTINUING IN	AND WOUI D LIKE TO VOLVEMENT.	BE KEPT INFORMED ABOUT
YES	NO		
What did you like ab	out the meeting you att	tended?	
Suggestions for chan	ge:		
Comments:			



#### ATTACHMENT B

# MEETING HAND-OUTS AND TRAINING MATERIALS

# THE SAINT PAUL CHILDREN'S INITIATIVE OVERVIEW

# WHAT IS THE SAINT PAUL CHILDREN'S INITIATIVE?

The Initiative is beginning a long-term effort to build a better support system for children and families. The goal is healthier children and stronger families.

# HOW DID THE SAINT PAUL CHILDREN'S INITIATIVE GET STARTED?

Minnesota was one of five states chosen to develop a proposal to participate in a children and family project with a large national foundation, The Pew Charitable Trusts. The proposal will be submitted in November 1993 and three of the states will be chosen to be part of a 10-year program with the foundation. In Minnesota, the City of Saint Paul, Becker County and Cass County are initial sites developing plans as part of the protect. If Minnesota is one of the states involved in the 10-year program, similar planning will be done in counties across the state.

### WHAT IS HAPPENING NOW?

An initial planning phase has begun that will evaluate how support systems for St. Paul families work now -- and will begin to shape new directions. Although the planning will contribute to the proposal to The Pew Charitable Trusts, the process is organized around the needs of the parents and children of the City of Saint Paul and will be valuable work whether or not Minnesota is eventually one of the states selected by The Pew Charitable Trusts.

### HOW ARE PARENTS INVOLVED?

Parents are part of the plan right from the beginning. Meetings are being held in neighborhoods across the city where parents will have a chance to talk about the problems the Initiative is starting to address, as well as possible solutions. They will be asked to respond, make additions and suggestions and prioritize. Their work will help shape what comes next. Parents who have been involved will hear about the results of the first phase of planning and the proposals for next steps. And increasing numbers of parents throughout the City will be involved in all phases of planning and implementation.



# SOME OF THE PROBLEMS THE INITIATIVE WILL TRY TO ADDRESS:

FAMILIES ARE ISOLATED. Families can get support from each other, but many parents feel alone and don't know how to change that.

IT IS OFTEN CONFUSING AND DIFFICULT TO FIND HELP. When parents and children do need to reach out for help there are many problems.

\* They don't know where to go to find answers and often feel confused and shuffled from place to

\* Programs may not be located where families need them.

\* Language and cultural issues may make access more difficult.

\* Parents often are made to feel intimidated and labeled.

\* Families have to continually fill out new forms and make the rounds of different offices to stay qualified for the help they need.

\* Often programs can relate to a specific kind of problem or relate only to one child or only to a parent and there is no one to talk to a family as a whole and understand their needs.

IF FAMILIES COULD GET SUPPORT SOONER, MORE COULD AVOID A MAJOR CRISIS. Saint Paul has a large number of services for children and families, but too often families don't get help until there is a major crisis.

# SOME POSSIBLE SOLUTIONS - WHAT THE INITIATIVE COULD LOOK LIKE:

FAMILY CENTERS: Centers in neighborhoods where parents and children could meet other families and connect to other help if they need it. There could be activities for families, classes for parents and children, staff people who know the neighborhood and can help with a range of problems families might have. Local parents would be involved in planning, implementing and evaluating the centers.

FAMILY SUPPORT WORKERS: Workers who would reach out to neighborhood families and keep in contact with families who want their help. They could visit pregnant women and families with newborns to connect them to support available at a neighborhood center.

BETTER COORDINATION: City, county, school district and private services for children and families would experiment with new ways to cooperate to make it easier for families to find support they need.

COMMUNITY-LEVEL BOARDS: Parents and people providing services in the area would help develop local centers and programs to meet local needs.



# SAINT PAUL CHILDREN'S INITIATIVE SUGGESTIONS FOR MEETINGS WITH PARENTS

PURPOSE: To get input from as many Saint Paul parents as possible about the ideas behind the Initiative, and to do that in organized meetings where people have a chance to discuss ideas not just fill out surveys.

HOW W TO INVITE: Invite parents in your neighborhood, parents you work with, or parents you know through organizations you are involved in.

WHAT TO SAY THE MEETING IS ABOUT: These meetings are about planning related to children and families that could eventually affect people in neighborhoods across the city. Coming to the meeting is an opportunity for parents to hear about some problems the Children's Initiative is trying to address and some suggested solutions. Most importantly it will be an opportunity for parents to respond and give suggestions.

HOW TO GET PEOPLE TO A MEETING: Talk to people individually about coming to a meeting or ask a group that you are part of to make devote at least an hour to a discussion.

OTHER PREPARATION: Arrange a comfortable place for the meeting. Talk to people several days ahead to arrange the meeting and call to remind them the day before. Arrange for someone to be the recorder in the meeting.

# ASSEMBLE MATERIALS FOR THE MEETING:

\* Sign up sheets

\* Large paper and markers for recording responses

\* Voluntary Participant Information sheet

\* Extra copies of the Initiative overview for people who want it

\* Evaluation form

\* Meeting Response Form

Return the following to the Children's Initiative:

\* Sign up sheets

\* Complete Voluntary Participation Information Sheet

\* Completed Meeting Response Form

\* Completed Facilitator Evaluation and Participant Evaluations

\* The lists of reactions to problems and possible solutions developed by the parents in the meeting. It would be helpful if you can transfer the lists to smaller paper.

NOTE: - we are asking you to give us the complete list of problems and reactions to solutions that came out out of the meeting as well as the Meeting Response Form where you will summarize the meeting.



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# SAINT PAUL CHILDREN'S INITIATIVE -- MEETINGS WITH PARENTS

### SUGGESTED AGENDA

- 1. Welcome Briefly describe the agenda of the meeting. Ask everyone to fill out a sign up sheet if they haven't already.
- 2. Introductions If people in the group don't know each other, start the meeting by introducing yourself and asking everyone to do the same. You might tell the group about why the issues that are part of the Children's Initiative are important to you and ask the others to talk a little about themselves. Part of the meeting could help people start to relax. NOTE: Let people talk enough to feel comfortable, but keep the introductions moving along so you can get on with the rest of the meeting.
- 3. Background and Purpose of the meeting Describe the Children's Initiative using the overview handout. Explain that the purpose of the meeting is to have them respond to both the problems and the possible solutions.
- 4. The Problems Talk about some of the assumptions the Children's Initiative makes. Does this match people's experience? What are some of the problems they have had dealing with schools, or the health system, or social services, etc.

This part of the meeting is meant to give people a chance to match their own experience with problems the Initiative has started to identify. On newsprint or other large paper, start to list problems the parents raise. They could be some of the problems listed in the overview: Isolation, lack of information, feeling shuffled from place to place, being made to feel intimidated or fearful, etc. Be sure to add the problems the parents raise in addition. Listen to stories, but keep the discussion moving and make sure everyone gets a chance to talk.

5. Possible Solutions - Review the possible solutions proposed by the Initiative - on page two of the overview handout. Have the people in the meeting give their reactions.

This part of the meeting is meant to give the parents a chance to react to the solutions the Initiative has proposed or raise additional possible solutions.

You could start by listing some of the proposed solutions on large paper like — neighborhood centers for families, workers who understand the neighborhood, streamlined applications, and community-level parent boards. Ask people questions like: What do they think neighborhood centers for families should include, what would be the difficulties with implementing the solutions, what other suggestions do they have. Again, list the parents responses on large paper.

MOVE TO PAGE 2 OF THE AGENDA



SAINT PAUL CHILDREN'S INITIATIVE -- MEETINGS WITH PARENTS SUGGESTED AGENDA PAGE 2

- 6. Begin to Prioritize What do the parents think are the most important problems to address and the most important solutions?
- 7. Response Form If there is time, you may ask the group to help you. Answer the questions on the response form that will help summarize the meeting. Explain to the group that you will also give their list of reactions to problems and possible solutions that was recorded during the meeting to the Children's Initiative.
- 8. Voluntary Participant Information Sheet Explain to the group that the Children's Initiative is working hard to involve parents from all groups and neighborhoods throughout the city. It would be very helpful if people will fill out the information sheets, but they are completely voluntary.
- 9. Close Thank people for their involvement and tell them they will be hearing from the Initiative later about feedback from the parent meetings. Explain that these parent meetings are just the first opportunity for parent involvement. There will be continuing opportunities in any planning and implementation done by the Initiative.
- 10. Evaluations Ask people to complete the short evaluation form.



# ATTACHMENT C PROBLEM THEME CODES FOR CONTENT ANALYSIS

OTTAT	TY OF LIFE/SURVIVAL CONCERNS
P10	Crime/violence/abuse
P12	Fear
P13	Depression/hopelessness
P16	Children not a priority
P21	Stress
P25	Financial/economic concerns
P26	Housing arrangements/landlords
P27	Employment
P47	Police/law enforcement
P60	Mobility/transition/relocation
SOCIA	L SUPPORT SYSTEMS CONCERNS
P15	Crisis programming
P41	Health care (mental, dental)
P42	Education
P43	Social services
P48	Legal system
P50	Communications/information
P51	Physical access (locations, buildings)
P52	Physical access (accessibility)
P53	System access (eligibility standards, rules, regulations, policies)
P54	System access (forms, paperwork)
P55	Personal access (hours, schedules)
P56	Personal access (costs)
P57	Fragmented services
P58	Shuffle and run-around
WOR	KER/ADVOCATE CONCERNS
P30	Lack of respect by others for respondents
P32	Problems with service providers
P33	Intimidation
RARI	RIERS
P22	
P40	and the second s
P45	Transportation
P46	Utilities/telephone
	•
	MUNITY CULTURE
	Isolation "Tillian for others
P17	Lack neighborhood members taking responsibility for others
P31	Lack of trust for others in community
P44	Recreation
P61	Lack of neighborhood schools
	TURE/LANGUAGE
P23	Language difficulties
P24	Cultural differences (all -isms)
PERS	SONAL
P18	Chemical dependency
P20	Difficulty raising children
P28	Other family members
P29	Single parenting/divorce



# ATTACHMENT D SOLUTION THEME CODES FOR CONTENT ANALYSIS

OUALI	TY OF LIFE/SURVIVAL
S10	Crime prevention programs
S16	Children as a priority
S25	Economic supports/education
<b>S26</b>	Housing arrangements & assistance
S27	Employment counseling services & training
S47	Police/law enforcement
SOCIA	L SUPPORT SYSTEMS
S15	Preventive programming
S41	Health care (mental, dental)
S42	Education
S43	Social services
S48	Legal system
S50	Improved ommunications/information
\$51	Physically located in neighborhoods
S53	Reduce eligibility standards/universally available
\$55 \$54	Reduce forms, paperwork
\$55 \$55	Expanded hours
\$55 \$56	Personal access (free or low costs)
S57	Coordinated/integrated services
351	COMMINICATING STATES
WORK	KER/ADVOCATE
S30	Increased respect by others for respondents
S31	Advocate
S32	Service providers who are from the community
<b>S34</b>	Service coordinators
S71	Home Visitors/Family Advocate Workers
ALLE	VIATING BARRIERS
S22	Literacy programs
S23	Provide bilingual interpreters
S24	Training in cultural sensitivity
S40	Child care funding
S45	Transportation services
S46	Utilities/telephone available
S52	Physical access for people with disabilities
S60	English as a Second Language
S61	Family Literacy programs
S62	Drop-in child care
302	Diop-in cima care
	MUNITY CULTURE
S17	Neighborhood members taking responsibility for others
\$44	Recreation programs
PERS	ONAL
240	Ot a fact day and an advention for trantment

Chemical dependency education & treatment Support for other family mentions



\$18 \$28

# COMMUNITY EDUCATION IDEAS

- Education in problem solving S11
- Education in leadership **S12**
- Education in conflict resolution **S13**
- Funding for programming **S14**
- Parent education/support programs **S20**
- Parent involvement S21
- Parent-child/family programs **S66**

#### PROGRAMMING IDEAS

- Intergenerational programming **S33** Parent/neighborhood boards **S58**
- Respite care **S63**
- \$64
- **S**65
- Visit parents of newborns
  Developmental screening
  Locating child care/referral services \$67
- Family Centers/Family Resource Centers **S70**
- Directory of Services Available **S72**
- Befriender Programs (Mentor parents; Big Brother/Big Sister; surrogate parents; others) \$73
- **S74** Mobile Family Service Van
- **S75** Welcome Wagon
- Extended day child care \$76
- Family counseling **S77**
- Family social events **S78**



# ATTACHMENT E

# SPCI PARENT MEETING RESPONSE FORM

1. Date of Meeting	Facilitator
2. PROBLEMS	
WHAT PROBLEMS WERE RAISED MOST	OFTEN?
WHAT DID THE GROUP THINK WERE TH	HE MOST IMPORTANT PROBLEMS TO ADDRESS?
COMMENTS:	
3. POSSIBLE SOLUTIONS - Family Center	s, Neighborhood Workers, Neighborhood Parent Boards
OVERALL REACTION?	
OTHER SOLUTIONS RAISED?	
WHAT SOLUTIONS DID THE GROUP TH	INK WERE THE MOST IMPORTANT?
•	
COMMENTS:	



# ATTACHMENT F SPCI PARENT PROBLEM SUMMARY SHEET

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# ATTACHMENT G SPCI PARENT SOLUTION SUMMARY SHEET

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