

A House resolution

recognizing the well-being of all Minnesota children

WHEREAS, research over the last two decades in the evolving fields of neuroscience, molecular biology, public health, genomics, and epigenetics reveals that experiences in the first few years of life build changes into the biology of the human body that, in turn, influence the person's physical and mental health over the person's lifetime; and

WHEREAS, these early experiences literally shape the physical architecture of a child's developing brain and establish either a sturdy or a fragile foundation for all the learning, health, and behavior that follow; and

WHEREAS, strong, frequent, or prolonged stress in childhood caused by adverse childhood experiences can become toxic stress, impacting the development of a child's fundamental brain architecture and stress response systems; and

WHEREAS, the Adverse Childhood Experiences Study (ACES) data corroborates the neurobiology of childhood development, showing specific correlations between ten categories of abuse, neglect, and household dysfunction and consistent increased risk of disease and negative health behaviors in adulthood; and

WHEREAS, the Minnesota Behavioral Risk Factor Surveillance System (BRFSS) conducted by the Minnesota Department of Health in 2011 found that 60 percent of Minnesotans surveyed had two or more ACEs and 15 percent had five or more ACEs before the age of 18; and

WHEREAS, the 2013 Minnesota Student Survey data indicate that 35 percent of Minnesota students, grades 7 through 12, reported at least one adverse childhood experience; and

WHEREAS, BRFSS data also show that in Minnesota, American Indian and African American adults had a significantly higher percent of individuals reporting five or more ACEs as compared to white adults; and

WHEREAS, the Minnesota Department of Human Services 2013 Child Welfare Report states that American Indian, African American, and children of two or more races are respectively 15.5, 4.0, and 4.0 times more likely than white children to be placed out-of-home; and

WHEREAS, early childhood offers a unique window of opportunity to prevent and heal the impacts of adverse childhood experiences and toxic stress on a child's brain and body; and

WHEREAS, positively influencing the architecture of a child's developing brain is more effective and less costly than attempting to correct poor learning, health, and behaviors later in life; and

WHEREAS, a child's brain continues to develop through adolescence and into young adulthood; and

WHEREAS, the emerging science and research on toxic stress and adverse childhood experiences demonstrate a growing public health crisis for the state with implications for the state's educational, juvenile justice, criminal justice, and public health systems; and

WHEREAS, a critical factor in buffering children from the effects of toxic stress and adverse childhood experiences is the existence of supportive, stable relationships between children and their families, caregivers, and other important adults in their lives; and

WHEREAS, evidence shows that parent knowledge and understanding of childhood development can encourage positive parenting skills, support healthy cognitive and social development in children, and prevent, reduce, or prevent and reduce incidences of abuse and neglect; NOW, THEREFORE,

BE IT RESOLVED by the Committee on Rules and Legislative Administration of the House of Representatives of the State of Minnesota that the principles of brain development, the connection between mental and physical health, the concepts of toxic stress, adverse childhood experiences, buffering relationships, and the roles of early intervention and investment in children are important strategies for the well-being of all Minnesota children.

Dated: March 12, 2015

Kurt Daudt, Speaker

Minnesota House of Representatives

Joyce Peppin, Chair

Rules and Legislative Administration

Rena Moran

State Representative

