



# The Child Friendly Cities Initiative-Minneapolis Model

Charles Oberg<sup>1</sup>

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## Abstract

**Purpose** The Child Friendly Cities Initiative (CFCI) is a UNICEF framework based on the UN Convention on the Rights of the Child (CRC). CFCI was launched globally in 1996 to protect children's rights throughout the world. There are child friendly cities in over 44 countries around the globe, but none presently in the United States. The purpose was to establish a Child Friendly City in the United States.

**Description** Child friendly cities are a child-rights and equity-based approach designed to ensure all children in a community reach their full potential for optimal health, development, and well-being. The paper discusses the development of the guiding principles of the CFCI-Minneapolis Model as well as a community needs assessment.

**Assessment** The assessment consisted of a digital survey of 60 questions on the SurveyMonkey platform. The sample included 173 Minneapolis youth 10-18 years of age and 85 parents with children less than five years of age. The participants were drawn from four of the 83 Minneapolis neighborhoods that had the highest concentration of children and youth, communities of color, and immigrant families that have historically been under resourced.

**Conclusion** The results of the community assessment guided the development of four programmatic initiatives. These included child rights learning & awareness, emergency preparedness & planning, community safety, and youth participation in decision making. The paper concludes with the lesson learned to date in the implementation of the CFCI-Minneapolis Model. These include partnership, dedication, leadership, community engagement, coalition building, and celebrating success. CFCI-Minneapolis received full designation from UNICEF USA as a child friendly city in February 2024.

**Keywords** Children rights · Child health · UN convention on the rights of the child (CRC) · Community assessment · Advocacy

## Introduction

The Child Friendly Cities Initiative (CFCI) is a UNICEF framework based on the UN Convention on the Rights of the Child. CFCI was launched globally in 1996 to protect children's rights throughout the world. Child friendly cities are a child rights and equity-based approach designed to ensure all children in a community reach their full potential for optimal health, development, and well-being (Goldhagen et al., 2020a). Unfortunately, the CRC has been ratified

by every country represented in the world except for the United States.

At its core, a child friendly city operationalizes the child rights outlined in the UN Convention on the Rights of the Child (CRC) into a local system of good governance committed to children. CFCI prioritizes the voices, needs, and rights of children as an integral part of public policies, programs, and decisions. There are child friendly initiatives underway in over 49 countries around the globe (UNICEF CFCI, 2023).

Table 1 highlights the five goals that underpin the efforts for a community seeking designation as a child friendly city.

In 2018, three child rights advocates affiliated with the International Society for Social Pediatrics and Child Health (ISSOP) met with UNICEF staff in Geneva, Switzerland, to explore the possibility of establishing child friendly cities in the United States. In February 2019 an Expert Work Group was convened in Jacksonville, Florida, with representatives

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Charles Oberg  
oberg001@umn.edu

<sup>1</sup> Division of Epidemiology and Community Health, Maternal and Child Health Program, School of Public Health, University of Minnesota, 1300 South 2nd Street, Minneapolis, MN 55454, USA

**Table 1** UNICEF child friendly cities initiative goals

Safety and Inclusion	Every child and young person are valued, respected, and treated fairly within their communities and by local authorities.
Equitable Social Services	Every child and young person have access to quality essential social services.
Safe Living Environment	Every child and young person live in a safe, secure, and clean environment
Play and Leisure	Every child and young person have the opportunity to enjoy family life, play and leisure.
Child & Youth Participation	Children and youth have their voice, needs and priorities heard and considered in public laws, policies, budgets, programs, and decision making by policymakers.

of UNICEF International, UNICEF USA, organizations with children's rights expertise and participants from 20 cities across the United States who had indicated an interest in exploring the CFCI model. Minneapolis, Minnesota, decided to pursue the designation with several other cities including Houston, Texas, San Francisco, California and Boulder, Colorado.

In 2019, a Memorandum of Understanding (MOU) was signed between the city of Minneapolis and UNICEF USA to launch a pilot program. The lead agencies for the pilot were the Minneapolis Health Department (MHD) and the Minneapolis Youth Coordinating Board (YCB). The YCB was created in 1986 as an interagency collaboration to promote healthy child and youth development (YCB, 2023). The YCB's anchor institutions are the City of Minneapolis, Hennepin County, Minneapolis Public Schools, and the Minneapolis Park & Recreation Board. It is charged with the development of cross-jurisdictional policies, strategies, and action for the well-being of Minneapolis children and young people.

A Minneapolis CFCI executive committee was formed with pertinent city agencies, including the Minneapolis Public Schools, and Minneapolis Park and Recreation Board. In addition, the executive committee included a number of community members who had expertise in child issues as well as being strong advocates for children's rights. The executive committee was initially committed to the development of a strategic vision, mission and guiding principles that would guide and direct the planning and implementation of the Minneapolis CFCI pilot.

## Vision, Goal and Guiding Principles

The vision is that *all* children and youth in Minneapolis feel safe and heard, are provided opportunities to participate and lead, find agency, and thrive. The mission is to lead the state and the country by creating equitable and just spaces for children, youth, and families. The intent would be to share

power and mobilize collective action to champion local cultures, child and youth development, education, health, and safety through a global children and youth rights lens. The guiding principles are driven by a spirit of hope, with a continuous effort to strive to uphold the rights of children and youth in innovative and relevant ways by embracing:

- *Youth Leadership.* Our city's children and youth are sought out and encouraged to lead in peer to peer and intergenerational decision-making.
- *Inclusion and Collaboration.* Our city's children and youth feel heard and feel free to share their thoughts freely with their own voices and through their lived experiences.
- *Safe and Courageous Spaces.* Our city's children and youth feel safe at home, in school and in their communities.
- *Accessibility.* Our city will be intentional about making sure that all programs and services are accessible to *all* children and youth.
- *Accountability.* Our city leaders are accountable to the rights of children and youth and the United Nations Convention on the Rights of the Child. In addition, children, youth, and adults are accountable to one another for collective action to promote and protect children's rights.

## Initial Community Needs Assessment

As part of the initial planning, UNICEF USA required a community needs assessment to be undertaken and was undertaken in 2021. The focus of the survey was to ascertain the community conditions as they reflect the status of children's rights based on the UNICEF CFCI Goals identified in Table 1. Overall, there are 85,422 children under 18 currently living in Minneapolis. The demographic age breakdown of Minneapolis children shows that 33% are under the age of 5 with 67% between 5 and 18 years of age. In terms of race, 35% of Minneapolis children are White, 33% African American, 17% Hispanic, 5% Asian or Pacific Islander, 7.5% mixed race, and 1% American Indian (Census Bureau, 2015).

In addition, Minneapolis and its wider Twin Cities metropolitan area has been a destination for immigrants and refugees over the course of the last fifty years which has occurred over several waves. The first was following the Vietnam war with a large number of refugee families arriving from Southeast Asia. This included families from not only Vietnam but also Cambodia, and Laos. In addition, it included the Hmong, a distinct population

from the mountainous regions of Laos, who fought with American troops and the CIA during the Vietnam war. In 2010, Minnesota and the Twin Cities was home to a large Hmong community that was second in size only to those living in California (Pfeifer et al., 2012). In the 1990's Minneapolis experienced a second major immigration due to the Somalia civil war and resulting diaspora. Somalia collapsed into anarchy after the military regime led by Mohammed Siad Barre was overturned in 1991 and has since been terrorized by Al Shabab, contributing to the Somali diaspora. Minnesota is presently home to more than 57,000 Somalis, the largest concentration in the country (Erickson, 2010). In addition, Minnesota has welcomed families from eastern and central Europe, sub-Saharan Africa, and a Karen community from Myanmar. Finally, Minnesota has a significant number of immigrants from Central and South America seeking asylum.

Participants for the community assessment were selected from the four (of 83) Minneapolis neighborhoods with the highest concentration of children and youth, communities of color, immigrant families that have been historically under resourced. The assessment used a digital survey of 60 questions on the SurveyMonkey platform. The sample included 173 Minneapolis youth 10–18 years of age and 85 parents with children less than five years of age. The participants from both groups consisted of a convenient sample drawn from individuals who were involved with programming with the YCB. A follow-up in-person focus group was conducted with 26 high school students and 33 parents with young children who had participated in the original surveys. They had agreed to participate in the follow-up focus groups to clarify and expand on responses obtained in the original survey. It was a strategic decision by the executive committee to survey these two segments initially because of the YCB's existing outreach services to these groups. Additional assessment for children 5–10 years of age is planned to be conducted at a later date.

Table 2 provides the UNICEF CFCI Goals, and questions that were developed for use for the interviews with the parents of young children. The questions utilized a 10-point Likert scale for each question and the average score is provided in the table for each question.

Table 3 provides the UNICEF CFCI Goals, and questions that were developed for use for the interviews with the youth 10–18 years of age. It is similar to the assessment questions used for the parents of young children, but some modification was made to make it more age appropriate for the adolescents interviewed.

The average scores for parents of young children were selectively lower than the adolescents surveyed. However, each group had average responses less than 6 out of 10 on a number of questions across the five UNICEF goal

areas. Responses that were below this level were used to determine the priorities for CFCI-Minneapolis programmatic initiatives.

### **CFCI Minneapolis Initial Programmatic Initiatives**

Based on the CFCI guiding principles and the results of the community assessment four programmatic initiatives were prioritized for 2021–2023 (Minneapolis Local Action Plan, 2023). These included efforts on child rights learning and awareness; emergency management, preparedness planning; community safety; and youth participation in decision making.

#### **Child Rights Learning & Awareness Initiative**

Increasing an awareness of child rights was identified in the community assessment as an area worthy of exploration. The first initiative was based on the assumption that all families and children should have a greater awareness about their rights based on the UN Convention on the Rights of the Child. The program was built upon the Reach Out and Read (ROR) program. ROR is a child reading readiness program designed to reduce the literacy gap of communities of color and marginalized populations (Zuckerman, 2009). The importance of reading to children is shared with parents by the pediatrician during well child visits. In 2021, the Initiative was begun at Hennepin HealthCare's Pediatric Clinic. The clinic began distributing Aurelia Fronty's "**I Have the Right to Be a Child**". The book depicts the rights of the child in easy-to-understand language with an accompanied illustrations. It was given to children 4–5 years of age who were coming in for their kindergarten well child visit. Since the launch of the program more than 600 copies of the book have been given to low-income families from diverse backgrounds including minority, immigrant, and refugee children.

#### **Emergency Management, Preparedness & Planning Initiative**

Emergency preparedness and feeling safe were identified as a priority as part of the community assessment and became the second priority area. An internal review of Minneapolis' response to the impact of disasters on families and children was examined. Three disasters were reviewed: the 2007 Interstate 35 W bridge collapse, the 2011 North Minneapolis Tornado, and the 2019 Christmas Day Drake Hotel fire, a shelter for homeless families with children within the city. Overall, the reports focused on the immediate and short-term impact of these events with limited discussion of the

**Table 2** Community assessment tool for parents of small children

UNICEF CFCI Goal Area	Questions	Average Scores
Safety and Inclusion	Families and children are safe in my community.	<b>5.92</b>
	My children feel safe at daycare and preschool.	8.64
	Children of all gender identities are treated equally in my community.	<b>3.20</b>
	Girls (cis and trans), boys (cis and trans), and nonbinary people are treated equally in my community.	<b>5.56</b>
	People who are lesbian, gay, bisexual, asexual, and/or queer are treated with respect and given equal treatment in my community.	6.62
	Children with disabilities have equal treatment in my community.	<b>5.92</b>
	My children have friends from different origins, cultures, genders, or abilities.	6.32
	Children in my community are respected, regardless of race, religion, culture, or ability.	6.27
	Children and families are respected in my community based on my color, religion, nationality, culture, or ability.	6.27
	My religion and religious practices are respected in my community.	8.19
	There are people in the community who I can talk freely with about problems I am having in my life.	6.52
	My children are valued by other adults in my community.	7.59
	My child has a positive relationship with a caring adult outside our immediate family.	8.50
	My children attend activities with other children in my community.	6.86
Equitable Social Services	There are health services in my community where my children can go for health checks or sick checks.	8.41
	I am satisfied with the health care my child receives.	8.79
	There is a free or affordable childcare where my children can attend.	<b>4.00</b>
	I have a childcare or preschool near my home that provides quality care to children.	8.61
	I trust my child's Head Start, preschool, or childcare program.	8.35
	My children have enough healthy food to eat each day including vegetables and fruit.	8.84
	My family can get food when we need it at a food pantry close to my home.	8.40
	I know where to take my child when I need help to support my child in playing well with other children.	6.94
	I sing, play, or read with my children every day.	9.73
	My family has access to the internet in our home or community.	9.58
	There is a place where my children can borrow books in my community.	9.56
There are green spaces in my community where my children can have contact with nature, including gardens, parks, trails, or open spaces with grass.	8.93	
Safe Living Environments	I have a home with a rent or mortgage I can afford to pay every month.	8.82
	We have safe water to drink at home.	9.35
	The air in my home is clean.	9.11
	The air in my community is clean and pollution-free.	6.52
	If there is an emergency in my community, I know what to do and where to go.	7.56
	My family has a plan for emergencies and everyone in my family knows and understands the plan.	<b>4.65</b>
Play and Leisure	There are play and leisure places for children in my community.	8.70
	My children have a safe place to play right outside my home.	6.81
	I feel safe bringing my children to community play spaces.	6.94
	The places for play in my community can be used by children with physical disabilities.	<b>5.26</b>
	I feel safe using buses or other public vehicles.	<b>5.35</b>
	The places where I wait to take local transportation are safe, well-lit, and clean.	<b>5.32</b>
	It is safe for me to walk or bike with my child in my community.	6.77
	I feel safe from traffic when walking in my community.	<b>5.52</b>
Public spaces in my community are free from drug-related dealing and other illegal activities.	<b>4.88</b>	
Child Participation	I know about children's rights and the United Nations Convention on the Rights of the Child (CRC)	6.81
	I learn about children's rights through childcare, preschool and community programs.	<b>4.04</b>
	I am aware of political issues that impact children in my community.	6.13
	I know about government resources and programs for young children.	<b>5.72</b>

**Table 2** (continued)

UNICEF CFCI Goal Area	Questions	Average Scores
	There is a place to voice my ideas and concerns about decisions that affect children in the city.	<b>4.03</b>
	I have a chance to give my opinion about my children's childcare center or preschool.	6.48
	I am involved in planning or decision-making for my community.	<b>2.85</b>
	I give my opinion about the budget for programs and services for children in the city.	<b>1.39</b>
	I am happy with the cities actions to improve Minneapolis for children.	<b>5.43</b>

need for longer-term recovery. Secondly, there was minimal discussion of the impact on families and children. This was concerning considering all of these events had major direct impacts on children's lives. This review resulted in changes to strengthen the child and family responsiveness procedures in the city's emergency plans. Additional efforts are underway to increase family preparations for emergencies including the development of family emergency plans.

### Community Safety Initiative

Regarding community safety, all people deserve safety in their homes, workplace, parks, and community spaces. This includes reducing violence as well as the conditions that fuel violence such as economic, social, and environmental milieu. Based on many quality-of-life measures, Minnesota is often cited as one of the best places to live in the United States. However, these overall measures obscure significant racial and economic disparities. The plan is to gather community safety experiences from young people and parents with young children and to present the findings and recommendations to local elected officials and decision-makers.

### Youth Participation in Decision Making

The community assessment showed a desire for youth to participate and have their voices heard. The final programmatic initiative is to promote youth voices in decision making. Minneapolis has a Youth Coordinating Board (YCB) whose motto is "No decision about us without us". During a focus group with adolescents, it was discussed that the city lacks structure for intentional opportunities for youth participation in the decision-making process. The initiative purpose will be to develop a program where young people are trained, paid, and supported to serve as voting members of City boards and Commissions.

### Conclusion

Maternal and child rights advocates have always embraced advocacy as one of its central pillars (Oberg, 2003). Advocacy builds upon the legitimacy of economic,

social, cultural, and political rights identified in the CRC (Goldhagen et al., 2020b). The following are some lessons learned in development of the CFCI-Mpls Model. First, it is essential to identify both city and community partners that embrace the provision of the CRC and use its guiding principles in shaping the priorities for children and youth. Second, the CFCI-Minneapolis Steering Committee understood that the effort would require dedication with monthly meetings throughout the planning and implementation process, with active participation in the working groups that led the first four prioritized initiatives. Third, involvement of the Mayor of Minneapolis, Jacob Frey, and the Minneapolis City Council was essential. Each were kept abreast of the planning and progress and provided essential input throughout. Fourth, success of CFCI-Mpls was also dependent on community engagement. As an example, the Department of Pediatrics at Hennepin Healthcare Inc., was the first community member to join as a partner. It embraced the child rights learning-Reach Out and Read initiative by incorporating it into their Child Literacy Program with the distribution of *I have the Right to be a Child* in its outpatient clinic. In addition, Reach Out and Read Minnesota has joined the effort and will partner in expanding the initiative to clinics throughout Minneapolis. Finally, it was imperative to celebrate success. After a year of work and planning, in November of 2019, the Minneapolis City Council passed a resolution in support of the city becoming one of the first child friendly cities in the United States. In November 2021, Mayor Frey signed a Memorandum of Understanding with UNICEF USA to officially pursue CFCI designation and signed a Proclamation marking the 32-year anniversary of the adoption of the CRC. That evening in collaboration with the Minneapolis business community, the lights of city buildings, bridges and thoroughfares were lit up blue in recognition of UNICEF and CFCI-Minneapolis. On February 14, 2023, three years after the Minneapolis Council's resolution, Minneapolis was officially designated as a UNICEF USA Child Friendly City candidate. (Forbes, 2023). A daylong conference was convened with UNICEF USA to launch Minneapolis's Action Plan with participation by both local, state, and national leaders. In February of

**Table 3** Community assessment questions for adolescents

UNICEF CFCI Goal Area	Question	Average Scores
Safety and Inclusion	I feel safe in my community (protected from abuse, gangs, etc.)	6.65
	Girls (cis and trans), boys (cis and trans), and nonbinary folks are treated equally in my community.	6.42
	People who are lesbian, gay, bisexual, asexual, and/or queer are treated with respect and given equal treatment in my community.	6.65
	I feel safe at school.	7.65
	Children with disabilities are respected and given equal treatment in my community	6.73
	I have friends of different origins, backgrounds, genders, or abilities.	7.39
	There are adults in my community who I can talk to freely about problems I am having in my life.	6.76
	I feel valued by adults in my community.	7.01
	I feel valued by peers in my community.	6.65
	I am respected in my community, regardless of my color, religion, nationality, culture, or ability.	7.39
	My religion and religious practices are valued and respected by others in my community.	7.72
	Equitable Social Services	There is a place in my community I can go for health check-ups or when I am sick.
I am treated well when I go for health checkups.		8.20
If needed, I can get support and orientation from professionals about HIV/AIDS and safe sex.		7.74
I know where to go for mental health care services (such as counseling).		6.76
I have reliable access to the internet outside of school.		8.18
I am given enough information by my school to know what I want to do after high school.		6.72
I am happy with the education I am receiving at school.		6.97
I have enough nutritious food to eat each day (vegetables, fruits, etc.).		7.96
Safe Living Environments	I, or someone I live with, has an emergency resource kit in our home that includes water and non-perishable food, extra cell phone charger, battery powered weather radio, flashlight, first aid kit, whistle to call for help, dust mask, moist towelettes, non-sparking wrench or pliers, can opener, and local maps.	6.94
	My family has a plan for emergencies and everyone in my family knows and understands the plan.	6.50
	My family's emergency plan covers how we will communicate and reunify if separated.	7.43
	There are places in my community where I can be in contact with nature or green spaces (gardens, parks, open spaces with grass, etc.).	7.67
	I can easily dispose of garbage or recycling in public spaces without littering.	7.67
	I know the root causes of climate change and what strategies my community needs to adopt to mitigate the effects of climate change.	7.35
	Places in my community are clean and do not pose risks to my health.	6.50
	Play and Leisure	There are spaces for play and leisure near my home that I use (e.g., parks, nature trails, basketball courts, etc.).
The play and leisure spaces in my community are in good condition.		7.18
I feel safe on my way to and from school.		7.05
There are enough streetlights to make me feel safe at night.		6.00
I feel safe from traffic when walking in my community.		<b>5.86</b>
Local transportation waiting areas are well-lit, clean, and safe.		<b>5.85</b>
It is safe for me to walk or ride my bike in my community.		7.33
I feel safe using buses or other public vehicles.		6.74
Public spaces are free from drug dealing and other illegal activities in my community.		5.93
I am safe from sexual harassment when in public spaces (like cat calling, staring, hooting, etc.).		7.05
The places for play in my community can be used by young people with physical disabilities.		6.58
Youth Participation		I participate in projects, programs, groups, or activities in my community.
	I am aware of children's rights or the Convention on the Rights of the Child (CRC).	<b>5.42</b>
	I try to learn about political issues that impact young people in my community.	6.89



**Table 3** (continued)

UNICEF CFCI Goal Area	Question	Average Scores
	I am happy with the government's actions to improve the city for young people.	<b>5.58</b>
	My local representatives in city council, school board, park board, and county board invest resources to make my community better.	6.28
	I have meaningful opportunities to voice my ideas and concerns about decisions that affect me in the city	<b>5.38</b>
	I know how to give my opinion on City planning (e.g., bike routes, bus lines) and services (e.g., public safety) for young people in the city.	<b>5.37</b>

2024 Minneapolis received full designation as a Child Friendly City from UNICEF USA.

Looking forward the plan is to continue with the implementation of the identified priorities. The overarching goal is to improve the lives of all children in Minneapolis and to achieve equity for those families who are marginalized and underrepresented. The process has demonstrated the importance of maternal and child health advocates promoting meaningful change for children. Through such efforts the incorporation of children's rights at the community level can be realized. With time, as more child friendly cities arise in the United States, a greater appreciation of the rights of children will occur. This will hopefully include the ratification of the CRC at the national level.

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