

January 2011

Addressing Racial Disproportionality in Child Welfare

What's Inside:

- Prevalence
- Community development and prevention
- Reporting and screening
- Investigation and assessment
- Service provision
- Permanency for children in out-of-home care
- Across the stages of child welfare
- States' efforts
- Strategies and research

Promising Practices in Child Welfare

Issue briefs include a review of research and policies to bring together current information with examples of promising practices.

The child welfare community has moved from acknowledging the problem of racial and ethnic disproportionality in the child welfare system to formulating and implementing possible solutions. As jurisdictions and agencies evaluate their systems to identify where and how disproportionality is occurring, they are seeking changes that show promise for their own populations.

This issue brief explores *efforts to address* racial disproportionality in child welfare by focusing on changes in policy and practice at specific decision points in the child welfare process—prevention, reporting, investigation, service provision, out-of-home care, and permanency—as well as policies and practices that can be implemented across several or all of these decision points. The issue brief is designed to help administrators, program managers, and policymakers explore solutions to racial disproportionality in their own child welfare systems. Specific examples of State and local projects that address disproportionality are highlighted throughout.

A brief introductory section on prevalence is also included, to provide some background statistics.¹

¹ While it is necessary to understand what causes disproportionality in a particular jurisdiction in order to formulate solutions, it is beyond the scope of this issue brief to explore the background issues and causes in depth. A number of studies already exist, including, for example, Derezotes, Poertner, & Testa (Eds.), 2005; Hill, 2005, 2006; McRoy, 2005; Casey-CSSP Alliance for Racial Equity, 2006; U.S. Government Accountability Office, 2007.

Prevalence

A significant amount of research has documented the overrepresentation² of certain racial and ethnic groups, including African-Americans and Native Americans, in the child welfare system when compared with their representation in the general population (e.g., McRoy, 2005; Derezotes, Poertner, & Testa, 2005; Hill, 2005, 2006; Casey-CSSP Alliance for Racial Equity, 2006; Overrepresentation of minority youth in care, 2008). While the extent of this overrepresentation varies significantly across different regions of the country, it exists at some level in virtually every locality.

At the same time, research from the first three National Incidence Studies of Child Abuse and Neglect (NIS) found no relationship between race and the incidence of child maltreatment after controlling for poverty and other risk factors (Sedlak & Broadhurst, 1996). Instead, incidence of child abuse and neglect was associated with poverty, single parenthood, and certain other related factors. However, the most recent NIS (NIS-4) indicated that Black children experience maltreatment at higher rates than White children in several categories of maltreatment. The study's authors suggest that the findings are at least partly a consequence of the greater precision of the NIS-4 estimates and partly due to the enlarged gap between Black and White children in economic well-being, since socioeconomic status is the strongest

² In this issue brief, the terms "disproportionality" and "overrepresentation" are used interchangeably to refer to the proportion of ethnic or racial groups of children in child welfare compared to those groups on the general population. "Disparity" refers to the more global condition of disproportionality or overrepresentation.

Table 1

Race-Ethnicity of Children in Total Population vs. in Foster Care in 2008

Race/Ethnicity	Percentage of Total Child Population*	Percentage of Children in Foster Care**
American Indian/Alaskan Native	1%	2%
Asian	4%	1%
African-American	14%	31%
Hispanic	22%	20%
White, non-Hispanic	56%	40%

* U.S. Census Bureau's 2008 American Community Survey, which provides statistics on children and youth under 18 as 1-year estimates.

** U.S. Department of Health and Human Services' (2009) AFCARS data for FY 2008, which provides statistics on children and youth in the child welfare system up to age 20 (although only 5 percent are 18+ years) on September 30, 2008. The two columns of percentages show the disparity between each race's representation in the general population vs. its representation in the foster care population. Note that this does not show each group's representation in the child welfare system as a whole, just representation in out-of-home care.

predictor of maltreatment rates (Sedlak, McPherson, & Das, 2010).

How extensive is overrepresentation of certain groups in child welfare compared to the general population of children? Statistics from the U.S. Census Bureau's (2009) 2008 American Community Survey and from the U.S. Department of Health and Human Services (U.S. HHS, 2009a) Adoption and Foster Care Analysis and Reporting System (AFCARS) for 2008 give some idea of the extent of the disparity, using the example of foster care. (See Table 1.)

The AFCARS figures for 1998 through 2008 show a drop in the percentage of African-American children in foster care, although a large disparity remains when compared with figures for White children. For the first year for which the percentages were provided, 1998, African-American children constituted 43

percent of those in foster care. By 2008, that percentage had dropped to 31 percent.³

While these national statistics provide some idea of the extent of the overrepresentation, they do not show the wide discrepancies in population numbers among States and even within States. For example, while Native American children constitute 2 percent of the foster care population nationally, they are overrepresented in States where there are larger Native American populations, such as Hawaii (10.5 percent), Minnesota (8.2 percent), and South Dakota (7.9 percent) (Hill, 2005). Jurisdictions need to gather and evaluate their own statistics to identify what groups are over- or underrepresented and where the disproportionality occurs (e.g., reporting,

³ The most recent AFCARS numbers, for FY 2009, show that African-American children make up 30 percent of those in foster care (see www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report17.htm).

screening, placement) in order to determine the best way to address the problem.⁴

Disproportionality can also indicate the disparate outcomes, services, and treatment that children and families of color experience while interacting with the child welfare system.⁵ For instance, while the average stay in foster care for White children at the end of FY 2003 was approximately 24 months, the average length of stay for African-American children at the same time was more than 40 months (Stoltzfus, 2005). Some of this disparity may be attributed to the trend for African-American children to spend more time in foster care with relatives, but that practice does not account for the enormity of the gap. Another example of the disparity in services is found in the underrepresentation of Asian children in foster care. One might conclude from their low representation in the child welfare system that some Asian children and families may not be identified as needing services.

The Child and Family Services Reviews

As early as the first round of the Child and Family Services Reviews (CFSRs), numerous State Final Reports noted the problem of disproportionality in the child welfare system and reported on issues that may intensify or cause the overrepresentation of minority

groups.⁶ For example, at least 25 State first-round Final Reports identified gaps in culturally appropriate services, and at least 24 State Final Reports indicated that language differences are a barrier to services, case planning, investigations, or training. Only 38 percent of States received a positive rating on the CFSR indicator regarding whether a State's recruitment efforts for foster and adoptive parents reflect the racial and ethnic diversity of children in need of out-of-home care (U.S. HHS, n.d.).

In the second round of CFSRs, only 14 of 41 States received a positive rating on the item regarding State efforts to recruit and retain resource parents who reflect the racial and ethnic diversity of the foster care population in that State.⁷ For the States that received a rating of "Strength" for this CFSR item, a number of strategies were cited that accounted for the States' success in recruiting a diverse foster and adoptive parent population. Some of these promising practices included a pilot program targeting prospective parents of Native American descent (North Dakota), a program that used

⁴ A number of jurisdictions have begun to assess and address disproportionality. For instance, read *Places to Watch: Promising Practices to Address Racial Disproportionality in Child Welfare Services* (Casey-CSSP Alliance for Racial Equity, 2006) or view *Racial Equity: Recent State Legislative Initiatives* (National Conference of State Legislatures, 2007).

⁵ The phrase "of color" refers to non-White or nonmajority race or ethnicity.

⁶ The CFSRs are designed to enable the Children's Bureau of the U.S. Department of Health and Human Services to ensure that State child welfare agency practice is in conformity with Federal child welfare requirements, to determine what is actually happening to children and families as they are engaged in State child welfare services, and to assist States in enhancing their capacity to help children and families achieve positive outcomes. For more information about the CFSR process, visit the Children's Bureau website at www.acf.hhs.gov/programs/cb/cwmonitoring/recruit/cfsrfactsheet.htm.

⁷ At the time of this report, Round 2 Final Reports were available for only 41 States. Ratings on Item 44 (The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed) were found by perusing each of those reports, which could be located through a search function on the Children's Bureau website: http://library.childwelfare.gov/cwig/ws/cwmd/docs/cb_web/SearchForm

children's zip codes as one factor in matching them with resource families (Idaho), and the compilation and analysis of demographic data on families who had adopted and families underrepresented in the pool of prospective parents (Ohio).

Community Development and Prevention

Prevention services can strengthen families and decrease the number of children entering care, regardless of race or ethnicity. The level of available prevention services, however, is often inadequate (Lemon, D'Andrade, & Austin, 2005). Jurisdictions struggling with funding are sometimes reluctant to direct money toward prevention efforts when programs for children already in the system, such as foster care, have many funding needs.

By working proactively and in conjunction with other agencies and service providers, child welfare agencies can implement preventive measures, build family support, and offer services to vulnerable families before abuse and neglect occur. These efforts can be designed for the general population or targeted for specific at-risk groups. In fact, strategies for addressing disproportionality are often the same strategies used to improve child welfare for all children and families (Casey-CSSP Alliance for Racial Equity, 2006). Targeted prevention efforts that include a strong cultural competence component reflected in staffing and training may be especially useful.

Certain risk factors that disproportionately affect families of color, such as poverty and

parental incarceration, may lead to their disproportional contact with the child welfare system (Hines, Lemon, Wyatt, & Merdinger, 2004). Therefore, programs designed to reduce poverty and crime rates and to increase concrete services such as housing and employment may have preventive effects on the incidence of child abuse or neglect.

One example is El Paso County, Colorado's approach to families receiving Temporary Assistance for Needy Families (TANF) or child welfare services or both. Recognizing the great overlap in the populations they served, the county's child welfare and TANF agencies decided to integrate their services to provide "seamless, family-centered services" (Hutson, 2003, p. 1). The benefits for families include coordinated services, greater support for voluntary kinship care, support for at-risk teens, and intensive in-home services for families with substance use disorders at risk for involvement with child welfare.

Culturally Appropriate Prevention Services

Culturally appropriate or culturally competent services touch every facet of child welfare decision-making. According to the standards of the National Association of Social Workers (NASW), cultural competence refers to "the process by which individuals and systems respond respectfully and effectively to people of all cultures, languages, classes, races, ethnic backgrounds, religions, and other diversity factors in a manner that recognizes, affirms, and values the worth of individuals, families, and communities and protects and preserves the dignity of each" (NASW, 2007). Cultural competence needs to permeate every part of an organization, from policymaking to administration to frontline practices, and

Promising Project—Prevention	
Project	Helping Families Prevent Neglect
Location	Baltimore, MD
Researcher	Collaboration between the University of Maryland School of Social Work and the University of Maryland School of Medicine, Pediatrics
Goal	To reduce risk factors and increase protective factors in families at risk for child neglect in a target population that was predominantly African-American
Method	Home visiting services were provided at least weekly; other services included community outreach, parent education, support groups, and concrete services. Emphasis was on a culturally competent strengths-based approach that promoted social support and empowerment.
Results	Of the study's 154 parents/caregivers caring for 473 children, 85 percent were African American. Families that received services for 3 or 9 months showed: • Reduction in risk factors (e.g., parental depression, parenting stress) • Increase in protective factors (e.g., social support, parenting satisfaction) • Increase in child well-being • Increase in child safety
For more information	DePanfilis, D. (2002). <i>Helping families prevent neglect: Final report</i> . Study funded by the U.S. Department of Health and Human Services, Children's Bureau 1996-2002 (Grant Number 90CA1580). Baltimore, MD: University of Maryland School of Social Work. www.family.umaryland.edu/ryc_research_and_evaluation/publication_product_files/selected_presentations/presentation_files/pdfs/final_report.pdf

should be an ongoing component of training for all staff, as well as a centerpiece of recruiting a diverse workforce.

In-Home Services

In-home services programs in which parents or expectant parents in certain risk categories are visited by professionals or paraprofessionals in their homes have shown promise for reducing maltreatment. The goal of in-home services is to provide support, education, and resources for parents who may be struggling. If families can be served in their homes, then maltreatment and involvement with the child welfare system may be avoided.

One of the best-documented home visiting programs is the nurse home visiting program developed by David Olds. At least one study has followed this program specifically with families of color (Olds et al., 2007). In a randomized control study of low-income African-American mothers and children in Memphis, TN, parents and children were followed from birth through age 9. Outcomes were compared with similar families who had not received home visits from nurses during the first 2 years of the child's life. In a follow-up conducted when the children were 9 years old, there were several positive outcomes for mothers and children, including the fact that nurse-visited children were less likely to die from birth through age 9—an effect accounted

for by deaths that were attributable to potentially preventable causes among families not visited by nurses.

In 2009, the Children's Bureau funded the National Resource Center (NRC) for In-Home Services to identify best practices and provide training and technical assistance to States and Tribes on in-home services. The principles that guide the NRC's work with States and Tribes include an emphasis on culturally appropriate services.

Reporting and Screening

Most families first come into contact with the child welfare system due to a report of suspected maltreatment. Studies show that African-American families are more likely to be reported, although research indicates that this may be due, in part, to socioeconomic status and not race alone (Derezotes & Poertner, 2005). Certain reforms in practice and training have been suggested to reduce the disproportionate number of reports made to child welfare agencies of suspected abuse and neglect affecting minority children.

Training for Mandated Reporters

In some cases, child welfare agencies have noted that mandated reporters (such as teachers and physicians) report the suspected maltreatment of minority children more. Teachers may have difficulty distinguishing the effects of poverty from actual neglect and may also confuse cultural differences with neglect. Physicians staffing birthing centers in hospitals may be more likely to require postpartum drug tests for African-American new mothers than for White new mothers (Chibnall et al., 2003).

Mandated reporters, who differ in every State, may require more specific guidelines and better training materials than the brief checklist that often serves as their training for reporting child abuse and neglect. States can develop and provide training materials for mandated reporters that include specific guidelines for detecting symptoms of abuse and neglect, help reporters distinguish neglect from poverty, and incorporate a cultural awareness approach. Jurisdictions may also want to provide lists of community resources that mandated reporters can turn to when they want to support families.

Bridging Refugee Youth & Children's Services (BRYCS) has conducted research and developed tools that address the intersection of child welfare and refugee or immigrant families, most of whom are families of color. BRYCS has designed a tool to help teachers and schools distinguish between cultural differences and child maltreatment when determining whether to report suspected maltreatment (BRYCS, 2010). The tool points to resources that teachers and school personnel may use to support refugee families experiencing stress.

Training for Government Staff

Due to the disproportional rates of poverty, staff of government agencies may have more contact with minority families seeking services or government benefits. The higher visibility of these families may result in their being referred to the child welfare system at a higher rate. Employees of government agencies that offer concrete services (such as cash assistance, food stamps, housing, and transportation) and social services may benefit from cultural competence training to make

them aware of the potential for excessive referrals.

Screening Reports

The literature cites some interesting and contradictory findings regarding whether reports alleging abuse of children of color are more likely to be “screened in” than reports alleging abuse of White children (see Gryzlak, Wells, & Johnson, 2005, for an illuminating discussion). One study found that African-American children were more likely to be screened in for investigation than White children in cases of emotional maltreatment, physical neglect, or fatal or serious injury, as well as in cases reported by mental health or social service professionals or involving drugs or alcohol (Sedlak & Schultz, 2005). Many factors may affect the screening decision, and agencies should examine how the characteristics of the case, the worker, agency policy, and screening criteria affect the numbers of children of different races whose cases are screened in for investigation.

Investigation and Assessment

Not only are minority families disproportionately reported for abuse and neglect, their cases are also more likely to be substantiated at investigation. In 2008, 21.9 percent of all substantiated cases of maltreatment involved African-American children (14.2 percent of the general child population) (U.S. HHS, 2010; U.S. Census Bureau, 2009). Strategies that may improve the investigative and assessment processes are the use of assessment tools and cultural competency training.

Assessment Tools

Given that there is often a cultural divide between a family being investigated and the worker conducting the investigation, the use of risk assessment tools, as well as standardized definitions, can help guide the worker in assessing families on safety and risk issues. Use of standardized tools may remove some error from the decision-making process (Chibnall et al., 2003). Workers who have detailed and culturally relevant guidelines about what constitutes abuse and neglect can more easily control bias. Not all standardized tools, however, have been sufficiently tested on children from racial and ethnic minority groups, thus leading to a potential increase in bias. Agencies should be familiar with the strengths and weaknesses of any tools they use and train supervisors and workers to be aware of any potential bias that the assessment tool may introduce into the decision-making process.

The California Family Risk Assessment (CFRA) was developed in the late 1990s in order to help workers assess the risk of maltreatment recurrence. The CFRA was part of a larger child welfare structured decision-making project that aimed to help workers improve decision-making when determining risk. An analysis by Will Johnson (2005) that specifically explored possible problems with racial bias in the CFRA found that use of the instrument would not disproportionately select families of color as being at high risk.

Promising Project—Investigation/Assessment

Project	The Minnesota Structured Decision Making© Family Risk Assessment (FRA)
Location	Minnesota
Researcher	The Institute of Applied Research, St. Louis, MO
Goal	To measure the validity and reliability of the FRA in predicting recurrence of child maltreatment in 15,000 families, including five subpopulations of Caucasian, African-American, American Indian, Southeast Asian, and Hispanic families
Method	The FRA was completed by caseworkers for each family as part of a structured decision-making battery of instruments, and families were rated as being at low, medium, high, or intensive risk for recurrence of maltreatment. Families were provided with services deemed as appropriate and followed for 24 months, and all instances of reported recurrence of maltreatment were tracked. In addition, another group of caseworkers completed online versions of the FRA based on different vignettes in which the family's race was varied, so that researchers could determine whether families of different races received different ratings from caseworkers.
Results	Overall, the FRA showed predictive validity in classifying families as being at low, medium, high, or intensive risk for recurrence of abuse or neglect. It showed levels of predictive validity for the five racial and ethnic subpopulations similar to the entire study sample, with two main exceptions: It was more accurate with the Southeast Asian families and less accurate with the American Indian families than with the overall population. On the vignette study, no differences in risk rating were found by race. Researchers concluded that while the FRA is not designed to be the sole assessment for determining whether families are at risk for maltreatment recurrence, it is a valid screening tool that showed few racial or ethnic biases and may contribute to decision-making consistency in casework with families.
For more information	• Loman, L. A., & Siegel, G. L. (2004). <i>An evaluation of the Minnesota SDM Family Risk Assessment</i>. Institute of Applied Research. www.iarstl.org/papers/FinalFRAReport.pdf • Structured Decision Making© has been rated as showing promising research evidence and as being highly relevant to child welfare programs, according to the California Evidence-Based Clearinghouse for Child Welfare (CEBC). See the CEBC website for more information: www.cebc4cw.org/program/111

Service Provision

Once maltreatment has been substantiated, White families are more likely to receive services that allow the children to remain in the home, while families of color are more likely to have their children placed in out-

of-home care (Derezotes & Poertner, 2005). Differences can also be found in other types of services, including those for children and those for parents (Cahn & Harris, 2005).

A number of child welfare practices show promise for reducing this disparity by increasing availability of services, especially in-home services, for families of color.

Family Preservation and Support Services

In 1993, Congress established the Family Preservation and Support Services program to encourage States to develop family preservation and family support services to keep children safely with their families. Such programs focus and build on family strengths while meeting needs identified by the family to provide practical help. These services typically offer in-home support or counseling and may include parent training, childcare, and concrete services. Family preservation service workers generally have smaller caseloads and are able to spend focused time helping the family to deal with the crisis and to build competence to address future challenges.

Differential Response

Differential response, also known as alternative response or dual-track response, refers to the use of a tailored response for families reported for child maltreatment. Different from the “one response fits all” approach, differential response is most often used when there is a determination of low risk or when the family might not otherwise qualify for services. Families may receive services without a substantiated finding of child maltreatment or, in cases of substantiation, when the child can remain safely in the home while the family receives services.

Differential response provides more options for family involvement in case planning and service provision. The flexibility of differential response means that it is one positive way for jurisdictions to address disproportionality, if they find that a disproportionate number of

families of color are substantiated for child maltreatment.

In FY 2009, the Children’s Bureau funded the National Quality Improvement Center on Differential Response in Child Protective Services (QIC-DR). The QIC-DR has conducted significant research in this area and is currently overseeing demonstration projects in three States that will identify the components that contribute to the success of differential response. The QIC-DR also provides training and technical assistance on this topic to States and counties looking to implement or improve differential response programs.

Informal Kinship Care

Informal kinship care refers to cases in which parents voluntarily place their children with kin without any formal involvement from a child welfare agency. This may happen in response to suspected or unsubstantiated reports of abuse or neglect. Because there is no formal involvement from the child welfare system, the kin are not obligated to be licensed or approved; however, they are also not eligible for most subsidies or supports. Community supports for these families might enable them to care for their children better and keep them from entering the child welfare system.

Family Group Decision-Making

In the Family Group Decision-Making (FGDM) approach, the child welfare agency provides support and information to help the extended family come together and develop a plan for the safety and well-being of the child.⁸ This approach is based on the belief that the family

⁸ For more information on Family Group Decision-Making, see American Humane’s website for the National Center on Family Group Decision-Making at www.americanhumane.org/children/programs/family-group-decision-making/national-center.

Promising Project—Service Provision

Project	Alternative Response
Location	Franklin County, OH (Franklin was 1 of 10 Ohio counties that implemented an alternative response model)
Researcher	The Supreme Court of Ohio and the Ohio Department of Job and Family Services and American Humane Association
Goal	To provide families, including African-American families, the option of a noninvestigative, family-friendly assessment and a more family-driven approach to service delivery and reduce the number of children who enter foster care
Method	The county agency selected nine zip codes that were home to African-American populations and had high numbers of referrals and child removals. Targeting these neighborhoods, the agency implemented an alternative response model, in which services were front-loaded so that families could access services quickly and before children were at risk. The agency also partnered with five community-based settlement houses to increase families' access to services in their neighborhoods.
Results	Early results showed that nearly half of all referrals received an alternative response, and 93 percent of all alternative response cases closed within 45 days. This decrease in case openings was accompanied by a decrease in all child placements and, specifically, a reduction in the number of African-American children in State custody, both in numbers and in proportion to other ethnic groups. In fact, the percentage of children in State care who were African-American dropped to a 15-year low of 50 percent after alternative response implementation. The final evaluation report noted that the major positive effects of differential response on new reports of child maltreatment occurred among African-American families.
For more information	• National Quality Improvement Center on Differential Response in Child Protective Services. (2009). <i>Information summit on disproportionality: Final report</i>. www.differentialresponseqic.org/assets/docs/disproportionality-info-summit-report-final.pdf • Kaplan, C., and Rohm, A. (2010). <i>Ohio Alternative Response Pilot Project: Final Report of the AIM Team</i>. www.law.capital.edu/adoption/AR/Section%201%20AIM%20Final%20Report.pdf • Hawkins, M. K., (2009). Spotlight: Franklin County: Protecting children by strengthening families. <i>Alternative Response Quarterly</i>, 2(1), 5.

has strengths that can be garnered for the child's benefit. Generally, a broad definition of "family" is used and may include godparents, neighbors, community or Tribal members, and anyone else invested in the welfare of the child and family. In fact, one of the early benefits of FGDM may be the identification and location of family members who may not have been involved with the child or may not

have even known about the child before being contacted to participate in FGDM.

The worker, or an FGDM facilitator, is responsible for locating and contacting the family, providing information such as legal requirements, and making arrangements for family conferences. The worker or facilitator may also help implement the family's plan and conduct follow-up conferences or activities.

One positive result of FGDM may be the placement of the child with kin while the child's parents receive training or resources from the formal system and from their natural and culturally based network to prepare them to reunify their family.

The use of FGDM reflects the traditional values of kinship and community seen, for

example, in African cultures, as well as Native American Tribal culture (Mills & Usher, 2004). It may also help promote a community-based approach to addressing disproportionality (Roberts, 2007). FGDM can also help the community at large view child welfare workers and agencies in a more positive light.

Promising Project—Service Provision	
Project	Denver Indian Family Resource Center (DIFRC)
Location	Denver, CO
Researcher and Goal	In 2000, DIFRC received a grant through the Rocky Mountain Quality Improvement Center, funded by the Children's Bureau, to coordinate a project serving American Indian children and families experiencing both substance abuse and child maltreatment.
Method	DIFRC worked directly with families that had contact with the child welfare system by providing intensive case management, coordinating Team Decision Meetings, and offering support groups to help parents prepare to enter substance abuse treatment. DIFRC also supported system change through collaboration with county departments of human services (DHSs).
Results	The project ran from January 2003 through March 2006, and 49 families participated during that time. There was no recurrence of substantiated maltreatment during program enrollment. The goal of keeping children from being placed outside their family and culture was achieved. The number of children placed in foster care decreased from 39 to 19 percent, and placement with relatives increased from 18 to 41 percent. This partnership with DIFRC helped the DHSs provide culturally appropriate services, identify extended family and community supports for children, and further recognize the relationship between substance abuse and child maltreatment. DIFRC also supported adherence to Indian Child Welfare Act standards, provided cultural consultations on cases, and participated in team decision-making meetings coordinated by the Denver DHS.
For more information	• Bussey, M., & Lucero, N. M. (2005). A collaborative approach to healing substance abuse and child neglect in an urban American Indian community. <i>Protecting Children</i>, 20(4), 9–22. • Leake, R. (2007). <i>Denver Indian Family Resource Center: Research report</i>. Denver, CO: Rocky Mountain Quality Improvement Center. Available on the American Humane website: www.americanhumane.org/assets/pdfs/children/pc-rmqic-dif-report.pdf • Lucero, N. M., & Bussey, M. (2007). <i>Project replication handbook: Denver Indian Family Resource Center/Rocky Mountain Quality Improvement Center Project</i>. Available on the American Humane website: www.americanhumane.org/assets/pdfs/children/pc-rmqic-dif-handbook.pdf

Referrals to Culturally Competent Service Providers

Clients who receive services either in-home or in the community may be more receptive to services offered by culturally competent providers. Child welfare agencies can work with community agencies to identify and develop a culturally diverse list of therapists, counselors, and other service providers. Within agencies, management can provide training and direction to child welfare workers, ensuring that they refer clients to culturally competent providers within the community. The providers should have a full understanding of the client’s cultural background, especially the ways in which culture affects beliefs about health, parenting, and behavior, and be able to incorporate the client’s culture into the

services. The provider also should be able to converse in the same language as the client.

Permanency for Children in Out-of-Home Care

African-American and Native American children enter the foster care system at a disproportionately high rate (see Table 1). Once they have been removed from their homes, they are more likely to remain in care and less likely to be reunited with their families than are White children. In addition, the CFSRs found that many States have difficulty recruiting foster and adoptive families that reflect the racial and ethnic diversity of

Promising Project—Service Provision	
Project	Intensive Family Preservation Services (IFPS) Program
Location	North Carolina
Researcher	North Carolina Division of Social Services
Goal	To reduce the number of maltreated children who are removed from their homes by providing services to families that stabilize crises in the home, keep the child and family safe, develop skills and resources to resolve future crises, and improve family functioning
Method	Families receive culturally competent, strengths-based, time-limited services, at least half of which are provided in the family’s home or community. They have round-the-clock access to family preservation workers who have caseloads of no more than four families.
Results	Between July 1994 and December 2003, IFPS programs in approximately 70 North Carolina counties provided services to 2,056 high-risk families, in which children were at imminent risk of being removed from the home. A comparison group of 28,004 high-risk families did not receive IFPS. IFPS had positive results in a number of domains, including mitigating racial disparities in the child welfare system. For example, non-White children who received IFPS were less likely to be placed outside the home than White children who received IFPS. Also, throughout the first year after services were received, the placement rate for non-White children in IFPS was 7 to 12 percent lower than non-White children receiving traditional services.
For more information	Kirk, R. S., & Griffith, D. P. (2008). Impact of Intensive Family Preservation Services on disproportionality. <i>Child Welfare</i> , 87(5), 87–105.

children in need of out-of-home care. The following are some strategies for achieving permanency for children of color in out-of-home care.

Reunification

When the safety of the child can be ensured, family reunification is almost always the preferred goal. Services that promote family reunification include many of the same services needed for prevention: family strengthening, parent education, substance abuse services for parents, and concrete supports such as housing and transportation. The speed with which these services can be put into place has a great impact on the success of reunification: courts may enforce the Adoption and Safe Families Act by terminating parental rights for children who have been in out-of-home care for 15 of 22 months. Thus, most families must meet their goals in this timeframe in order to have hopes of reunification.⁹ Targeting appropriate services for families of color includes a strengths-based cultural competence component in terms of the service provider, accessibility, and coordination with other demands, such as employment and childcare. In addition, placement of children with kin or with foster families that are in or near the children's own neighborhoods may enable parents to visit more easily—a necessity for achieving reunification goals.

Kinship Care

Ideally, when removal is necessary, children are placed directly with kin. In many cases,

⁹ There are exceptions to this timeframe for termination of parental rights, and some of the common exceptions include placement with kin or showing significant progress in achieving case goals.

the children are under the custody of the child welfare system. However, this placement with family members may be more beneficial than regular foster care for the children involved because it helps to preserve community, family, and cultural ties (Roberts, 2001). In addition, for example, placement with kin reflects the longstanding informal practice of kinship care in many African-American and Native American communities.

A Broader Definition of Kin

Building on the kinship care approach, some States and agencies have begun to broaden their definition of who qualifies as kin. While legal definitions have tended to define kin in a fairly narrow way, some cultural traditions use a more inclusive definition. A greater pool of families for a child can be achieved by expanding the definition of kin to include “fictive” kin—adults who may not be related “by blood” but may have another relationship to the child, such as the extended family or Tribe.

For example, former foster parents, members of a cultural community, and others may provide the stability and connection that children or youth need. Carol Harper (personal communication, September 11, 2006) reports on several instances in Family Group Decision-Making with families and friends of older youth that led to identification of and connections with fictive kin.¹⁰ In two instances in which the youth were from African immigrant families, their connections with cultural groups (Ethiopian and Oromo-East African) in their cities provided them with supportive fictive kin and helped reconnect them to their heritage. In another case, an incarcerated African-

¹⁰ Carol Harper is a faculty member at the University of Washington School of Social Work.

American youth formed a relationship with his brother's foster parent during visits made to the correctional facility. The youth came to regard his brother's foster parent as a family member, and they developed a supportive relationship.

Culturally Competent Recruitment Policies

Child welfare agencies and other agencies placing children in foster or permanent homes may use screening processes for prospective resource families that effectively screen out many minority families. Prospective families may be discouraged by caseworkers who lack cultural understanding, forms that are too lengthy, or caseworkers with inflexible working hours (McRoy, 2004). In addition, kin who live in homes that do not have the required number of bedrooms or other features required by State law or policy may not be considered for placement. This may also be an issue for American Indian families, for example, where it is customary for extended family to live together in one home (Jackson, 2005). Policies should take into consideration the cultural customs of a family while continuing to ensure child safety.

Recruiting and Retaining Resource Families

Agencies may need to employ different recruiting methods to enlist resource families who reflect the ethnic and racial makeup of the children and families they serve. In one study to determine best practices for recruiting African-American families, the researcher interviewed personnel from 16 agencies and found that agencies often partnered with community organizations—particularly churches, but also social and civic

organizations—to build solid relationships within the community. They also involved community leaders and hired additional African-American social workers. Once families adopted, the agencies provided ongoing support to help the families (McRoy, 2004).

Establishing an adoption office within a minority community can help to both distance the office from the potential stigma associated with the child welfare office and to establish the commitment of the agency to finding homes for children within the community. Ruth McRoy (2004) uses the example of setting up an adoption agency office within a well-established church to attract community members.

Other recruiting techniques include mentoring programs that provide prospective foster and adoptive families with both the information and the role models they need to make a decision to become a resource family. In these programs, prospective foster or adoptive families are matched with families in their community who have successfully provided foster care or adopted a child to learn about foster care and adoption, including the preparation, placement, and postplacement processes. Offering sliding-scale fees to low-income families who want to adopt may also broaden the pool of prospective families.

Subsidized Guardianship

Subsidized guardianship programs have been established in a number of States to address the problem of foster parents who need support in order to become permanent guardians.¹¹ In subsidized guardianship programs, the caregiver, often a relative,

¹¹ In some States, the programs were funded through time-limited waivers that allowed the States to use Federal funds.

becomes the permanent legal caretaker and receives a monthly stipend, but the rights of the birth parent are not terminated, as in the case of adoption. This may be the best permanency solution for some children, especially older children, when parents are still a part of their lives but unable to provide a permanent and safe home. Subsidized guardianship is also a useful option for relatives who are potential guardians but are reluctant to see parents' rights terminated.

In 2008, the passage of the Fostering Connections to Success and Increasing Adoptions Act gave States the option to use Federal title IV-E funds to subsidize kinship guardians. This should increase the number of relatives who are able to afford to care for related children.

Customary Adoption

Customary adoption refers to the Native American custom of adoption within a Tribe; parental rights are not terminated, and the child grows up knowing his or her biological parents and other family members. There is no stigma attached to this sort of adoption, and the arrangement is more flexible than mainstream legal adoption.

A project in Minnesota, funded in part by a grant from the Children's Bureau, involves the efforts of the Rural Expansion of Adoptive Communities and Homes (REACH) project to reach out and recruit American Indian families in the Upper Sioux community to provide Indian children with permanency. Working with the First Nations Orphan Association, REACH

Promising Project—Foster Care and Adoption

Project	Innovations Increasing Adoptive Placements of Hispanic/Latino Children
Location	Southern California
Researcher	The Latino Institute, funded by the Children's Bureau
Goal	To address the overrepresentation of Hispanic children in the child welfare system in California
Method	A combination of culturally responsive outreach (including a website), presentations to Latino groups, development of a curriculum for adoption applicants, workshops for child welfare professionals, and intensive collaboration with public adoption agencies was used to promote the adoption of Hispanic children (especially males, older children, and sibling groups).
Results	Over 3 years, the project received 632 inquiries, which resulted in 69 placements, far outpacing the goal of 40 placements. Effectiveness was attributed to bicultural administrators, long-term participation in the community, and personal contact between staff and prospective families.
For more information	• <i>Children's Bureau Express</i>. (July/August 2008). Innovative recruitment strategies: The Latino Family Institute. http://cbexpress.acf.hhs.gov/index.cfm?event=website.viewArticles&issueid=96&sectionid=1&articleid=2102 • Tello, J., & Quintanilla, M. (2003). <i>Final evaluation: Innovations increasing adoptive placements of Hispanic/Latino children</i>. Available from Child Welfare Information Gateway at www.childwelfare.gov • Latino Family Institute: www.lfiservices.org/english/index.php

helps communities find legal yet culturally appropriate alternatives to traditional formal adoption, stressing the importance of keeping Native children in Native communities. Social workers have the responsibility of providing information to the communities and completing pending adoptions or other permanency arrangements, including those that do not involve termination of parental rights (Jackson, 2005).

Across the Stages of Child Welfare

There are a number of promising practices for addressing disproportionality that apply across all stages of the child welfare continuum, from prevention to out-of-home care and permanency.

Agency Policy Review and Revision

Agencies should review all policies on an ongoing basis to ensure equity for all children and families. Dennette Derozotes (2006) notes four overriding steps that agencies can take to examine their own policies and practices in terms of racial and ethnic equity:

- Pay attention to agency cultural competence assessment, training, and technical assistance
- Develop a way to measure racial equity in agency programs and outcomes
- Identify and track agency goals by racial and ethnic groups
- Examine racially sensitive monitoring structures to identify practices that will

better serve the needs of children and families

For agencies challenged about where to begin to assess disproportionality, the National Association of Public Child Welfare Administrators (NAPCWA) has developed the Disproportionality Diagnostic Tool (NAPCWA, 2008). The tool allows the user to consider the issue of disproportionality from three “spheres of influence”: the society, the system, and the individual. After the tool is completed, agencies can determine what issues are being addressed and where they are being addressed (e.g., in the agency, in society, etc.) and where interventions still need to occur. In a pilot study at three sites, researchers found that the Diagnostic Tool was able to help agencies identify both their strengths and their areas of vulnerability, so that they could develop an appropriate plan to address disproportionality within the system (Fabella, Slappeg, Richardson, Light, & Christie, 2007; Richardson & Derezotes, 2010).

A Culturally Competent and Diverse Workforce

Social workers, including the child welfare workforce, tend to be non-Hispanic White women. Statistics from a National Association of Social Workers (2006) study found that, in 2004, 86 percent of social workers serving children and adolescents were non-Hispanic White, while 5 percent were Hispanic and 6 percent were African-American.

While it is neither possible nor necessarily desirable to match workers and clients by ethnicity, CPS staff who share the culture or language of a particular family may have a better understanding of the family's background and needs.

Family practices that might be seen as abusive or neglectful by mainstream standards may have a cultural component that would define them differently by a worker of a different background. Commonly encountered cases involve different cultural views of corporal punishment and parents' rights to discipline their children as they see fit. In cases in which children are being harmed, the role of agencies is to honor the intentions while educating the parents about the laws and reasons behind the laws and helping them identify other approaches.

In areas where immigrant groups comprise a significant part of the population, agencies may be challenged by the scope of diversity. Mark Traum and Amy Hurley (2005) describe how Intercultural Family Services, Inc., of Philadelphia uses cultural sensitivity, staff diversity, and cultural training and education to meet the needs of immigrant families from many different countries and backgrounds. Some of their suggestions include having staff understand differences among ethnic groups in help-seeking practices, healing, family member roles, religion, and parenting practices. The agency, which employs staff who represent 20 ethnicities, also promotes ongoing cultural competence through monthly cultural celebrations and distribution of a calendar that features holidays observed around the world.

A demonstration project in Woodbury County, Iowa, designed to meet the needs of Native American families involved with child welfare included both a significant community planning process prior to implementation and a strong component for increasing cultural competence among child welfare workers. Native liaisons were hired to help build trust between the Native American community

and child welfare workers, and these liaisons were also able to help workers "reframe" child welfare challenges in more culturally appropriate ways. For instance, liaisons helped workers untangle complicated family trees to identify kin (Richardson, 2005). In addition, culturally competent practices, such as the use of Native healing practices, were incorporated. The county saw a 28-percent decrease in the foster care disproportionality rate, from 6.8 percent (2005) to 4.9 percent (2008) (Wessel-Kroeschell, 2009). For more information, visit the Minority Youth and Families webpage on the University of Iowa's National Resource Center for Family Centered Practice: www.uiowa.edu/~nrcfcp/dmrc/myfi.shtml

Partnerships/Contracts With Other Organizations

Child welfare agencies may find that establishing partnerships or contracts with faith-based, ethnic, and community-based organizations provides entry into these organizations for the benefit of both. This approach may bring child welfare services closer to those who need them, educate other social service providers about the child welfare system, and demonstrate the agency's commitment to finding homes for children within the community (Chibnall et al., 2003).

Co-location With Other Services

Providing child welfare services to a community in the same location that provides other services, such as after-school programs, health screening, employment and housing assistance, and programs for HIV/AIDS and substance abuse, can serve to reinforce the community nature and interconnectedness of services. This can also strengthen the support system available to children and families.

Promising Project—Cultural Competence Training	
Project	Culturally Responsive Child Welfare Practice With Latino Children and Families: A Child Welfare Staff Training Model
Location	Chicago, IL
Researcher	Loyola University Chicago School of Social Work, in collaboration with the Illinois Department of Children and Family Services, the Latino Consortium, and the Consulate General of Mexico in Chicago
Goal	Develop a culturally responsive, competency-based training curriculum to prepare child welfare supervisors, frontline staff, and court personnel to work effectively with Latino children and families
Method	Project staff developed a curriculum that was used to train child welfare professionals in Chicago and then throughout the State, with members of the Latino Consortium serving as trainers. The training focused on strengths-based, culturally competent practice, and all of the materials were designed to help caseworkers focus on family and community strengths within the cultural framework of their client.
Results	766 public and private child welfare staff and court personnel were trained. Evaluations found that participants showed a significant gain in knowledge about topics covered by the curriculum. When asked about the most useful aspects of the training, participants cited the material on immigration status, legal mandates, cultural differences, linguistic issues, demographics, and family stresses related to migration.
For more information	• <i>Children's Bureau Express</i>. (July/August 2008). Collaboration leads to culturally responsive curriculum. http://cbexpress.acf.hhs.gov/index.cfm?event=website.viewArticles&issueid=96&sectionid=1&articleid=2133 • <i>Culturally responsive child welfare practice with Latino children and families: A child welfare staff training model. Site visit report</i>. Available on the Child Welfare Information Gateway website: www.childwelfare.gov/management/funding/funding_sources/sitevisits/latino.cfm#page=summary

Communitywide Initiatives

Research has shown that disproportionality in child welfare does not occur in a vacuum but often reflects other societal values. Therefore, forming partnerships with other groups and engaging the greater community can help child welfare agencies take a more encompassing approach. One study that took place in a community where racial disproportionality was a problem identified a number of barriers between the community and the CPS agency; community focus groups

then offered a number of solutions to CPS (Rycraft & Dettlaff, 2009):

- Build the child welfare image
- Create a community presence
- Learn about the community and its resources
- Collaborate with other service providers.

Communities, agencies, and other organizations may be able to work together to establish councils or other communitywide bodies to respond to issues regarding

Promising Project—Across the Stages of Child Welfare	
Project	Statewide Reduction in Racial Disproportionality
Location	Texas
Researcher	Casey Family Programs, Texas Health and Human Services Commission, Department of Family and Protective Services
Goal	To reduce the overrepresentation of minority children in foster care in response to a 2005 legislative mandate
Method	Used a combination of strategies, including (1) added cultural competence training for CPS and “Undoing Racism” training for management; (2) contracted with One Church, One Child to recruit foster and adoptive parents; (3) developed community advisory committees; (4) hired a State-level disproportionality director and local disproportionality specialists to serve as resources to CPS staff; and (5) increased diversity among CPS staff. The program began with pilots in five counties and eventually spread across the State.
Results	Early results from the five pilot counties provide strong evidence that disproportionality has decreased in at least four of those counties. Removal rates of African-American children decreased across the State between 2004 and 2008.
For more information	- Casey Family Programs. (2009). <i>And how are the children? A Casey Family Programs report</i>. www.casey.org/Resources/Publications/AndHowAreTheChildren - Texas Health and Human Services Commission and the Department of Family and Protective Services. (2006). <i>Disproportionality in Child Protective Services – Policy evaluation and remediation plan</i>. www.dfps.state.tx.us/Documents/about/pdf/2006-07-01_Disproportionality.pdf

disproportionality. These councils can address the issue as a whole or concentrate on specific aspects of disproportionality, such as hiring practices or foster family recruitment. Such efforts should include representation from groups that are overrepresented in the child welfare system.

States' Efforts

As evidenced through the projects highlighted above, many States and localities are striving to reduce disproportionality. Although many first-round CFSR Final Reports identified the prevalence of disproportionality in the child welfare system, several State reports cited decreases in disparities (U.S. HHS, n.d.):

- The Arizona Final Report noted an increase in the number of children from minority groups who had been adopted from foster care.
- In Illinois, the rates of permanency for African-American children increased, perhaps due to the use of kinship care and guardianship as permanency options.
- The Minnesota Final Report suggests that discussions in the State about the problem of disproportionality helped expand the services offered to children and families of color.
- In Washington State, the time from the termination of parental rights to adoption for African-American children decreased

by 3 months, although the timeframe remained longer than for White children.

Furthermore, States are using the information gathered during the CFSR process to improve current policies and practices in order to reduce disproportionality:

- After its second-round CFSR, North Carolina developed a Program Improvement Plan (PIP) that included goals for enhanced cultural competence of workers and services, reduced disproportionality in foster care, and improved recruitment of foster and adoptive parents who reflect the child welfare population. Action steps included mandatory cultural competence training for all new child welfare employees, a requirement for each county to analyze data and develop its own plan to address disproportionality, increased family team training and the use of subsidized guardianship, and increased collaboration with the State's Commission of Indian Affairs.
- Hawaii reduced the disproportionate number of Native Hawaiian children in its child welfare population after the first CFSR showed that Hawaiian children were 31.3 percent of the child population but 49.7 percent of the child welfare population (FY 2004). Using a combination of differential response, Ohana (family) conferencing, family finding strategies, and outreach to the native community, the State was able to reduce the population of Native Hawaiian children involved with child welfare to 34.9 percent in FY 2008 (HHS, 2009).

The Alliance for Racial Equity in Child Welfare identified 11 States that have directly addressed the issue of racial disproportionality

in child welfare through changes in public policy (2009). Legislatures in these States have enacted new laws and policies to improve services and outcomes for children and families of color. Activities range from the establishment of task forces to mandated research and reports to requiring the involvement of a variety of stakeholders.

Additional research on the effectiveness of the practices discussed in this issue brief is necessary, but these practices can provide a starting point for States and localities to continue examining and implementing methods to reduce disproportionality in child welfare.

Strategies and Research

A number of projects are providing valuable information and evaluation data on effective ways to address disproportionality in child welfare.

- **AdoptUSKids**, a service of the Children's Bureau at HHS, provides training and technical assistance in cultural competence and "diligent recruitment" practices for agencies and States that want to recruit resource families who reflect the ethnic and racial diversity of the children in foster care. Their website lists promising approaches and other resources on this topic. www.adoptuskids.org
- **The Children's Bureau's National Child Welfare Resource Center on Adoption (NCWRCA)** has initiated several projects. These include the Minority Adoption Leadership Development Institute, a program focused on providing and enhancing leadership skills of 20 potential

and emerging minority leaders from the 20 States that have the largest number of children of color awaiting adoption and disproportionately represented in the child welfare system. These emerging leaders are provided mentors from the National Association of State Adoption Programs who work with them as they complete 12 months of job-related project assignments that increase their technical expertise as well as their leadership capacities. Another NCWRCA project is Communities Making Adoption Real for Kids, which focuses on creating a model protocol that helps States to develop and support collaborations with communities of color in an effort to remove barriers to timely adoptions of children and youth within the child welfare system. www.nrcadoption.org

- **The Children’s Bureau’s Western and Pacific Child Welfare Implementation Center** is funding the Alaska Child Welfare Disproportionality Reduction Project. The 4-year project is designed to reduce the disproportionate number of Native Alaskan children in the child welfare system through practice and decision-making changes at the front end of the child welfare system. The State’s Office of Children’s Services will rely more on Tribes to participate in the decision-making, case planning, and service delivery. <http://westpac.fmhi.usf.edu/docs/AlaskaProjectPlan.pdf>
- **The Race Matters Consortium** was formed by a group of child welfare experts, with the sponsorship of Casey Family Programs, the Child and Family Research Center, and Westat, to focus on the problem of racial and ethnic disproportionality in the child welfare system. The consortium has published a number of research reports on the topic, and researchers are currently working on a variety of research projects and tools, including a cultural competence self-assessment for agencies. www.racemattersconsortium.org
- **Casey Family Programs** collected ideas and data through its Breakthrough Series Collaborative on addressing racial disproportionality in child welfare. Teams from around the country focused on this issue, brainstorming new ideas, and holding meetings and phone conferences. The most successful field-tested and measurable strategies and tools were then rapidly introduced and tested throughout the other teams’ systems. www.casey.org/Resources/Publications/BreakthroughSeries_ReducingDisproportionality_process.htm
- **Casey-CSSP Alliance for Racial Equity in Child Welfare** is a collaboration among a number of organizations to reduce disparities and disproportionality by (1) identifying what works to achieve race equity in child welfare services; (2) developing and disseminating new knowledge to the field, (3) promoting effective policy; (4) designing and implementing data collection, research, and evaluation methods that document evidence-based practices and strategies; and (5) ensuring that families and youth are leaders in helping child welfare agencies achieve race equity in child welfare services and programs. www.cssp.org/reform/child-welfare/alliance-for-race-equity
- **The National Conference of State Legislatures** has begun to address the issue by holding a conference to increase legislative understanding of the causes, as well as to share State efforts in this

direction. The organization's website includes a webpage of resources on racial equity in child welfare, as well as a compilation of State legislative efforts to date. www.ncsl.org/programs/cyf/racialequity.htm; www.ncsl.org/default.aspx?tabid=16370

- **The Courts Catalyzing Change: Achieving Equity and Fairness in Foster Care Initiative (CCC)**, funded by Casey Family Programs and supported by the US Department of Justice, Office of Juvenile Justice and Delinquency Prevention, brings together judicial officers and other systems experts to set a national agenda for court-based training, research, and reform initiatives to reduce the disproportionate representation of children of color in dependency court systems. The initiative's mission is to create and disseminate judicial tools, policy and practice guidelines, and associated action plans that child abuse and neglect court systems can use to reduce disproportionality and disparities for children and families of color. www.ncjfcj.org/content/blogcategory/447/580/
- **The Disproportionate Minority Contact (DMC) Resource Center** at the University of Iowa School of Social Work is a collaboration among the university's National Resource Center for Family-Centered Practice, the State of Iowa Department of Human Rights, the Division of Criminal and Juvenile Justice Planning, the Juvenile Justice Advisory Council, and the DMC Committee. The Resource Center serves statewide and community efforts to reduce disproportionality and overrepresentation of minority youth in the juvenile justice and child welfare systems by assisting with evaluation and analysis of

data and providing technical assistance on issues that include health and education-related disparities.

www.uiowa.edu/~nrcfcp/dmcrc/index.shtml

RESOURCES

Find recent resources on racial disproportionality in child welfare on the Child Welfare Information Gateway website: www.childwelfare.gov/systemwide/cultural/disporp

Information Gateway developed a bibliography of resources from 2009-2010, available on the National Resource Center for Permanency and Family Connections website: www.hunter.cuny.edu/socwork/nrcfcpp/info_services/Disproportionality%20bibliography.final.pdf



References

- Alliance for Racial Equity in Child Welfare. (2009). *Policy actions to reduce racial disproportionality and disparities in child welfare*. Retrieved December 27, 2010, from www.policyforresults.org/~media/Alliance%20Policy%20Scan.ashx
- Bridging Refugee Youth & Children's Services. (2010). *Refugee children in U.S. schools: A toolkit for teachers and school personnel*. Retrieved December 27, 2010, from www.brycs.org/documents/upload/ChildWelfare-FAQ.pdf
- Cahn, K., & Harris, M. S. (2005). Where have all the children gone? A review of the literature on factors contributing to disproportionality: Five key child welfare decision points. *Protecting Children*, 20(1), 4–14.
- Casey-CSSP Alliance for Racial Equity. (2006). *Places to watch: Promising practices to address racial disproportionality in child welfare services*. Retrieved December 27, 2010, from www.cssp.org/publications/child-welfare/top-five/places-to-watch-promising-practices-to-address-racial-disproportionality-in-child-welfare.pdf
- Chibnall, S., Dutch, N. M., Jones-Harden, B., Brown, A., Gourdine, R., Smith, J., et al. (2003). *Children of color in the child welfare system: Perspectives from the child welfare community*. Washington, DC: US Department of Health and Human Services, Children's Bureau. Retrieved December 27, 2010, from www.childwelfare.gov/pubs/otherpubs/children/children.pdf
- Derezotes, D. M. (2006). Race matters in child welfare. *Permanency Planning Today*, Summer 2006, 5-7. Retrieved December 27, 2010, from www.hunter.cuny.edu/socwork/nrcfcpp/downloads/newsletter/ppt-summer-2006.pdf
- Derezotes, D. M., & Poertner, J. (2005). Factors contributing to the overrepresentation of African American children in the child welfare system. In D. M. Derezotes, J. Poertner, & M. F. Testa (Eds.), *Race matters in child welfare: The overrepresentation of African American children in the system* (pp. 1–23). Washington, DC: Child Welfare League of America, Inc.
- Derezotes, D. M., Poertner, J., & Testa, M. F. (Eds.). (2005). *Race matters in child welfare: The overrepresentation of African American children in the system*. Washington, DC: Child Welfare League of America, Inc.
- Fabella, D., Slappey, S., Richardson, B., Light, A., & Christie, S. (2007). *Disproportionality: Developing a public agency strategy*. Retrieved December 27, 2010, from the National

Association of Public Child Welfare Administrators website: www.napcwa.org/DDT/docs/DisproportionalityArticle.pdf

Gryzlak, B. M., Wells, S. J., & Johnson, M. A. (2005). The role of race in child protective services screening decisions. In D. M. Derezotes, J. Poertner, & M. F. Testa (Eds.), *Race matters in child welfare: The overrepresentation of African American children in the system* (pp. 63–96). Washington, DC: Child Welfare League of America, Inc.

Hill, R. B. (2005). *Overrepresentation of children of color in foster care in 2000*. Rockville, MD: Race Matters Consortium. Retrieved December 27, 2010, from www.racemattersconsortium.org/docs/whopaper7.pdf

Hill, R. B. (2006). *Synthesis of research on disproportionality in child welfare: An update*. CSSP-Casey Alliance for Racial Equity. Retrieved December 27, 2010, from www.racemattersconsortium.org/docs/BobHillPaper_FINAL.pdf

Hines, A. M., Lemon, K., Wyatt, P., & Merdinger, J. (2004). Factors related to the disproportionate involvement of children of color in the child welfare system: A review and emerging themes. *Children and Youth Services Review*, 26(6), 507–527.

Hutson, R. Q. (2003). *A vision for eliminating poverty and family violence: Transforming child welfare and TANF in El Paso County, Colorado*. Washington, DC: Center for Law and Social Policy. Retrieved December 27, 2010, from www.clasp.org/admin/site/publications/files/0108.pdf

Jackson, K. (2005). Adoption and foster care of American Indian children: Closing the cultural divide. *Social Work Today* 5(5). Retrieved December 27, 2010, from http://web.archive.org/web/20071008063139/http://www.socialworktoday.com/archive/swt_0905p30.shtml

Johnson, W. (2005). Effects of a research-based risk assessment. In D. M. Derezotes, J. Poertner, & M. F. Testa (Eds.), *Race matters in child welfare: The overrepresentation of African American children in the system* (pp. 147–161). Washington, DC: Child Welfare League of America, Inc.

Lemon, K., D'Andrade, A., & Austin, M. J. (2005, July). *Understanding and addressing disproportionality in the front end of the child welfare system*. Berkeley, CA: Bay Area Social Services Consortium. Retrieved December 27, 2010, from http://cssr.berkeley.edu/bassc/public/EvidenceForPractice3_Disproportionality_FullReport.pdf

McRoy, R. G. (2004). African American adoptions. In J. E. Everett, S. P. Chipungu, & B. R. Leashore (Eds.), *Child welfare revisited: An Africentric perspective* (pp. 256–274). Piscataway, NJ: Rutgers University Press.

- McRoy, R. G. (2005). Overrepresentation of children and youth of color in foster care. In G. P. Mallon & P. McCartt Hess (Eds.), *Child welfare for the 21st Century: A handbook of practices, policies, and programs* (pp. 623–634). New York City, NY: Columbia University Press.
- Mills, C. S., & Usher, D. P. (2004). An Africentric paradigm for child welfare practice. In J. E. Everett, S. P. Chipungu, & B. R. Leashore (Eds.), *Child welfare revisited: An Africentric perspective* (pp. 214–224). Piscataway, NJ: Rutgers University Press.
- National Association of Public Child Welfare Administrators. (2008). Disproportionality Diagnostic Tool. Retrieved December 27, 2010, from www.napcwa.org/DDT/tools.asp
- National Association of Social Workers. (2006). *Assuring the sufficiency of a frontline workforce: A national study of licensed social workers: Special report: Social work services for children and families*. Retrieved December 27, 2010, from http://workforce.socialworkers.org/studies/children/children_families.pdf
- National Association of Social Workers. (2007). *Indicators for the achievement of the NASW standards for cultural competence in social work practice*. Washington, DC: Author.
- National Conference of State Legislatures. (2007). *Racial equity: Recent State legislative initiatives*. Retrieved December 27, 2010, from www.ncsl.org/default.aspx?tabid=16370
- Olds, D. L., et al. (2007). Effects of nurse home visiting on maternal and child functioning: Age-9 follow-up of a randomized trial. *Pediatrics*, 120(4), e832–e845. Retrieved December 27, 2010, from www.pediatrics.org/cgi/content/full/120/4/e832
- Overrepresentation of minority youth in care. (2008). [Special issue]. *Child Welfare*, 87(2).
- Richardson, B. (2005). *Evaluation of the Minority Youth and Families Initiative (MYFI) demonstration projects*. Iowa City: DMC Resource Center at the University of Iowa School of Social Work, National Resource Center for Family Centered Practice. Retrieved December 27, 2010, from www.uiowa.edu/~nrcfcp/dmrcr/documents/DraftMYFIYR1SEPT05.doc
- Richardson, B., & Derezotes, D. (2010). Measuring change in disproportionality and disparities: Three diagnostic tools. *Journal of Health and Human Services Administration* 33(3), 323–352.
- Roberts, D. E. (2001). Kinship care and the price of state support for children. *Chicago-Kent Law Review*, 76, 1619–1642.
- Roberts, D. E. (2007). Toward a community-based approach to racial disproportionality. *Protecting Children*, 22(1), 4–9.

- Rycraft, J. R., & Dettlaff, A. J. (2009). Hurdling the artificial fence between child welfare and the community: Engaging community partner to address disproportionality. *Journal of Community Practice*, 17(4), 464-482.
- Sedlak, A. J., & Broadhurst, D. D. (1996). *Executive summary of the Third National Incidence Study of Child Abuse and Neglect*. Retrieved December 27, 2010, from www.childwelfare.gov/pubs/statsinfo/nis3.cfm
- Sedlak, A. J., McPherson, K., & Das, B. (2010). *Supplementary analyses of race differences in child maltreatment rates in the NIS-4*. Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research, & Evaluation and the Children's Bureau. Retrieved December 27, 2010, from www.acf.hhs.gov/programs/opre/abuse_neglect/natl_incid/nis4_supp_analysis_race_diff_mar2010.pdf
- Sedlak, A. J., & Schultz, D. (2005). Racial differences in child protective services investigation of abused and neglected children. In D. M. Derezotes, J. Poertner, & M. F. Testa (Eds.), *Race matters in child welfare: The overrepresentation of African American children in the system* (pp. 97-117). Washington, DC: CWLA Press.
- Stoltzfus, E. (2005, August 25). *Race/ethnicity and child welfare*. Washington, DC: Congressional Research Service.
- Traum, M., & Hurley, A. (2005). Fostering cultural competence in service provision to diverse populations. *Protecting Children*, 20(1), 47-54.
- U.S. Census Bureau. (2009). S0901 *Children Characteristics from the 2008 American Community Survey data set*. Retrieved December 27, 2010, from http://factfinder.census.gov/servlet/STTable?_bm=y&-qr_name=ACS_2008_1YR_G00_S0901&-geo_id=01000US&-ds_name=ACS_2008_1YR_G00_-&-lang=en&-redoLog=false
- U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. (n.d.). *General findings from the Federal Child and Family Services Review*. Retrieved December 27, 2010, from www.acf.hhs.gov/programs/cb/cwmonitoring/results/genfindings04/ch1.htm
- U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. (2009a). *The AFCARS report: Preliminary FY2008 estimates as of October 2009 (16)*. Retrieved December 27, 2010, from www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report16.htm
- U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. (2009b). *Children's Bureau Child and Family Services Reviews promising*

approaches in child welfare: Hawaii. Retrieved December 27, 2010, from www.acf.hhs.gov/programs/cb/cwmonitoring/promise/states.htm#HI

U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. (2010). *Child maltreatment 2008*. Retrieved December 27, 2010, from www.acf.hhs.gov/programs/cb/pubs/cm08/index.htm

U.S. Government Accountability Office. (2007). *African American children in foster care: Addition HHS assistance needed to help States reduce the proportion in care*. Washington, DC: Author. Retrieved December 27, 2010, from www.gao.gov/cgi-bin/getrpt?GAO-07-816

Wessel-Kroeschell, B. (2009). *Addressing disproportionality and disparity in child welfare: Iowa's response to disproportionality*. Retrieved December 27, 2010, from the National Conference of State Legislators website: www.ncsl.org/documents/cyf/Disproportionality_Wessel.pdf

Suggested Citation:

Child Welfare Information Gateway. (2011). *Addressing racial disproportionality in child welfare*. Washington, DC: U.S. Department of Health and Human Services, Children's Bureau.