CHILD WELFARE’S RESPONSE TO DIVERSITY

The US Census Bureau predicts that by 2050 . . .

- Minorities, now roughly a third of the U.S. population, will be the majority.
- The Hispanic population will almost triple; nearly one in three U.S. residents will be Hispanic in 2050.
- The African American population is projected to increase 1%, to 65.7 million (15% of the population).
- Americans of Asian descent are projected to rise from 5.1% to 9.2% of the population.
- American Indians and Alaska Natives are projected to rise from 4.9 million to 8.6 million (or from 1.6% to 2% of the total population).
- The number of people who identify themselves as being of two or more races will more than triple, from 5.2 million to 16.2 million.

Source: US Census Bureau, 2008

Minorities will comprise more than half of all children by 2023.

Rising diversity might be seen by some as unwelcome news for the child welfare system, since it is clear we are already struggling with this issue. For example, we are trying to understand and respond to the phenomenon of disproportionality, which occurs when children from some groups (e.g., African Americans, American Indians) are represented in the child welfare system in greater numbers than they are in the general population (Hill, 2006). Data suggest disproportionality is decreasing in North Carolina, but it is still a significant concern (Duncan, et al., 2009).

Another indicator that the child welfare system is struggling with diversity is the existence of racial disparity in service provision—the fact that families and children from some minority groups receive inferior treatment. For example, although when class and other risk factors are controlled for African Americans have lower rates of abuse and neglect than whites (Sedlak & Schultz, 2005), African American children are far more likely to be substantiated for maltreatment and removed from their homes than white children (CDF, 2006; Derezotes & Poertner, 2001).

Despite these challenges, here in North Carolina we see our growing diversity as a valuable opportunity. For more than a decade we have been bringing the family-centered approach to all we do, guided in part by these principles of partnership:

- Everyone desires respect
- Everyone needs to be heard
- Everyone has strengths
- Judgments can wait
- Partners share power
- Partnership is a process

Child welfare practitioners across North Carolina have discovered that although they are not easy to apply, these principles have the power to help us see the strengths and potential solutions that lie in our diversity. Although cultural and other differences can pose challenges, more and more practitioners now see the benefits that learning about, accepting, and supporting diversity can bring.

Of course, we still have a long way to go. This issue of Practice Notes presents information to help you as you seek to improve outcomes for families and children of all kinds.
“When Dr. King said, ‘Not everyone will cross over’ he was not referring to religion, but civil rights.”

This powerful and educational statement was shared with me by one of my clients as a result of Buncombe County’s “Recognizing and Honoring Differences” PDSA developed for the Breakthrough Series Collaborative (BSC). I have been excited to be a part of our agency’s BSC since the onset, but I never anticipated the impact it would have on my social work practice in such a short time.

After hearing a speakers from Minnesota make a statement about how important it is to simply acknowledge differences, I thought, “How could I have missed such a simple concept during my 12 years in social work?”

I realized that because I had worked with so many families over the years, I made the assumption that I understood their differences. I had never really asked about their specific opinions or points of view that might be a result of their race or culture. Instead, I was just gathering information related to risk and safety and mandated demographics. I immediately knew that acknowledging and honoring cultural differences would be my first PDSA (Plan-Do-Study-Act) as a CPS line worker.

I returned to my team and shared my enthusiasm about this concept. We worked out the logistics and put this idea in the PDSA format. I developed a script (see box on page 3) to use with families of a different race or culture in which I acknowledged that we were different and made sure that families had the opportunity to express how they felt about having me as their social worker.

Wow! Within the first week, the first few responses I obtained were so relevant and powerful I knew this PDSA was a success. I also developed an anonymous survey (with a postage paid envelope) the family could use to provide additional feedback. The responses were not addressed to me, to assure the family their responses would not impact their case decision.

The opening statement of this article, in which my client referenced Dr. King, was given as a result of his explaining that he had overcome having problems or feeling barriers with white people. He stated that because of Dr. King and others fighting for civil rights, he can now go to a magistrate and explain his side of a charge without fearing he would be immediately judged or locked up. He has a right to equal representation. He went on to say that Dr. King was of the opinion that people of color would be given equal opportunities, but that not all people of color would take advantage of this. He stated he believes this is the case, but he has seen change and he had no problem that I was a white social worker. His mother and son were also present and gave their own perspectives. She talked about her youth and the struggles she had growing up in the South. Her grandson stated he didn’t think there is a difference at all in how people who are of a different color are treated.

I engaged with another African America woman that week on a different case who stated she was actually glad that I was white, explaining that he had overcome having problems or feeling barriers with white people. He stated that because of Dr. King and others fighting for civil rights, he can now go to a magistrate and explain his side of a charge without fearing he would be immediately judged or locked up. He has a right to equal representation. He went on to say that Dr. King was of the opinion that people of color would be given equal opportunities, but that not all people of color would take advantage of this. He stated he believes this is the case, but he has seen change and he had no problem that I was a white social worker. His mother and son were also present and gave their own perspectives. She talked about her youth and the struggles she had growing up in the South. Her grandson stated he didn’t think there is a difference at all in how people who are of a different color are treated.

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as it had been her experience in the past that people of her own race that were in higher, authoritative positions often judged her and criticized her for living in public housing and getting assistance. But even more surprising, she stated that her father is white. How many times had I assumed I knew a client’s race or ethnicity, or simply relied on the information the last social worker had provided in the case file? Later, a woman from El Salvador described her background as a child living with a large extended family, her childhood experiences and the lack of opportunity for education, and specific to the case, the disciplinary practices used in her home.

I continue to learn daily about the families with whom I work. I have expanded the script to acknowledge any differences such as religion, tradition, or heritage that, had I not asked, I would have never known existed. I am seeing that even families of my same race have differences that affect their point of view. When I engage with families using the script, I can literally feel barriers melt and doors of communication open. Families are empowered by the fact that I care enough to ask and truly want to understand them better.

Let me repeat: how could I have missed this simple concept for so long? I have begun to share my experiences and successes with others. I hope everyone who reads this article will consider implementing this script as part of their toolkit for engaging families. In only two months, I have learned so much. I cannot fathom the positive effects this PDSA will have over the remainder of my career.

**STRENGTHENING SUPERVISION**

**Tips for Helping Caseworkers Navigate Cultural Differences**

Adapted from CASCW, 2009

- Remind child welfare workers that culture is more than just race: religion, geography, socioeconomic status and many other factors shape who we are. Even someone who looks like us may have a very different culture.
- Encourage workers to allow parents to provide the narrative of their life: their ethnic roots, social class, language of choice, household composition (use a genogram to capture), and social and community supports.
- Encourage staff to explore with parents their family values: how children should behave; the relationship of children to parents and grandparents.
- Discuss with each worker the way culture shapes family strategies for coping with challenges; workers must understand the cultural tradition for responding to a child’s risk-taking behavior.
- Explore the meaning of sparse verbal interactions both as a parent communication style and as a cultural response to a non-family member.
- Emphasize the value of empathy: reinforce listening skills.
- With the worker, discuss how the power inherent in child protection is interpreted by the parents. Is it seen as a threat to their safety as refugees or to their employment? What impact will it have on the respect they are due within the family circle?
- Consider involving a “cultural liaison” or “family advocate” from the ethnic community to share the content of the intervention; consider the uses and role of interpreters.

**RACE AND CHILD WELFARE**

Race can be challenging to discuss. Many people have strong feelings about the history of race relations. Others are reluctant to share opinions or questions for fear of appearing culturally insensitive. In addition, the interaction of race, culture, and child welfare services is complex and hard to untangle.

Yet the fact is that minority children have very different experiences in the child welfare system than white children. Understanding the trends and factors contributing to racial disparity and disproportionality can help practitioners and agencies develop strategies to improve outcomes for all children.

**THE NUMBERS**

For much of our history, non-white children were excluded by many organizations that served children in need. It was not until the 1950s and 1960s that the civil rights movement and national migration patterns led to the steady increase in minority children’s presence in historically white child welfare institutions (Hill, 2006).

As the proportion of minority children involved in child welfare increased, it became clear that children of different races were receiving disparate treatment. We now have a wealth of research documenting some of the ways in which minority children and families tend to fare worse than their white counterparts. For example:

- Many studies found black families are more likely than whites to be substantiated for maltreatment, even after controlling for other factors (studies cited in Hill, 2006).
- African-American children were more than twice as likely as white children to enter care in 2004 (GAO, 2007).
- African-American children remain in care, on average, 9 months longer than white children (GAO, 2007).
- African-American and Hispanic children are twice as likely as white children to be in kinship care, but kinship care providers receive fewer services and benefits and less financial assistance (Hill, 2006).
- Several studies suggest black and Hispanic foster children received fewer or poorer quality mental health services than white children—even after controlling for factors such as need, income, insurance status, maltreatment type, and severity of mental health problem (studies cited in Hill, 2006). Of course, data is only part of the story. To ensure high quality and equitable services for all children, we have to understand the possible causes of racial disparity. We have to uncover the story behind the numbers. Consider whether any of the proposed causes outlined in the box on page 5 ring true for your community or agency.

**MAKING PROGRESS IN NC**

North Carolina has already adopted a number of promising practices thought to play an important part in addressing racial disparities (AECF, n.d.; Hill, 2007), such as:

1. Use of Child and Family Team meetings to increase family participation and informal supports in decision making.
2. Use of structured decision making tools to minimize potential bias.
3. Implementation of cultural competency training for all child welfare staff.
4. Increased attention and resources for front-loading individualized, preventive services, as done under the Multiple Response System.
5. Increased efforts to find relatives and natural supports, including paternal relatives and “fictive kin.”

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**BUILDING CULTURAL SENSITIVITY: DEBUNKING MYTHS ABOUT KINSHIP CARE**

<table>
<thead>
<tr>
<th>COMMON MYTH</th>
<th>THE REALITY</th>
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<tbody>
<tr>
<td>The apple doesn’t fall far from the tree: children are likely to experience the same maltreatment with relatives.</td>
<td>Extended family networks have served as a protective factor in mediating child abuse and neglect among black families (Hill, 2006).</td>
</tr>
<tr>
<td>Kin caregivers only do it for the money.</td>
<td>Many kinship caregivers survive on TANF payments and receive less financial support than non-related foster care providers (Hill, 2007).</td>
</tr>
<tr>
<td>Kin are too old/too poor to care for children.</td>
<td>Kinship caregivers do tend to be older and poorer than non-kin (Ehrle, Green, &amp; Main, 2003). However, “a vast majority of children feel loved by their kin caregivers and happy with their living arrangement” (Shearin, 2007, pg. 35).</td>
</tr>
<tr>
<td>Kin care is not as stable as adoption.</td>
<td>Children placed with non-relatives are three times more likely to be moved to different homes than children in kinship care (Green, 2003). Children in kinship homes are also less likely to reenter care after they’ve gone home or been adopted (Hurley, 2008).</td>
</tr>
<tr>
<td>Kin placements are not as safe.</td>
<td>Children in kinship care are three to four times less likely to be maltreated than children in traditional foster homes (Hurley, 2008).</td>
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</tbody>
</table>

Adapted from Hill, 2007; Cohen, 2008
6. Collaboration with community partners, as done in North Carolina’s System of Care model, to pool resources and share information about available services. In addition, a number of North Carolina counties, including Guilford and Wake, have used the Annie E. Casey Foundation’s “Race Matters” Toolkit to assess and address disproportionality.

We still aren’t where we need to be on the issue of racial disproportionality, but North Carolina has made progress. The percentage of African American children in care has decreased steadily from 50.3% in April 2000 to 40.6% in April 2009. During the same time period, the percentage of Native American children in care decreased from 2.2 to 1.4% (Duncan, et al., 2009).

WHAT ABOUT ME?

For this trend to continue, we must all take responsibility for examining our own practice as well as local and state policies and procedures. A few areas to consider:

What gets measured gets done. With all of the demands and stresses of child welfare practice, it is easy to let racial disparity fall off our radar. Yet we know that agencies make changes in the areas where they focus their attention. Track your agency’s data to see where things stood yesterday, where you are today, and where you end up tomorrow.

Cultivate an attitude of “cultural humility.” Every person has a story to tell about how their family, culture, and community shaped who they are and how they view the world. Let families be your teacher: don’t be afraid to ask questions and demonstrate your interest in their background and values. Nothing helps us recognize our own preconceived notions more than realizing how they compare to someone else’s. Simply remaining aware of our own culture (however we define it) and our own judgments of others can improve our interactions and decision-making.

Think broadly. Culture is about more than just race: religion, geography, socioeconomic status, and many other factors shape who we are. Even someone who looks like us may have grown up in a very different culture.

Spread the word. Mandated reporters, court personnel, foster parents—many of those who interact with child welfare may not realize the prevalence of racial disparity. Seek opportunities to provide training and discuss the impact of race and cultural competency.

Child welfare professionals are passionate about improving the lives of children and families, regardless of their ethnicity or background. To make progress towards equitable outcomes for all children, practitioners can remain informed about trends and contributing factors and stay open to recognizing the influential role of culture in all of our lives.

POSSIBLE CAUSES OF DISPARATE TREATMENT AND DISPROPORTIONALITY

Reporter Bias. Medical providers are one of the top three sources for CPS reports (GAO, 2007), and research suggests racial bias may play a role in their reporting patterns. For example, numerous studies have shown that hospitals report families of color more for child abuse and neglect, even when they have similar presenting problems (studies cited in Hill, 2006). One study found that women of color are more likely to be reported than white women for newborns who test positive for drugs (Chasnoff, Landress, & Barrett, 1990).

The Impact of Poverty. Nationally, African Americans are nearly four times more likely than others to live in poverty (GAO, 2007). This means that African Americans are also more likely to come in contact with mandated reporters who are among the most common sources of reports: law enforcement and social service agencies (GAO, 2007). It is conversely more likely that middle- and upper-class families avoid notice of public agencies, or have the financial resources to resolve issues outside of the child welfare system.

A number of poverty-related factors have also been linked by research to child maltreatment, such as depression, isolation, teenage pregnancy, unemployment, substance abuse, and domestic violence (Hill, 2006). Low income families also have less access to important supports and services, such as affordable housing, substance abuse treatment, family support services, and legal representation for birth parents (GAO, 2007).

Kinship Care and Length of Stay. Research has shown that children in kinship placements tend to stay in care longer than children placed with nonrelatives (studies cited in Hill, 2006). Since minority children are more likely to be placed with kin, they are more likely to experience this effect. One often cited reason for this difference is that relative caretakers may be reluctant to pursue termination of parental rights of family members in order to pursue adoption. To address this concern, federal and state policy now allows for alternative permanency goals for children, including legal permanent guardianship and Alternative Planned Permanent Living Arrangement (APPLA), both of which provide a permanent home outside of foster care without terminating parental rights.

Distrust and Racial Bias or Cultural Misunderstanding within Child Welfare. Many child welfare officials and researchers have suggested that families’ distrust of the child welfare system contributes to disproportionality. In particular, African Americans in some poor communities may consider child welfare agencies as more interested in separating children from parents than in helping families (GAO, 2007). As a result, families may not seek or cooperate with services, which can then increase the risk of a child’s removal.

In addition to possible bias by reporters, there may also be bias or cultural misunderstanding on the part of child welfare caseworkers and juvenile and family court judges (GAO, 2007). Those on the front lines may make unrecognized assumptions about someone from a different class, race, or ethnic group—and those assumptions can lead to more intensive and disruptive interventions in families’ lives.
ENHANCING CHILD WELFARE PRACTICE WITH AMERICAN INDIANS

To help child welfare professionals guard against the mistakes of the past and prepare for successful partnerships with American Indian families, this article provides a brief overview of events that have impacted Native families and offers suggestions for strengthening their practice with American Indian families by fully implementing the Indian Child Welfare Act of 1978.

A BRIEF HISTORY

Before 1871, the U.S. government used warfare and other means to try to eliminate American Indians. Tribes that survived this policy of extermination were removed from their lands and forced onto reservations (Halverson, et al., 2002).

Boarding Schools. After 1871 the government policy toward Indians changed to one of assimilation (Halverson, et al., 2002). As part of this policy, from the 1870s through the 1930s many Indian children were taken from their families and raised in boarding schools—harsh, rigid institutions, the primary purpose of which was to “civilize” Indians and eradicate all traces of Native culture.

The boarding schools had a devastating effect on Indian families, in part because they prevented the passing on of traditions and knowledge about how to raise children and be a family. In addition, the schools introduced new and dysfunctional behaviors (Horejsi, et al., 1992).

“Many of the boarding school survivors returned to their tribes/nations and were unable to pick up the thread of family life, inadvertently continuing the legacy of abuse they themselves experienced away from home” (Fox, 2004). Although the boarding school era ended around 1940, their influence continues to be felt by Indian families and children today (Kalambakal, 2001; Andrzejek, 2004).

Adoption and Foster Care. In the years after 1940 the push to assimilate American Indians continued. Adoptions and child welfare interventions were a significant part of this effort. From the 1950s to the 1970s many private organizations tried to “save” Indian children by removing them from their homes and placing them for adoption in non-Native homes (Goldsmith, 2002).

At the same time, Indian children were placed in foster care at disproportionately high rates: a 1969 survey conducted in 16 states with large Indian populations found that between 25% to 35% of all Native children were removed from their families and placed in foster or adoptive homes. In some states Native children were 13 times more likely to be removed from their homes than non-Native children (Goldsmith, 2002; CWLA, 2005). The majority were placed in non-Native foster homes.

INDIAN CHILD WELFARE ACT OF 1978

Statistics such as these, as well as ten years of hearings, led Congress to pass the Indian Child Welfare Act of 1978 (ICWA). Congress’ purpose in passing this law was to protect the best interests of Indian children and to promote the stability and security of Indian tribes and families (25 U.S.C. § 1902).

ICWA establishes a minimum federal standard for state removal of children from their homes and guidelines for placement in foster or adoptive homes. To meet this standard, states must demonstrate active efforts have been made to prevent the breakup of the family. If these efforts are unsuccessful, out-of-home placement is possible if a court finds the child is at risk of serious emotional or physical harm.

When placement is necessary, ICWA provides a preference system to keep Indian children in an Indian family whenever possible. Applicable to both foster and adoptive homes, this preference system seeks to preserve American Indian communities and culture and respect tribal sovereignty (Wilkins, 2004).

TIPS FOR IMPLEMENTING ICWA

Although it’s been more than 30 years since the passage of ICWA, some child welfare agencies continue to struggle to consistently apply this important law. Following are key suggestions for enhancing ICWA implementation in your practice and in your child welfare agency:

1. Identify. To comply with ICWA child welfare workers should inquire whether children/parents have an Indian heritage or are members of a federally-recognized tribe.

   • Identify the family, including the child, if they are aware of any tribal affiliation.
   • Find out if a parent or grandparent has a tribal enrollment card.
   • Develop a family tree indicating the mother’s and grandmother’s maiden names and the names of the father and paternal grandparents.
   • Contact the appropriate tribe. For a list of federally-recognized tribes go to <http://www.doj.gov/bia/ia_tribal_directory.html>. For contact information for tribes recognized by the state of North Carolina go to <http://www.doa.state.nc.us/cia/tribesorg.htm>.

   Source: NYOCFS, 2006

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   Source: NYOCFS, 2006
tribe AND are the biological children of members of that tribe. For a list of federally-recognized tribes go to <http://www.doi.gov/bia/ia_tribal_directory.html>.

2. Notify. If it learns a child is American Indian, a child welfare agency must immediately contact the child’s tribe to determine whether the child is an Indian child as defined by ICWA (see above). Once tribal affiliation is determined, the child welfare agency must provide written notice of any impending placement proceedings to the child’s parents, Indian custodian, and tribe. ICWA spells out what information must be contained in that notice, which must be sent to the tribe via registered mail, return receipt requested. It is best to phone the tribal contact person and let that person know that you are sending the required registered letter. It is also advisable to make a follow-up phone call a few days after the letter is mailed out.

3. Partner. A cornerstone of strong ICWA practice is active and early participation and consultation with the child’s tribe in the development and review of the service plan (NICWA, 2009; NYOCSF, 2006).

4. Follow Placement Preferences. In the absence of good cause to the contrary, child welfare agencies are required to place the child according to the following order of preferences established by ICWA. Foster care placement preferences: (1) with extended family (third-degree blood ties—first or second cousins, aunts, uncles, grandparents, or stepparents); (2) with Indian foster parents approved by the tribe or with an Indian foster home licensed by the state; or (3) in residential care approved by the tribe. Adoptive placement preferences: (1) extended family, (2) non-related members of the same tribe, (3) other Indian families. These preferences apply even if the tribe elects not to intervene.

Tribes may alter the order of preference for its children, and the child welfare agency must follow this new order. Also, consideration may be given to a parent’s or a child’s wishes with regard to placement. (Note: these preferences are possible because another federal law, the Multiethnic Placement Act, has no effect on ICWA; thus an Indian child may be moved from a non-Indian foster home to comply with these preferences without violating MEPA.)

If an Indian child’s foster care placement disrupts, compliance with ICWA must continue: the agency must send notification via registered mail to the tribe, which has another opportunity to intervene or indicate preferences.

5. Make “Active Efforts.” Under ICWA, child welfare agencies must use “active efforts,” providing remedial services to prevent the breakup of the Native American family. Active efforts are more intensive than “reasonable efforts”—for example, whereas reasonable efforts might be a referral for services, active efforts would be arranging for the best-fitting services and actively helping families engage in those services (NICWA, 2009).

ICWA LEARNING RESOURCES

There is more to know about ICWA. For additional learning resources, including online courses, see vol. 7, no. 2 of Training Matters <www.trainingmatters-nc.org>.

WORKING WITH STATE-RECOGNIZED TRIBES

North Carolina is home to eight American Indian tribes. All are recognized by our state but only one, the Eastern Band of the Cherokee, is federally recognized.

Although ICWA does not apply to children and families from state-recognized tribes, current state law and policy encourage partnership between child welfare agencies and state-recognized tribes. State tribes can be utilized as community partners in working with the child and family—for example, as participants in Child and Family Team meetings and as potential sources of support to help the family stay together or reunify. A 2001 North Carolina law (NCGS §143B-139.5A) directs child welfare agencies to give special consideration to state-recognized tribes. Thanks to this law, when they first come into contact with a child, agencies can consider the child’s Indian heritage in accessing services and making the initial placement.

However, because federal law trumps state law, MEPA and other relevant federal laws do apply to children from non-federally-recognized tribes. Therefore, after the initial placement of a child from a tribe that is not federally recognized, the child’s race or ethnicity may not be considered in changing their placement. Similarly, because of confidentiality laws, child welfare agencies cannot automatically notify state-recognized tribes every time an Indian child is involved with the agency.

Members of the General Assembly, the NC Division of Social Services, the NC Commission of Indian Affairs, representatives from state-recognized tribes, and other stakeholders are currently working to clarify and improve this situation. In the meantime, child welfare agencies should continue to seize every opportunity to partner with state-recognized tribes and to engage all American Indians using respectful, family-centered child welfare practice.
RESOURCES FOR LEARNING MORE ABOUT WORKING WITH DIVERSITY

Introduction to Cultural Competence: A Training Tool
FRIENDS NATIONAL RESOURCE CENTER FOR COMMUNITY-BASED CHILD ABUSE PREVENTION
Explains strategies for assessing cultural competency and improving the ethnic and linguistic responsiveness of family support programs.
<www.friendsnrc.org/resources/culture.htm>

Culturally Competent Strategies for Strengthening Families
FRIENDS NATIONAL RESOURCE CENTER FOR COMMUNITY-BASED CHILD ABUSE PREVENTION (2006)
Offers links to audio files and materials from a teleconference that featured presentations on culturally competent practice within the Community Based Child Abuse Prevention program.
<www.friendsnrc.org/resources/teleconference.htm#cc>

Evidence-Based Practice in Child Welfare in the Context of Cultural Competence
UNIVERSITY OF MINNESOTA SCHOOL OF SOCIAL WORK (2008)

Knowing Who You Are: Video
CASEY FAMILY PROGRAMS
Presents the perspectives of youth in care, child welfare professionals, and foster parents about why race and ethnicity matter and the importance of integrating racial and ethnic identity into child welfare practice. <www.casey.org/Resources/Projects/REI/KnowingWhoYouAreVideo.htm>

Race Matters Toolkit
ANNIE E. CASEY FOUNDATION
Designed to help advocates mobilize resources for vulnerable populations of color in order to reduce racial disparities/disproportionality and promote racial equity.
<www.kidscount.org/kcnetwork/resources/RaceMattersToolkit.htm>

Culturally Competent Practice With Latino Families
GEORGIA DIVISION OF FAMILY AND CHILDREN’S SERVICES (2007)
Provides participants with an introduction to the basic concepts of culturally competent practice and specific skills and knowledge for culturally competent practice with Latino families. <http://preview.tinyurl.com/392dyj>

Racial Disparity in the Child Welfare System
URBAN INSTITUTE (2008)
Panelists in this audio presentation consider how child welfare system administrators are leading initiatives to address racial disparity. <http://www.urban.org/Pressroom/thursday-child/january2008.cfm>

Evidence-Based Practice in Child Welfare in the Context of Cultural Competence
UNIVERSITY OF MINNESOTA SCHOOL OF SOCIAL WORK (2008)

Knowing Who You Are: Video
CASEY FAMILY PROGRAMS
Presents the perspectives of youth in care, child welfare professionals, and foster parents about why race and ethnicity matter and the importance of integrating racial and ethnic identity into child welfare practice. <www.casey.org/Resources/Projects/REI/KnowingWhoYouAreVideo.htm>

PLEASE NOTE
Practice Notes to Discontinue Print Publication
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