PLACES to WATCH

Promising Practices to Address Racial Disproportionality in Child Welfare
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*Paper prepared for:* The Casey-CSSP Alliance for Racial Equity, whose members include five Casey organizations—the Annie E. Casey Foundation, and its direct service agency, Casey Family Services, Casey Family Programs, The Jim Casey Youth Opportunities Initiative and The Marguerite Casey Foundation; as well as the Center for the Study of Social Policy (CSSP) and parents and alumni of foster care.
The Center for Community Partnerships in Child Welfare of the Center for the Study of Social Policy

The Center expresses its sincere thanks to Ernestine Jones for leading the work of this report.

Thanks are also extended to leaders in the ten jurisdictions whose work to reduce racial disproportionality and disparity in their child welfare jurisdictions is provided here. They generously shared their time, insights and experiences:

San Francisco City and County, California
Connecticut
Illinois
Sioux City, Iowa
Michigan
Ramsey County, Minnesota
Guilford County, North Carolina
Wake County, North Carolina
San Antonio, Texas
King County, Washington

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Part I Addressing Racial Inequities

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15 Actions Being Taken to Address Racial Inequities in Child Welfare Services
30 Conclusion
Child welfare systems across the country are charged with keeping children safe and helping them live securely with families, their own whenever possible. These systems struggle every day, often under intense scrutiny, to provide effective and appropriate services to the children, youth and families they serve. Some children become safer and their families grow stronger with good services and supports from the child welfare system, while others receive inadequate treatment, resulting in outcomes for children that fall short of the desired goals of safety, permanence, and well-being.

Children and families of color, especially African American and American Indian children, experience significantly worse outcomes in the child welfare system than do non-minority children. In fact, the disparities in outcomes are so great that racial/ethnic inequities can best be described as a “chronic crisis.” That is, the problem is long-standing, but it is of such urgency that no lasting improvements are possible in child welfare services unless these inequities are reduced and eventually eliminated.

Children of color enter foster care at rates that are disproportional to their presence in the general population, and they remain in care longer—often far longer. Outcomes related to maintaining children in their homes, number of placements, family reunification and adoptions are far better for Caucasian children than for children of color.¹ The available data demonstrate a persistent and troubling fact about child welfare services in all states—the race of children and families is a significant factor determining what happens to children and families of color who encounter these services. The Pew Commission on Children in Foster Care summarized the situation in their 2004 report: “While children of color represent approximately 33 percent of all children in the United States, they are 55 percent of the foster care population and African American children face the gravest disparities; they are 15 percent of the child population, yet 38 percent of the foster care population.”²

In the past ten years, improved data have helped child welfare leaders and others to recognize the scope of racial disproportionality in child welfare services and respond to it. As a result, states and localities have launched a variety of initiatives to reduce the number of children of color removed from their families and placed in foster care, reduce the length of time a child of color remains in foster care, and generally improve their outcomes. These efforts seek to galvanize many forces—community leaders, policymakers, and the child welfare workforce—to dedicate time and resources to reduce the overrepresentation of children of color in the child welfare system.

To better understand these efforts, the Center for the Study of Social Policy (CSSP) engaged a respected child welfare leader, Ernestine Jones, who led this work and prepared case studies of ten jurisdictions that are committed to reducing racial disproportionality and disparity in their child welfare services. The aim was to use these jurisdictions’ experiences to generate learning for—and give guidance to—others in the field. This report is the summary of that work. It is part of a broader effort by an Alliance of the Annie E. Casey Foundation, including Casey Family Services, Casey Family Programs, the Jim Casey Youth Opportunities Initiative, the Marguerite Casey Foundation, and CSSP to address issues of racial disproportionality and disparity in child welfare services.

The report documents each jurisdiction’s individual efforts and observes trends across the ten states and counties. While there are many unique aspects to each jurisdiction’s work, there are also several common themes. The experiences described here suggest a common “trajectory” for how child welfare agencies are choosing to address the issue of race equity:

- Action begins when state or local leaders identify racial disproportionality as a serious problem for their child welfare agency and resolve to address it. Impetus for action can come from both internal and external sources, and seems most powerful when these are combined and aligned.

- Analysis of child welfare outcome data by race and ethnicity is virtually always one of the triggers for agencies to give increased priority to addressing racial disparities. For most jurisdictions, the data reveal such dramatic disparities that, once recognized, action to address the problem becomes urgent.

- Recognizing the scope of the changes required of them, most jurisdictions establish a visible and authoritative entity to spearhead their effort. Special commissions, a task force, a cross-agency management group, and/or community forums are some of the vehicles used by jurisdictions to assure that the attention to race equity is at a suitably high level and is sustained.

- The action plans developed by jurisdictions described in this report are customized to the situation in each state or county; that is, a “one size fits all” approach was not identified. However, in almost all the jurisdictions reviewed for this report, their approaches had four characteristics in common:
  - Jurisdictions are combining multiple strategies, often wide-ranging in scope and requiring change at both the practice and policy levels of agency operation.
  - The strategies are often inter-related with—and in some cases, indistinguishable from—the changes required to improve child welfare services for all children and families. These ten jurisdictions recognize that when services and supports for all families are of a high quality, they are likely to contribute to reducing inequitable outcomes for children and families of color.

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3 Racial Disproportionality is defined as the over- or under-representation of minority children under the age of 18 in foster care compared to their representation in the general population.
Overall strategies that improve or expand services predominate within these jurisdictions. Child welfare agencies and their community partners are trying to increase or improve preventive services, substance abuse interventions, kinship care services, reunification and other permanency strategies to make a difference in the outcomes for children of color in the child welfare system.

Finally, many jurisdictions’ efforts aim to have closer ties—i.e., some form of stronger partnership—with local communities. The nature of these partnerships varies, but generally involves new, more structured communication and relationships between child welfare agency staff and community or neighborhood leaders. Leadership from communities of color was found to be particularly important in influencing the actions child welfare agencies are taking to address racial disproportionality.

A final conclusion can be drawn from these case studies. Jurisdictions are just beginning to test strategies to achieve more equitable outcomes for children of color, and thus their practices are best viewed as “emerging” and as examples of “places to watch.” The actual implementation of work to achieve race equity is still in the early stages. Current efforts have not had time to reverse a problem as entrenched as racial disproportionality and disparity\(^4\) in a public system. Additionally, this problem stretches beyond the purview of child welfare agencies alone, involving factors such as chronic poverty and long-standing institutional inequities—i.e., structural racism—in the “helping” services and the legal system. Given these factors, achieving the goals for race equity set by the jurisdictions profiled here may well require many years. The important fact is that leaders in these states and cities have committed themselves and their successors to this goal. This report is organized in several sessions:

\(^4\) Racial disparity is defined as the disparate or inequitable provision of treatment or services provided to minority groups as compared to treatment or services provided to similarly situated Caucasians.
The Problem of Racial Disproportionality and Disparity in Child Welfare Services

Children of color were first noted to be over-represented in the child welfare system in *Children of the Storm: Black Children and American Child Welfare* (Billingsly and Giovannonia 1972). Data from the 2000 Census and the Adoption and Foster Care Analysis and Reporting System (AFCARS) show the problem has continued. In 2000, there were 812,599 total children in foster care, and while 61% of the total child population was Caucasian, these children made up only 46% of the children in foster care. Black or African American children made up 15% of all children in the United States, but these children made up nearly 37% of children in the child welfare system. This disproportionality—that is, the over- or under-representation of minority children under the age of 18 in foster care compared to their representation in the general population—is summarized in Table 1 below, which shows the total number and percent of children in specific racial groups and the total number and percent of children in the child welfare system, by race, using the 2000 Census and AFCARS data.

In almost every state, children of color are overrepresented in the child welfare system while Caucasian children in foster care are either underrepresented or proportional to their presence in the state’s total child population. For Latino/Hispanic children, the above data suggest that there is not an overrepresentation problem. However, when examined on a state-by-state basis, Latino/Hispanic

<table>
<thead>
<tr>
<th>Racial Group</th>
<th>Children in Population (n)</th>
<th>Children in Population (%)</th>
<th>Children in Care (n)</th>
<th>Children in Care (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Hispanic (White)</td>
<td>44,027,087</td>
<td>60.9%</td>
<td>373,695</td>
<td>45.9%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>10,885,696</td>
<td>15.1%</td>
<td>297,095</td>
<td>36.6%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>12,342,279</td>
<td>17.0%</td>
<td>109,648</td>
<td>13.5%</td>
</tr>
<tr>
<td>Native American</td>
<td>840,312</td>
<td>1.2%</td>
<td>20,774</td>
<td>2.6%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>2,592,178</td>
<td>3.6%</td>
<td>11,387</td>
<td>1.4%</td>
</tr>
<tr>
<td>Other</td>
<td>1,606,260</td>
<td>2.2%</td>
<td>Unknown</td>
<td>Unknown</td>
</tr>
<tr>
<td>Total Minority/Non-White</td>
<td>28,266,725</td>
<td>39.1%</td>
<td>438,904</td>
<td>54.3%</td>
</tr>
<tr>
<td>Groups</td>
<td></td>
<td>100%</td>
<td>812,599</td>
<td>99.9%</td>
</tr>
</tbody>
</table>

Source: 2000 US Census; AFCARS

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5 U.S. Census (2000); The Adoption and Foster Care Analysis and Reporting System (AFCARS) (2000); Annie E. Casey Foundation, KIDS Count found at: http://www.aecf.org/kidscount/stdatabook.jsp

children are moderately overrepresented in ten states while underrepresented in other states. In states where there is a large population of Native Americans, this group can constitute between 15% to 65% of the children in foster care. Thus, taking a state-by-state look at child welfare system disproportionality is helpful in understanding the scope of the problem.

Robert Hill found that all states have a disproportionate representation of African American children in foster care. As of 2000, the child welfare system in 16 states had extreme rates of disproportionality that were more then three and one-half times the proportion of children of color in the state's total child population. Table 2 below provides data, by race, on each state with notable disproportionality.

In addition to clear evidence from the Census and AFCARS data regarding overrepresentation of children in color in the foster care system, other data sources identify differential outcomes for children and families of color at important decision points in the child welfare system. For example, one of the earliest decisions made in a child welfare case is whether to investigate a report of child abuse and neglect. In a 2000 study using data from the National Child Abuse and Neglect Data System (NCANDS), African Americans were found to be investigated twice as often as Caucasians. Another child welfare decision point occurs once an investigation has been founded or substantiated and the worker must decide whether to remove a child from home. An analysis of the 2003 NCANDS data found that African American children who were determined to be victims of child abuse and neglect were 36% more likely than Caucasian children to be placed into foster care.

Table 2. States with Notable Disproportional Rates of Children in Foster Care by Race

<table>
<thead>
<tr>
<th>African American</th>
<th>Native American</th>
<th>Latino</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>State</strong></td>
<td><strong>Children (%)</strong></td>
<td><strong>In Foster Care (%)</strong></td>
</tr>
<tr>
<td>Rhode Island</td>
<td>6.3%</td>
<td>22.5%</td>
</tr>
<tr>
<td>New Jersey</td>
<td>16.4%</td>
<td>61.3%</td>
</tr>
<tr>
<td>New Mexico</td>
<td>2.1%</td>
<td>7.9%</td>
</tr>
<tr>
<td>Iowa</td>
<td>3.0%</td>
<td>11.3%</td>
</tr>
<tr>
<td>Indiana</td>
<td>10.4%</td>
<td>39.5%</td>
</tr>
<tr>
<td>Pennsylvania</td>
<td>13.0%</td>
<td>49.4%</td>
</tr>
<tr>
<td>Arizona</td>
<td>3.7%</td>
<td>14.5%</td>
</tr>
<tr>
<td>Montana</td>
<td>0.4%</td>
<td>1.6%</td>
</tr>
<tr>
<td>Illinois</td>
<td>18.7%</td>
<td>73.5%</td>
</tr>
<tr>
<td>California</td>
<td>7.5%</td>
<td>31.0%</td>
</tr>
<tr>
<td>Oregon</td>
<td>2.1%</td>
<td>9.2%</td>
</tr>
<tr>
<td>Wyoming</td>
<td>0.9%</td>
<td>4.1%</td>
</tr>
<tr>
<td>Minnesota</td>
<td>5.0%</td>
<td>23.8%</td>
</tr>
<tr>
<td>Idaho</td>
<td>0.5%</td>
<td>2.4%</td>
</tr>
<tr>
<td>New Hampshire</td>
<td>0.9%</td>
<td>4.4%</td>
</tr>
<tr>
<td>Wisconsin</td>
<td>8.4%</td>
<td>46.1%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State</th>
<th><strong>Children (%)</strong></th>
<th><strong>In Foster Care (%)</strong></th>
<th><strong>Disproportionality Rate</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Oklahoma</td>
<td>11.0%</td>
<td>22.3%</td>
<td>2.02</td>
</tr>
<tr>
<td>Utah</td>
<td>1.6%</td>
<td>4.2%</td>
<td>2.62</td>
</tr>
<tr>
<td>Alaska</td>
<td>18.6%</td>
<td>55.9%</td>
<td>3.00</td>
</tr>
<tr>
<td>Oregon</td>
<td>1.7%</td>
<td>5.2%</td>
<td>3.05</td>
</tr>
<tr>
<td>North Dakota</td>
<td>8.0%</td>
<td>32.3%</td>
<td>4.03</td>
</tr>
<tr>
<td>Montana</td>
<td>9.6%</td>
<td>31.6%</td>
<td>3.29</td>
</tr>
<tr>
<td>Indiana</td>
<td>0.3%</td>
<td>1.6%</td>
<td>5.33</td>
</tr>
<tr>
<td>Idaho</td>
<td>1.6%</td>
<td>8.7%</td>
<td>5.43</td>
</tr>
<tr>
<td>Washington</td>
<td>2.1%</td>
<td>11.8%</td>
<td>5.61</td>
</tr>
<tr>
<td>Iowa</td>
<td>0.3%</td>
<td>1.9%</td>
<td>6.33</td>
</tr>
<tr>
<td>New Hampshire</td>
<td>0.2%</td>
<td>1.3%</td>
<td>6.50</td>
</tr>
<tr>
<td>South Dakota</td>
<td>9.0%</td>
<td>63.6%</td>
<td>7.06</td>
</tr>
<tr>
<td>Nebraska</td>
<td>1.1%</td>
<td>7.9%</td>
<td>7.18</td>
</tr>
<tr>
<td>Minnesota</td>
<td>1.6%</td>
<td>13.0%</td>
<td>8.12</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State</th>
<th><strong>Children (%)</strong></th>
<th><strong>In Foster Care (%)</strong></th>
<th><strong>Disproportionality Rate</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Wyoming</td>
<td>9.0%</td>
<td>9.5%</td>
<td>1.05</td>
</tr>
<tr>
<td>Colorado</td>
<td>23.5%</td>
<td>26.1%</td>
<td>1.11</td>
</tr>
<tr>
<td>South Dakota</td>
<td>2.2%</td>
<td>2.5%</td>
<td>1.13</td>
</tr>
<tr>
<td>Utah</td>
<td>10.9%</td>
<td>15.9%</td>
<td>1.45</td>
</tr>
<tr>
<td>North Dakota</td>
<td>2.0%</td>
<td>3.0%</td>
<td>1.50</td>
</tr>
<tr>
<td>Pennsylvania</td>
<td>5.1%</td>
<td>7.9%</td>
<td>1.54</td>
</tr>
<tr>
<td>Maine</td>
<td>1.2%</td>
<td>1.9%</td>
<td>1.58</td>
</tr>
<tr>
<td>Massachusetts</td>
<td>10.5%</td>
<td>17.9%</td>
<td>1.70</td>
</tr>
<tr>
<td>Connecticut</td>
<td>13.7%</td>
<td>23.6%</td>
<td>1.72</td>
</tr>
<tr>
<td>New Hampshire</td>
<td>2.5%</td>
<td>4.7%</td>
<td>1.88</td>
</tr>
</tbody>
</table>

The importance of decision point data is recognized by several jurisdictions described in the case studies. For example, King County, Washington, is tracking data related to key decisions that affect a child's or family's progression and outcomes within the child welfare system. King County analyzes outcomes, by race/ethnicity, for the following decision points: accepted referrals, investigations, placement, terminations of parental rights and foster care exits by permanency type. This system has found that while African Americans make up 7% of the county population, 19% are accepted for an investigation, 15% of these investigations are founded for abuse or neglect, 23% of African American children are placed out of their homes for more than 60 days and 27% of parents have their parental rights terminated. (See Table 3 left.)

Data related to how often child abuse and neglect actually occurs by race tell a radically different story from the disproportionality data presented thus far. The federally funded National Incidence Study of Child Abuse and Neglect (NIS), conducted in 1980, 1986 and 1993, found no significant differences in the overall incidence of child maltreatment between African Americans and Caucasians. In a recent paper completed by Robert Hill of Westat, *Synthesis of Research on Disproportionality in Child Welfare: An Update*, he reports that “after controlling for various risk factors (including income and family structure), NIS-3 (the study conducted in 1993) found significantly lower rates of maltreatment for African American families relative to Caucasian families.”

Taken together, these data are sobering and have helped to create a call to action in communities across the country. The Pew Commission on Foster Care's 2004 recommendation to reduce the disproportionate representation of children of color in the child welfare system was timely and powerful: “The Commission urges policymakers and practice organizations to intensify their efforts to eliminate these disparities.” An increasing number of states and local jurisdictions are responding, and the next section provides an overview of the strategies undertaken by the ten jurisdictions profiled as part of this study.

### Table 3. King County, Washington, Disproportionality Data

<table>
<thead>
<tr>
<th>Referrals Accepted for Investigation</th>
<th>% in Population</th>
<th>% of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Racial Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caucasian</td>
<td>68%</td>
<td>54%</td>
</tr>
<tr>
<td>African American</td>
<td>7%</td>
<td>19%</td>
</tr>
<tr>
<td>Native American</td>
<td>1%</td>
<td>6%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Investigations</th>
<th>% of Referrals</th>
<th>% of Referrals</th>
<th>% of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Findings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caucasian</td>
<td>59%</td>
<td>31%</td>
<td>10%</td>
</tr>
<tr>
<td>African American</td>
<td>59%</td>
<td>26%</td>
<td>15%</td>
</tr>
<tr>
<td>Native American</td>
<td>77%</td>
<td>11%</td>
<td>12%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Placement, Children Placed Out of Their Homes &gt;60 Days</th>
<th>% in Population</th>
<th>% of All New Placements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Racial Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caucasian</td>
<td>68%</td>
<td>52%</td>
</tr>
<tr>
<td>African American</td>
<td>7%</td>
<td>23%</td>
</tr>
<tr>
<td>Native American</td>
<td>8%</td>
<td>11%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dependencies Established</th>
<th>% in Population</th>
<th>% of Dependencies (first two quarters 2004)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Racial Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caucasian</td>
<td>68%</td>
<td>51%</td>
</tr>
<tr>
<td>African American</td>
<td>7%</td>
<td>27%</td>
</tr>
<tr>
<td>Native American</td>
<td>8%</td>
<td>5%</td>
</tr>
<tr>
<td>All other races</td>
<td>24%</td>
<td>17%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Permanency Exits</th>
<th>Reunifications</th>
<th>Adoptions</th>
<th>Guardianships</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caucasian</td>
<td>71%</td>
<td>12%</td>
<td>10%</td>
</tr>
<tr>
<td>African American</td>
<td>63%</td>
<td>15%</td>
<td>14%</td>
</tr>
<tr>
<td>Native American</td>
<td>54%</td>
<td>21%</td>
<td>16%</td>
</tr>
<tr>
<td>Multi-racial</td>
<td>58%</td>
<td>14%</td>
<td>19%</td>
</tr>
</tbody>
</table>


Actions Being Taken to Address Racial Inequities in Child Welfare Services

To identify jurisdictions for inclusion in this review, leaders in the child welfare field and in race equity work were asked to recommend places they believed offered promising practices, or would be “places to watch.” From among the jurisdictions initially recommended, ten were chosen for geographic variety, diversity in the racial composition of the community, for a mix of state versus county-administered child welfare systems, and to represent rural and urban populations. The site-by-site summaries appended to this report describe each state’s or locality’s individualized approach to reduce racial disproportionality in child welfare. This section identifies activities that were characteristic of a number of the sites.

The ten sites are listed below. (Note: The site number in this list corresponds to the site number in Table 4 below.)

1 California—San Francisco City and County
2 Connecticut
3 Illinois
4 Iowa—Sioux City
5 Michigan
6 Minnesota—Ramsey County
7 North Carolina—Guilford County
8 North Carolina—Wake County
9 Texas—San Antonio
10 Washington—King County

15 See Appendix 2—Leadership Interviews
16 See Appendix 4—Site Visit Participants
Many of these sites have affiliation with the Annie E. Casey Foundation’s Family to Family Initiative or the Casey Family Programs’ Breakthrough Series Collaborative. Six sites have implemented the strategies of the Family to Family Initiative. Family to Family is a comprehensive child welfare reform effort; its goals include developing a network of family foster care, ensuring children are routinely placed with families, increasing the number and quality of foster and kinship families, providing timely services to birth families and children, determining what supports a family needs to keep children safely at home and to better support children who do come into care, involving families in the decision-making process and increasing the capacity of communities to help families involved in the child welfare system. Reducing racial disproportionality is a fundamental goal that all participating Family to Family sites are asked to address.

The Breakthrough Series Collaborative on Reducing Disproportionality and Disparate Outcomes for Children and Families of Color in the Child Welfare System brought thirteen teams from around the country together to test innovative strategies to impact disproportionality. The lessons learned were shared quickly with all teams for implementation and testing throughout their systems.

These ten jurisdictions are implementing an array of strategies to effect change in many parts of their child welfare systems. Taken together, the strategies aim for broad impact on each jurisdiction’s child welfare system and improved outcomes for all children and families they serve. There is a common focus on reform of both policies and practices and the creation of a different relationship between child welfare agencies and local neighborhoods and communities.

While each jurisdiction’s work is unique, several activities and strategies are present across many of the jurisdictions. The activities can be grouped to reflect a systematic and sequenced approach to this work:

- Sites began by first highlighting the problem of racial inequity in their child welfare system and prioritizing the need for action to address it;
- Through the production, analysis and use of data, sites better understood and broadened the number and range of stakeholders who knew the extent and dimensions of the problem;
- Including communities in the discussion is allowing for the development of more comprehensive action plans and strategies aimed at reducing disproportionality in their systems;
- Services and supports are being expanded or made more accessible to the families and neighborhoods experiencing the highest levels of disproportionate intervention by the child welfare system;
- Policy changes were made by some jurisdictions to reinforce the child welfare system reforms; and
- Ongoing evaluation strategies were institutionalized to ensure ongoing tracking of progress.

Additionally, all sites sought external funding to support this work.

Table 4 on the next page shows which sites implemented specific strategies. The strategies undertaken by all sites are highlighted. More detailed information about the major strategies, along with site examples, are described following the table.

### Table 4. Strategies to Address Racial Disproportionality in Ten Jurisdictions

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#### Attention to Racial Disparities
- Established a task force or committee
- Developed a plan of action
- Participants were involved in training
- Targeted specific child welfare decision points
- Staff changes occurred
- Public declaration of need to do the work
- Family to Family site

#### Development and Use of Data
- Conducted research to capture data
- Developed a written report about the work

#### Partnership with the Community
- Engaged community

#### Service Delivery Improvements
- Focused on a specific target area

#### Policy Changes
- Policies and procedures were focused on
- Legislation enacted to support the work

#### Ongoing Evaluation
- Developed an evaluation process

#### Funding
- Received funding from an external source
Identifying Racial Inequities and Prioritizing the Work

The first step in all of the jurisdictions whose race equity initiatives were reviewed was an identification of the current racial disparities in their systems and an explicit commitment to reducing these disparities. Across all the examples described in this paper, this important “threshold action” occurred as state and/or county child welfare leaders recognized that child and family outcomes in their own system were vastly different depending on race, and decided to give priority to reducing the overrepresentation of children of color.

In some jurisdictions, this recognition was initially “internal”—that is, by administrators themselves. In these instances, the first step has usually been to identify the problem and agree on an internal management structure or forum (i.e., task force, special management group, or other vehicle) to address the issue. In this way, agency leaders give both visibility and management priority to the issue, and simultaneously provide a mandate to an identified group of staff—usually representing all levels of the organization—to address the problem and resolve it. For example:

- **Guilford County, North Carolina**, focused in on the overrepresentation of minority children in their child welfare system as part of their Family to Family Initiative. As evidence mounted (as the result of their data review) that overrepresentation of minority children was a major problem, the level of interest among Department of Social Services staff increased. In response, agency managers formed the Guilford County Workgroup on Disproportionality (GCWOD), comprised of DSS staff from the management and supervisory levels as well as members of the DSS Board. The GCWOD’s mission is to create an internal DSS process—with community input—to reduce the disproportionality and treatment disparity of African American children in the county.

The internal management processes that are established to address disproportionality often have a wide scope, reflecting the agency's understanding of how many elements of agency policy, administrative rules, and practice need to change. The breadth of the charge given to the internal groups responsible for addressing disproportionality is often an indication of the high priority that management is placing on this assignment. For example:

- In **Ramsey County, Minnesota**, the Community Human Services Department established internal action teams to address numerous dimensions of agency operations—focusing specifically on leadership, recruitment, staff retention, training, and contractual services. Activities of the action teams included developing performance appraisals related to cultural competence, ensuring equal opportunity in career development and promotion, and increasing the cultural competence of organizations under contract to the child welfare agency.

In some jurisdictions, the impetus for addressing racial inequity in child welfare services is a response to external priorities, as well as to the agency’s internal recognition of a problem. In these instances, community leaders often are the first to call attention to the problem, and then joint efforts of those leaders and child welfare administrators give direction to the agency’s efforts to address the problem. These examples illustrate the importance of the “inside/outside” forces that can be brought together to give even more momentum to initiatives to achieve race equity. They also illustrate the breadth of the community leadership that is likely to care about these issues and that is willing to use its own political capital and resources to take action. For example:

- In **King County, Washington**, the concern about overrepresentation of African American children in the child welfare system was first raised by a group of African American social workers and representatives from the Black Child Development Institute. The initial systemic response by Department of Social and Health Services was to establish a special child protective service unit...
and in 2003, the Office of African American Children’s Services became a permanent office within DSHS. Its mission is to strengthen African American families and provide culturally relevant services when the children remained at home.

An even earlier example of external attention to the problem of racial disparities is provided by Illinois, where recognition of the issue began in the early 1990’s:

In Chicago and Cook County, Illinois, in 1993, community members became alarmed at the number of children in the child welfare system and even more alarmed that the majority were minorities and mostly African American children. African American community leaders, advocates and child welfare service providers came together to develop a plan to address racial disproportionality and disparate treatment of minority children in the child welfare system and presented their concerns to members of the Illinois Legislative Black Caucus. The Governor responded by issuing an Executive Order formally establishing the African American Family Commission to assist the Illinois Department of Children and Family Services to “advocate for and help develop policies, plans, and programs that promote family preservation and strengthen African American communities in Illinois.”

The Commission is composed of leaders from many fields, and its highly visible role, and its accountability under a public mandate, indicates the priority given to the issue by both the legislative and executive branches of government.

Yet another type of external pressure for change can be seen in the history of Sioux City, Iowa’s change effort:

In Sioux City, addressing the needs of Native American children and their tribes and families became a community-wide concern as more information became known about the Department of Human Services’ policies and practices. Data analysis indicated that more Native American children were coming into the child welfare system and that Indian Child Welfare Act mandates for working with the tribes and families were not being followed. This strong attention by the local community to the problem has remained steady and provides constant impetus for the local child welfare agency to continue its efforts to change. For example, an annual Memorial March Honoring Lost Children is sponsored by the tribal communities to call attention to these issues and concerns. The purpose of the protest march, held on the day before Thanksgiving, is to call public attention to issues of disproportionality and disparate treatment of Native American children in the foster care system.

Regardless of where the impetus for change comes from—internally or externally to the child welfare agency—most jurisdictions start their process for taking action by developing a framework that will guide their actions. The framework reflects both the general understanding of the jurisdiction about why this problem developed as well as the scope of action that will be necessary to reverse the pattern of inequity. In effect, each jurisdiction develops a framework for how to think about racial disproportionality, given the unique features, history, and context of their communities. In some instances, the framework includes information about structural racism and its impact on the development and maintenance of systems that treat minorities differently than their Caucasian counterparts. Other workgroups frame the disproportionality issue by emphasizing how poverty and race are intertwined and the extent to which this results in negative outcomes for poor families of color. This “framing” can be important because it suggests the scope of the solutions that each jurisdiction will develop.

Several different frameworks can be seen in the jurisdictions reviewed for this report:

Guilford County’s Workgroup on Disproportionality includes as a key strategy the training of child welfare staff on institutional racism. The Undoing Racism Training, provided by the Insti-

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Wake County, North Carolina, has given extensive attention to its communications efforts around the challenge of achieving greater race equity in its child welfare services. Multiple presentations have been made to the Wake County Human Services staff about disparities in the system, and staff have been invited to make suggestions for change. The Director of Child Welfare made a presentation to the leadership of the public schools including the social work, psychology and guidance departments regarding the disproportionality work. A follow-up presentation was also made to all school social workers where data were distributed on the number of reports and the racial breakdown of reports for each of the over 100 schools in Wake County. Wake County Human Services also contracted for a large-scale multi-media campaign called Believe in A Child. The campaign included newspaper inserts, radio and television public service spots, and billboards to specifically recruit families to foster and hopefully adopt older African American youth.

Giving public visibility to an issue in this way can occur at a state level as well. In Michigan, the appointment of a Children of Color Task Force was just the beginning of a steady communications campaign about the importance of this issue for the future of child welfare services in the state:

- The Michigan Advisory Committee on the Overrepresentation of Children of Color in Child Welfare held focus group meetings in selected counties around the state, some of which had the highest disproportionality rates. Two public hearings were held to hear testimony from the community to obtain information that could be used to guide the Committee’s work in addressing overrepresentation and disparities. The action plan was to be presented to the Legislature and the Governor in November 2005 and a comprehensive report was presented to the Legislature on March 21, 2006.\(^\text{20}\)

As agency managers identify achieving racial equity as a major agency priority, and develop an initial framework for addressing this issue, communications with internal as well as external stakeholders becomes a crucial step. This ensures that the many people and organizations that must be mobilized in order to address the problem are aware of it and—ideally—are motivated to take action. Several unusually strong communications efforts are included among the jurisdictions whose initiatives were reviewed for this report:

- In Ramsey County, Minnesota, the County Community Human Services Department has created a framework for how social workers are to deliver services and provides tools and assessments to enhance their cultural awareness and competency. This framework includes the development and implementation of a social worker’s guide for practice, a handbook for supervision, a self-assessment tool for use by the child protective services staff to aid in increasing their diversity awareness and the Family-Centered Assessment Guidebook for social work practice.\(^\text{19}\) This practice-driven framework helps make clear to agency staff at all levels the different actions that are in their control and which are believed to be important in creating different results for the families and children they serve.

19 See Appendix I—Reference List
All of these actions—setting the initial management priority, developing a framework, and launching communications campaigns—help to create an organizational climate that is conducive to changing policy and practice to achieve greater racial equity. Managers interviewed for this report indicate that this careful attention to making staff and community members aware of the problem is an important prerequisite for getting anything done. Without letting everyone know about the importance of this issue, and that the efforts to address it are going to be long-term, high priority agency initiatives, it is unlikely that the durable efforts required to make a difference can be maintained.

Developing and Using Data to Guide Strategy Development and Establish a Base of Accountability

Review and analysis of data about the operations of child welfare services has been enormously important for “making the case” to address racial disproportionality in all of the jurisdictions that contributed to this report. It is through the production and analysis of data that the scope of racial disproportionality is identified in a system. Reviewing data also assists systems in moving from a hypothetical or theoretical framework to the identification of the specific nature of the problem in that jurisdiction and thus creates urgency for action. Data not only make this issue real for staff, data also help them set priorities for moving forward. And, in the long run, tracking the data over time allows staff to understand when their interventions are having a positive effect. Data used for accountability purposes help the various workgroups (or other management entities) to refine their strategies as well as promote broader participation in their efforts at both the staff and community level.

Fortunately, child welfare systems have become more data savvy in recent years, with more capacity to understand the trends within their service systems. Management reports can be more readily produced by State Automated Child Welfare Information Systems (SACWIS) at the macro level, and some systems have developed the capacity to look at case management practices of individual frontline units and workers. In this regard, the data capacity and analysis that is part of the Family to Family approach provides useful examples of what is possible when jurisdictions adopt a systematic review of longitudinal data. Family to Family assists child welfare systems in the development of longitudinal data and promotes collecting data at various child welfare decision points. By looking at data related to specific decision points, staff better understand how and where the system produces inequitable outcomes. The decision points most often examined by the jurisdictions in this report include investigations, substantiations, placements, termination of parental rights and exits to permanency. For example:

♦ Over the past four years, Wake County Human Services has implemented several strategies in attempting to reduce racial disparities and to improve child welfare outcomes for all children. Most of the strategies were a direct result of Wake County’s involvement in Family to Family and the consequent data analysis conducted by the Racial Disparities Workgroup. Shortly after implementing Family to Family, leaders from WCHS’s Child Welfare Division began reviewing data that suggested racial disparities in the county were more dramatic than they had previously understood. WCHS leaders made the decision to confront the disparities openly and directly and to do so with community partners at the table (as described in the previous section and in the detailed case study).

A similarly strong reliance on data was the impetus for San Francisco’s decision to address racial disproportionality so systematically. Further, San Francisco’s experience indicates how important it is to share data widely, use it to educate staff and the public, and to link data to an effective communications campaign:

♦ In San Francisco, the Disproportionality Task Force conducted an internal review of DHS’s data to get a more in-depth understanding of
issues such as the source of the referrals, reasons why so many referrals were being made and why minority children were coming into out-of-home care as opposed to other options for care such as intensive family preservation or relative care. As part of its plan to use and share data, the Task Force held a leadership symposium in November 2004 on Fairness and Equity in California’s Child Welfare System. Information was made available to the public on the nature of the problem, data were shared and the plan of action was presented for review and reaction of the community.

Collecting and analyzing data around key child welfare decision points has been very influential for several of the jurisdictions in this report. “Breaking down” the data in this way helps managers and staff see the effects of specific actions taken on behalf of children and families and helps to identify the points in the system where practice change (and often policy change) needs to occur. Such analysis can often help managers focus change efforts on very concrete, “do-able” changes, which is important both for motivating staff and for tracking progress. For example:

♦ In King County, recognizing that understanding the theoretical framework was not enough, the King County Coalition on Racial Disproportionality commissioned a more detailed report on disproportionality in the County. The report helped to determine the extent to which disproportionality exists at each child welfare decision point. The findings revealed that African American and Native American children are overrepresented at each decision point. The Coalition set out to implement targeted interventions at three decision points—investigations, placement and permanency—as well as to address the institutional factors that contribute to the problem.

The lesson from all of these jurisdictions is that review and analysis of data about the performance of the system must be thorough, individualized to the jurisdiction, specific to the level of detail of decision points whenever possible, and ongoing. Also, data are most influential when they are used as part of a broader effort to help staff and the public understand the issues involved in disproportional outcomes for children and families of color. While such use of data is just a tool in a much broader systems change effort, the effective use of data is one of the most effective tools at the beginning of these efforts and—especially when data are conceived as the basis for agency accountability over time—one of the most enduring.

Partnering with Communities to Achieve Change

Once internal efforts are underway, child welfare systems tend to recognize that this work cannot succeed if done in isolation. Multiple societal and community level circumstances impact whether families come to the attention of child protective services and how quickly they are able to exit the system—and thus multiple parties must be involved in the design and implementation of solutions. Additionally, child welfare leaders now acknowledge that their work and staff have too often been at a distance from the experiences and expertise of the communities and families who are most impacted by child welfare services. Thus, through a variety of mechanisms—tapping into pre-existing alliances within the community, sharing data, cultivating new partnerships—new and stronger relationships are being developed between child welfare agency staff and community leaders and residents to focus specifically on racial disproportionality. These partnerships help the child welfare system better understand existing cultural or community forces as well as assist in the development of services and supports at the neighborhood level.

These partnerships take different forms in different communities. For some jurisdictions, the partnerships focus on parents and residents; in others, the focus

is more on the leaders of the myriad organizations and entities (courts, advocates, provider agencies) whose operations are crucial to child welfare outcomes. The choice of which partnership strategy to use depends on how each jurisdiction understands the problem it faces and frames the steps that it will take to achieve change.

In the jurisdictions contributing to this report, a variety of partnership approaches are being implemented. In San Antonio, the jurisdiction began with the principles of the “community partnership” approach to child welfare change, believing that parents, neighborhood residents, and key public and private agencies had to be involved in developing the next steps for improving local child welfare services:

*In San Antonio, Texas, the Community Partnerships in Child Welfare was established in San Antonio to involve the community in developing a network of support for at-risk families, changing the culture, policies and practices of the child welfare agency to be more family-centered and building a stronger base of community leaders who make decisions about the direction of the Partnership. The Partnership encourages strong ties between families, their support systems, including both formal and informal helpers, and the communities in which they live with emphasis on making sure that families get what they need, when they need it and where they need it. The Partnership uses self-evaluation to include quality service reviews that examine overall child welfare practices.*

Another form of partnership can be seen in jurisdictions that participated in the Breakthrough Series Collaborative. In these jurisdictions, teams consisting of key leaders whose actions affect child welfare services were brought together to develop and implement practical solutions that could contribute to more equitable outcomes for children and families of color. These teams in turn became powerful alliances committed to this goal: As an example:

*In Connecticut, the Department of Children and Families participated in the Breakthrough Series Collaborative: Reducing Disproportionality and Disparate Outcomes for Children and Families of Color in the Child Welfare System (BSC), an initiative of Casey Family Programs. As a part of the BSC, the Connecticut team, which included the Department of Children and Families, the Police Department, University of Connecticut, Yale University, City of Waterbury, New Opportunities, Inc., and Alliance Staffing, learned to use Plan, Do, Study, Act Cycles (PDSAs) to quickly test ideas and strategies. One PDSA involved exploring the extent to which child welfare staff and stakeholders understood the importance of racial, cultural and ethnic identity formation in youth. As a result of this PDSA, Connecticut delivered training in order to raise awareness among DCF staff and stakeholders using the “Knowing Who You Are” video.*

Other jurisdictions have implemented similarly broad-based efforts to enlist community support and involvement. Again, the goal is to mobilize the many forces whose actions are necessary if the system problems underlying race inequities are to be altered. San Francisco’s “reaching out” to a very wide range of partners illustrates the scope of partnerships that some managers feel is essential to this effort:

*San Francisco’s Disproportionality Task Force was formed of individuals representing the Department of Human Services, the Department of Public Health, the Department of Social Services, Inter-City Family Resource Network, Inc., Bay Area Academy, the Children’s Council of San Francisco, The Youth Law Center, the State Bar of California, the Department on the Status of Women, the Kinship Support Network and other community-based organizations. With funding from the Stuart Foundation, the Disproportionality Project was developed “to assemble representative voices of community and faith-based organizations, business establishments, city departments and families to...*
determine collectively how to decrease the number of African American children entering the foster care system.” In November 2005, a Leadership Forum on Fairness and Equity was held and the child welfare agency shared data and information about its work to reduce disproportionality.

A key factor in the effectiveness of these partnerships is their recognition that the new working relationships are not just a matter of forming a temporary commission or Task Force, but instead represent a fundamental new “coming together” to work differently, change practice and policy, and sustain change. In these instances, the partnerships become the basis for restructuring some of the major practices of child welfare systems, and for ensuring that those changes are reflected in multiple systems. None of the jurisdictions contributing to this report feel that their partnerships have yet had that effect (as all are of recent vintage), but several of the partnerships have indicated that fundamental change is their goal. For example:

- In Sioux City, Iowa, the Community Initiative for Native Children and Families (CICNF) came together as a community-based coalition with the mission to ensure that Native Service Providers and public and private agencies work together to make a difference for Native American Families. CICNF is active in pursuing compliance with Indian Child Welfare Act. These representatives meet regularly, discuss Native issues and concerns and work with the Department of Human Services to develop strategies for resolving problems. The CINF committee brought together representatives from Tribal council leaders, judges, community representatives, a Tribal domestic violence representative, The National Indian Child Welfare Association, Native Service Providers, The Human Rights Commission, Iowa Legislature, Woodbury County Department of Human Services, County Administration, Universities of Iowa and South Dakota and the Sioux City Police Department.

**Improving Service Delivery**

Perhaps the most frequently used strategy to improve results for children and families of color in the ten jurisdictions reviewed for this report are the efforts—by child welfare agencies and their community partners—to improve the service array available to families at-risk of becoming known to the child welfare system or who are already involved with child protective services. Service improvements in various stages of implementation in the ten jurisdictions include preventive services, substance abuse interventions, kinship care services, reunification and other permanency strategies to make a difference in the outcomes for children of color in the child welfare system. These new services and improved practices are often accompanied by deliberate efforts to have closer ties—i.e., some form of community partnership—with the neighborhoods and local communities that are served by the child welfare agency.

An important aspect of almost all the ten jurisdictions is the recognition that improvement in services to all families will result in better outcomes for children and families of color. That is, the services most valuable to minority families are often the services that are critical for the success of all families. Thus, many of the jurisdictions have committed themselves to raising the standard for all child welfare services as a way of achieving better outcomes for children and families of color. This can be termed a “universal service” approach—i.e., expanding the reach and quality of services that affect all families to make a measurable difference in the outcomes of minority families. Two examples of this approach illustrate how it can be done:

- In San Francisco, the Child Welfare Redesign Project emphasizes using Differential Response during the initial phase of its child protective services. When reports come into the child abuse hotline, Differential Response connects families with community-based resources to

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23 San Francisco City and County Human Services Agency Family and Children’s Services Division, Realizing the Vision: Reducing Disparate Outcomes for Children of Color, (San Francisco Disproportionality Project: 2005) found at http://calswec.berkeley.edu/calswec/SF_DisproportionalityPresentation_05.pdf
avoid removing children from their homes. Through the Redesign and other initiatives within the state, child welfare is helping families develop their own solutions, with family and community resources built into the process. This family-centered strengths-based approach is promoting practice and service strategies that allow children to remain in the care of their families and in their communities. These service strategies include the Family Assessment and Stabilization Team Program, the Family Intervention and Recovery Services Team Program, Incarcerated Parent Services, Workforce Development Initiative, the Ruth E. Smith Project to provide wrap-around services during the intake process to avoid foster care placement and Circles of Support to develop cohesive teams that provide support to families and assist in developing and implementing plans.

**King County, Washington,** is expanding the use of Family Group Conferencing to improve services and supports to all families and Benchmark Hearings are being used to accelerate permanency for children who have been in care for more than two years. These improvements have evolved from the joint efforts of Child Welfare and Juvenile Justice.

King County's use of Family Group Conferencing is illustrative of a pattern among many of the ten jurisdictions—that is, the use of some form of team decision making as an important vehicle for improving services to all families, and in particular to families of color. The Family to Family sites among the ten have all implemented Team Decision Making, since this is one of the principle elements of the Family to Family approach. Team meetings are held before removing children from their homes, placement changes and changes in the permanency goal.

In some ways, these meetings can help a system to establish a “gate keeping” function to ensure that equitable decisions are made based on safety issues and needs and not on the race of the child and family. Michigan's use of Team Decision Making illustrates this practice:

**In Michigan,** two key practice changes were implemented at the Michigan Department of Human Services (MDHS), Team Decision Making (TDM) and Family Case Reviews, to support better child welfare decision making. Birth parents, foster parents and community involvement in the decision-making process related to possible removal of children from their families and other safety and planning activities is a critical component of the initiative. With the expansion of Family to Family, MDHS wants to increase its capacity to use of TDM as the primary practice protocol for preventing children from coming into care.

While the services described above are universal in nature—that is, intended for all families in the child welfare system—some systems are also working to expand services available specifically to families of color. This is sometimes accomplished by moving services into the community or neighborhood where families live. In other instances it involves expanding services that are sought by minority families. Two examples illustrate how some of the ten jurisdictions are trying to tailor services to the needs of children and families of color:

**In Connecticut,** 80% of children coming into care were there because of substance abuse by the caretaker or parent and the majority of these children were African American and Latino. Connecticut anticipated that any program designed to address both substance abuse and affordable housing would also reduce the number of minority children in the child welfare system. The Supportive Housing for Recovering Families Program combines a comprehensive, family-centered and intensive case management model with supportive and affordable housing services. The strategy was designed so children could return to their families after being separated due to family problems that include housing instability or circumstances such as substance abuse or incarceration. In its work with DCF, the program is focused primarily on the reunification of children with their families. The program also aims to prevent the foster care placement of a child.
when the family is working with DCF to address
the issues that brought them to the attention
of the agency.

Wake County reorganized its service delivery into
gеоgrарhіс zоnеs tо рrоmоtе соmmunity part-
nershіps between Wake County Human Services
and the targeted communities. Its early efforts
were focused on a neighborhood that wraps
around the center of downtown. The area has a
mix of housing units that includes new, revital-
zied and traditional homes, as well as rental
properties and several public housing commun-
іties. This historically African American neighbor-
hood has an increasingly diverse population but
five years ago, this target neighborhood
accounted for almost half of the children com-
ing into foster care in Wake County, with almost
all of the children being African American.

A final strategy being used by many of the ten juris-
dictions is to improve the cultural awareness and
competence of staff. Managers in these jurisdictions
believe that this strategy can improve all interac-
tions with and services to families of color. Training
sessions and tools are being developed that help
workers engage families. Once these supports have
been provided to the workforce and the value base
of the work made clear, staff are evaluated on their
annual performance evaluations regarding their
level of cultural competence. Ramsey County, MN,
provides an example of the multiple ways in which
an agency can seek to improve the cultural compe-
tence of its workforce:

The Ramsey County Community Human Services
Department (RCCHSD) has developed practice
tools to ensure that all social workers have
appropriate guidance and supervision to
enhance their cultural awareness and competen-
cy. Staff training on institutional racism is
occurring and focus groups with staff from the
contract agencies are being held to garner input
and recommendations on how to reduce existing
disparities. Performance appraisals at RCCHSD
include components related to the cultural com-
petency of workers. Importantly, cultural consult-
ants advise RCCHSD about their cultures in order
to increase agency knowledge and sensitivity to
the different racial and ethnic groups.

Talking Circles, in which Native American com-
muіnіtіes share stories, views, beliefs and cus-
toms, are used to gather input on new
programs or practices that are being consid-
ered. For example, when Family Group Decision
Making was being considered, Talking Circles
were used to help the community understand-
ing its purpose and determine how best to
implement this process.

The Contracts Action Team works to increase
the cultural competence of organizations
under contract with RCCHSD, develops stan-
dards for culturally and linguistically compe-
tent vendors and identifies strategies for
increasing vendor capacity. This work is focused
on building a better support system for minor-
ity vendors who in turn help to create more
diverse and culturally sensitive service array for
families involved with RCCHSD.

Almost all of the jurisdictions contributing to this
report are implementing a mix of the strategies as
outlined. For example, they are improving services to
all families; they are implementing new forms of
frоntlіnе рrасtісе, օften іnvolvіng ѕоmе fоrm оf
Team Decision Making; they are expanding services
that are believed to be of specific benefit for chil-
dren and families of color; and they are strengthening
the skills of their workforce. The lesson from
these jurisdictions’ experience so far is that it is the
full range of these strategies, taken together, that
have the potential for changing practice, and thus
changing outcomes for all children and families and
especially for children and families of color.

Developing Policy Interventions

The institutionalization of this work at both the state
level and the agency level has been a watershed
moment for several of the sites. In at least one state—
Illinois—child welfare jurisdictions, with the help of
their community partners, have been instrumental in
engaging state legislatures to develop and pass legis-
іlаtіоn to рrоmоtе thе dіsрrоrtуnаlіty wоrk іn dо tо
ensure that a law will not be passed if it will further exacerbate the problem of racial disproportionality.

Legislative review is a critical part of the Illinois African American Family Commission’s (IAAFC) responsibility. Through careful review, analysis, and, when necessary, testimony on hundreds of bills coming before the legislature, the IAAFC may influence the outcome or prevent the passage of a law that could otherwise affect minority children in a negative way. In the 2004 legislative session, the IAAFC reviewed and provided comment, where appropriate, on 19 such bills. After co-sponsoring the Children and Family Forum with the Jane Addams College of Social Work and the Children and Family Research Center of the School of Social Work of the University of Illinois at Champaign-Urbana, which highlighted that African American children are four to five times more likely to live in kinship care than white children, the IAAFC supported legislation on subsidized guardianship as a permanency option in Illinois.

Policy strategies can be effective at the administrative level as well as at the legislative level. Much of child welfare policy is actually within the control of agency managers, and some jurisdictions have “opened up” this policy process to outside advocates and to communities of color, to ensure that their viewpoints and experience are represented. This involves child welfare agencies making changes to their own operational and administrative policies and procedures by providing advocates and advisory groups the opportunity to review and provide direct input into policy development and revision. For example:

Ramsey County Community Human Services Department (RCCHSD) established five Action Teams to address administrative operations. These Action Teams will support RCCHSD management by helping to develop more appropriate operational and administrative policies and procedures in each work area as needed. The Action Teams give representatives from the racial and ethnic groups an opportunity to have direct input on administrative policy and procedural changes.

In 2001, the Minnesota Legislature enacted legislation requiring the Department of Human Services (DHS) to examine why African American children were overrepresented in the child welfare system and provide recommendations to the Legislature to address these disparities in the next legislative session. To comply with this mandate, DHS convened an advisory committee composed of child advocates, researchers and child welfare professionals to study why there were such disparate outcomes for African American children in the child welfare system. The advisory group met over a six-month period and recommendations were presented to the Minnesota Legislature in March 2002.

Other state policy-level strategies are being used in some of the ten jurisdictions. For example, in Minnesota and Michigan, for example, an important part of their action strategies has been the involvement of state legislatures in putting the issue of overrepresentation on the “front-burner” of the public agendas in those states.

Using the same approach from Minnesota, child advocates in Michigan were able to gain legislative interest on the issue of the overrepresentation of African American children in the child welfare system. Working with members of the legislature, language was drafted and attached to the budget bill directing the Michigan Department of Human Services (DHS) to convene a task force to study the disproportionate representation of African-American and other children of color in the state child welfare and juvenile justice systems. The task force was directed to examine the level of overrepresentation of African American and other children of color at each decision-making point in the child welfare system, beginning with the first hotline call to the decision to remove a child and place him/her in foster care. The legislation mandated each decision point be scrutinized and DHS was directed to produce a report to the Legislature with recommendations to address these issues by December 31, 2005.
Ongoing Community and Agency Evaluation

Assessing community and agency strengths and needs through self or external evaluation methods provides an informed starting point for changing the disproportionality and disparate treatment of minority children and families in the child welfare system. Through research and evaluation, child welfare agencies can better understand the ways in which their practices can be most beneficial in addressing community needs. Self-evaluation can help child welfare agencies determine program effectiveness and departmental performance and allow critical analysis of practice to build upon strengths and focus on barriers to meeting agency goals. Evaluations conducted by an external source may provide a fresh perspective, which may not be gained by agency self-evaluations. This fresh perspective can assist agencies to more systematically implement best practices and achieve desired outcomes.

Among the ten jurisdictions profiled in this report, community and agency evaluation strategies have been used in multiple ways. Some of these focus specifically on the evaluation of the child welfare agency’s efforts; others evaluate race equity issues more broadly, as part of a more expansive mandate to make a difference on these issues. Three examples illustrate the differing purposes to which evaluation and assessment can be directed.

Illinois’ use of evaluation is the broadest in scope, reflecting the breadth of the mandate of the State’s African American Family Commission.

In addition to becoming a leading advocacy organization for African American children, the Illinois African American Family Commission (IAAFC) launches research initiatives about problems impacting African American children and families. Using the information obtained from these research studies, the IAAFC recommends changes to existing laws, regulations, policies and practices and supports the development of new legislation related to child welfare. For example, the IAAFC conducted a study to look at the dropout rates in 26 Chicago high schools and determine if a relationship existed between family background and the dropout rate for children. The results showed a correlation between the dropout rate and the racial composition of the schools. For schools in Caucasian communities the dropout rate was low, while for schools in African American communities the dropout rate was high. The study also correlated average income level with the dropout rate and found low dropout rates in areas with an average income of $41,234 and high dropout areas with an average income of $28,532.

Other jurisdictions illustrate the power that a more intensive focus on child welfare agency practice can have. While the profile of Michigan’s experience emphasizes the state’s most recent activities, an evaluation that was done almost 20 years ago helped to trigger the attention to the needs of minority families and children which has continued to this day. This evaluation study is an example of the power that can come from having an external evaluation of the services available to minority children and families:

In Michigan, in 1986, Homes for Black Children (a private provider agency) joined forces with the University of Michigan to conduct a study on intervention practices in Michigan’s Department of Human Services’ (MDHS) Protective Services unit. The study showed that the number of children removed from their families decreased after protective services workers received training on cultural sensitivity. With this knowledge of a key deficit in agency practice, MDHS was able to focus its efforts on educating staff and in doing so reduce the number of children in the child welfare system.

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24 Jacquelyn Moffett, President, Homes for Black Children, Testimony, (June 8, 2005)
Evaluations need not be external in order to have impact; internal assessments can often make an equally powerful difference, if they are backed by the attention of management, the commitment of frontline staff, and the knowledge that their findings will be used to make a difference. Given those conditions, assessment tools can become useful and valued aids to staff as they work to improve their own performance. As an example:

As a part of its best practice framework, Ramsey County Community Human Services Department developed a self-assessment tool for use by child protective services staff. The tool was used to aid staff in understanding their own strengths and weaknesses with regard to diversity awareness. Each worker is required to look at how biases and personal values may affect the ways in which they serve families. After individual workers have taken the self-assessment, the agency can then look at the strengths and needs of all workers combined to make decisions as to needed agency-wide policy or practice reforms or training.
The efforts of the ten jurisdictions highlighted in this report illustrate the importance of leaders from throughout the community—child welfare and human services administrators, child advocates, faith communities, and grassroots and civil rights organizations—coming together to acknowledge the existence of racial disproportionality and disparity. Their strong commitment to race equity can be seen in the work they have done to ensure that children of color and their families have equal access to the supports and services they need and the outcomes they deserve.

The field’s understanding of the factors giving rise to the disproportionate representation and disparate treatment of children of color in the child welfare system is still developing. We need to know more about how these results are produced at each of the key decision points in the case process. The strategies described in this paper represent initial efforts and are relatively new. Few of them have been in use long enough to have become standardized or to have produced results that can be clearly linked to jurisdictions’ change in strategies. Because of their commitment to this work and their attempts to craft appropriate remedies, the featured jurisdictions are “places to watch”—sites from which we expect to learn over time.

The emphasis that many of the jurisdictions have placed on service and system improvements suggests that these are important components of any effort to achieve race equity. And, for example, by partnering with communities child welfare agencies can not only improve their image among community residents but can also help mobilize additional resources (such as block clubs and congregations) to protect children and strengthen families. Service and system improvements, however, likely will not be sufficient to eliminate disproportionality and disparity. Steps also must be taken to understand why race is such a potent predictor of child welfare outcomes and to identify appropriately targeted responses that will ensure that all children of color and their families are served fairly and effectively. Disproportionality and disparity exist in all states in the nation’s child welfare system. Consequently, recognizing and eliminating these inequities must be central to the work of child welfare and must be essential elements of efforts to improve services and systems.

The forces that give rise to racial disproportionality and disparity in the child welfare system extend well beyond that system. The concept of structural racism provides a useful vantage point from which to understand why it is that people of color tend to be poorly served by a number of public systems (such as education), overrepresented in others (such as child welfare and criminal justice), and placed at a distinct disadvantage in other arenas (as in many sectors of the economy). This suggests that attempts to promote race equity in child welfare should not be made in isolation of other efforts to address the treatment of people of color by other public systems and to promote broader racial, economic, and social justice.

The following key strategies emerged from the activities undertaken in the jurisdictions examined:

- According high priority attention to reducing racial inequities, both within the agency and in the larger community;
- Using data to understand the problem to shape solutions, and to track progress;
- Conducting evaluation to learn from current efforts aimed at reducing disproportionality and disparity and to assess progress over time;
- Improving service delivery and expanding scarce service resources and interventions;
- Partnering with communities in many ways, so that the experiences, and especially families of color, becomes a primary face in guiding systems’ responses to families; and
- Redesigning policy interventions.

An additional strategy in need of further exploration is that of working with other systems to promote racial, economic, and social justice.

Together, all of these strategies can guide interested parties as they continue their efforts to identify best practices and offer recommendations to the field about how to eliminate racial disproportionality and disparity.
Part II Site Summaries

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The history of overrepresentation of African American children in San Francisco’s child welfare system is tied, in part, to changes in the city’s demographics. San Francisco experienced a major decrease in the number of African American families and children living in the area during the 1990s. Over 45% of African American children moved from San Francisco to nearby cities, such as Oakland, or into suburban counties around San Francisco. The city has the lowest child population of any city in the nation. Only 14.5% of San Francisco’s population is under age 18.

The per capita income in San Francisco is $34,556 but it is only $19,275 for an African American family. Many of the African American families who moved out of the city were middle-income; the remaining families whose economic instability limited their options to move to a more desirable location. The resulting class structure includes large income disparities between the African American families who remained in the city and others living in the city. Currently, low-income African American families are concentrated in five neighborhoods, two of which include public housing. The majority of children under the care and supervision of the Department of Human Services (DHS) live in these communities.

Concern rose with awareness that although the number of African American residents was decreasing, the number of African American children in the child welfare system was not. Drug use and domestic violence were on the increase and these circumstances contributed to decisions by DHS to remove children from their families and their communities, the majority of whom were African American. In the San Francisco population at large, African American children make up only 11%, Latinos 22%, Caucasians 23%, and Asian and others 44%, but African American children account for 70% of the out-of-home care population.

The impetus for bringing this issue to the forefront in San Francisco came from forces outside DHS. Ad hoc groups and interested individuals in the community

came together and voiced their concerns about the overrepresentation of minority children in the system. Beginning around 1992, reforms were introduced to agency’s organization, including diversifying the workforce and the management team. A turning point for the community came when the director of the Inter-City Family Resource Network, Inc. attended a Family to Family conference workshop on overrepresentation of minority children in the child welfare system and brought it forward to the Stuart Foundation. Elevating the issue spurred the effort to take specific actions to address the racial inequities in San Francisco’s child welfare system. The Stuart Foundation provided seed funding for the planning process to be launched.

**San Francisco’s Initiatives**

The community work to address overrepresentation of minority children in San Francisco’s child welfare system is tied to three initiatives: *Family to Family*, the Disproportionality Project and the California Child Welfare Redesign Project. These initiatives, albeit in different ways, bring together key leaders and interested parties to develop strategies to resolve disproportionality and disparity in the child welfare system.

**Family to Family Initiative**

The San Francisco DHS was one of 22 (now 25) California county agencies that was participating in *Family to Family*, which is funded by the Annie E. Casey Foundation. San Francisco’s *Family to Family* Initiative was built on the premise that children are better served in their families and in their communities. In San Francisco, *Family to Family* addressed two key decision points of the child welfare service delivery system: placement and reunification. Focusing on these two decision points created an opportunity to influence the number of minority children entering and remaining in the system. Team Decision Making (TDM) engaged the extended family and community in keeping minority children out of the system and reunifying families whenever possible. The new process for recruiting, licensing and supporting foster parents, including relatives, increased the number of resource homes (both foster and kinship) where children could remain in their own communities.

**The Disproportionality Task Force and Project**

The Disproportionality Task Force comprises individual representing DHS, the Department of Public Health, the California Department of Social Services, Inter-City Family Resource Network, Inc., Bay Area Academy, the Children’s Council of San Francisco, the Youth Law Center, the District Attorney’s Office, the Department on the Status of Women, the Kinship Support Network, community-based and faith-based organizations and interested community advocates. With funding from the Stuart Foundation, the Disproportionality Project was developed “to assemble representative voices of community and faith-based organizations, business establishments, city departments and families to determine collectively how to decrease the number of African American children entering the foster care system.”

In November 2004, the Project produced a report, *Raising Our Children Together*, which included a plan of action designed to be sustainable, actionable, comprehensive, collaborative and family and community centered. The Task Force also conducted exploratory research and initiated a process to assist in redesigning the child welfare system to:

- Establish a stakeholder’s framework that includes family, community, service providers, public agencies, policymakers and funders to work alongside DHS;
- Increase cultural competence among the DHS workforce; and
- Ensure appropriate service responsiveness to families.

The Task Force conducted an internal review of the DHS statistical data, particularly related to the key child welfare case decision points (investigation, substantiation, placement, permanency decisions, etc.)

27 Ibid
28 See Appendix 1
to get a more in-depth understanding of issues such as the source of the referrals, reasons why so many referrals were being made and why minority children were placed in out-of-home care compared to other options such as intensive family preservation or relative care. As part of its plan to use and share data, the Task Force held a leadership symposium in November 2005 on Fairness and Equity in California’s Child Welfare System. Information was made available to the public on the nature of the problem, data were shared and the plan of action was presented for review and reaction of the community.29

The California Child Welfare Redesign Project

The Child Welfare Redesign Project provides another opportunity to impact the disproportionality and disparity in treatment of minority children. This state government initiative requires all local agencies to participate in the overhaul of the child welfare system by providing the agencies with an opportunity to incorporate activities, protocols and practices that hold promise in both reducing the number of minority children coming into the system and accelerating permanency of children through reunification, relative placements or adoptions.

The Child Welfare Redesign Project emphasizes the process of using “Differential Response” within child protective services and to continue to use “Circles of Support” (see page 38). When reports are made to the child abuse hotline, the process can connect families to community-based resources to avoid having to remove children from their families. These processes, when coupled with Family to Family, change how families are offered services. Agencies are beginning to help families develop their own solutions, with family and community resources built into the design process. This family-centered strengths-based approach is being institutionalized and is promoting practice and service strategies that allow children to remain in the care of their families and in their communities.

San Francisco’s Future Goals

The overall goal of the San Francisco Disproportionality Task Force and the Child Welfare Redesign Project is to improve the service delivery system to reduce the number of minority children, especially African American children, entering the child welfare system. Their goal is to eliminate racism and racist practices embedded in the agency policies and practices and to increase the frontline workers’ and supervisors’ sensitivity to racism. Using the Task Force recommendations as the guiding force, the San Francisco Disproportionality Project will support and implement the following initiatives over the next few years. They believe these initiatives will have a positive impact on disproportionality and the disparity in treatment of minority children in the system. The San Francisco Board of Supervisors has also appointed a Foster Care Improvement Task Force to make recommendations to DHS and oversee the implementation of the recommendations.

System Goals

Implementation of differential response to engage families and agency teams (child welfare workers and community partners) in assessing families’ strengths and needs, so that they may receive services and supports to address problems early and prevent future referrals. Differential response assumes that most families can benefit from change-oriented services rather than adversarial investigatory practice. Core values of differential response include:

- Families are treated as partners;
- Services work toward family empowerment through self-help;
- Services are culturally responsive; and
- Services are accessible and available.

29 San Francisco City and County Human Services Agency Family and Children’s Services Division, Realizing the Vision: Reducing Disparate Outcomes for Children of Color, (San Francisco Disproportionality Project: 2005) found at http://calswec.berkeley.edu/calswec/SF_DisproportionalityPresentation_05.pdf
Community Goals
- *Family to Family* is being expanded into other areas.
- The Family Assessment and Stabilization Team Program (FAST) uses fathers and paternal relatives as resources and caregivers for out-of-home care.
- The Family Intervention and Recovery Services Team Program (FIRST) establishes a connection between substance abuse treatment and child welfare to provide addicted parents with appropriate treatment and the family with support systems.
- Incarcerated Parent Services provides outreach services to incarcerated parents to ensure that they have access to and are a part of their children’s lives.
- The Ruth E. Smith Project increases support in the intake process by using wrap-around support services to prevent placements.
- “Circles of Support” consists of significant people in a child’s or family’s community who are willing to participate in a formal capacity to help the child and family in crisis by creating an extended family support network. A formal communication mechanism is established among Circle members who are held accountable to each other. Circles of Support also promotes innovative community organizing by raising the level of awareness and involvement of the community with its at-risk families.
- The Workforce Development Initiative is designed to stimulate economic opportunities within target areas.
- The Foster Youth Transition Initiative dedicates effort on permanency initiatives for youth who are transitioning out of the system.

The Disproportionality Project also plans to increase public awareness about disproportionality and treatment disparity and seek opportunities for agency and community collaboration to design new and innovative initiatives and improve interdepartmental communications, especially around common promising practices.

San Francisco’s Promising Practices and Strategies

The San Francisco Task Force on Disproportionality is leading the effort to develop promising practices and strategies including:

- Redesigning the child welfare agency through a partnership between the agency, the community and families.
- Introducing new casework practices, such as Circles of Support and Differential Response that use community and family participation and supports to assist families in crisis and prevent placement of their children.
- Adopting the FAST program, a front-end initiative that engages fathers as viable alternatives to placement.
- Expanding *Family to Family*, which is an effective tool for increasing foster care resources in the community for children who must be removed from their families.

DHS is restructuring agency operations to support inclusive relationships with the community, change policies and practices toward more culturally sensitive service delivery and address attitudes and behaviors of individual staff that negatively impact agency programs and services. Lessons learned from these initiatives will continue to influence reforms of the child welfare system in San Francisco as well as changes by the California Department of Social Services. In addition, public agencies are working to share data, reports and analyses, where possible, about minority populations entering and receiving ongoing services.

San Francisco’s plan is to tackle these issues in small segments so that outcomes can be routinely examined for success. This approach is expected to enable the city to achieve and sustain the desired outcomes for its minority children.
Data from San Francisco

A. Demographics of San Francisco

Demographics and Decision Point Data

<table>
<thead>
<tr>
<th>Race</th>
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<tbody>
<tr>
<td>San Francisco's Total Child Population</td>
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<tr>
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<tr>
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<tr>
<td>Hispanic/Latino</td>
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<tr>
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<tr>
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</tr>
<tr>
<td>Other</td>
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</tr>
<tr>
<td>Total</td>
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</table>

<table>
<thead>
<tr>
<th>Referrals</th>
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</thead>
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</tr>
<tr>
<td>African American</td>
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<tr>
<td>Hispanic/Latino</td>
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</tr>
<tr>
<td>Other</td>
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</tr>
<tr>
<td>Total</td>
<td>100%</td>
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<table>
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<tr>
<td>African American</td>
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<th>Entries</th>
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<tr>
<td>African American</td>
<td>58%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>21%</td>
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<tr>
<td>Other</td>
<td>13%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
</tr>
</tbody>
</table>


B. Process and Outcome Data

1. First Entries and Re-Entries Into Care

The data below show the first entries and re-entries of African American children in San Francisco by year. The number and percentage of new entries declined from 2002 to 2004, while the number and percentage of re-entries increased.

<table>
<thead>
<tr>
<th>Year</th>
<th>First Entry Number</th>
<th>% of Total Pop.</th>
<th>Re-Entries Number</th>
<th>% of Total Pop.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001</td>
<td>220</td>
<td>53%</td>
<td>73</td>
<td>59%</td>
</tr>
<tr>
<td>2002</td>
<td>275</td>
<td>56%</td>
<td>85</td>
<td>69%</td>
</tr>
<tr>
<td>2003</td>
<td>232</td>
<td>50%</td>
<td>92</td>
<td>59%</td>
</tr>
<tr>
<td>2004</td>
<td>190</td>
<td>50%</td>
<td>110</td>
<td>78%</td>
</tr>
</tbody>
</table>

Source: San Francisco Department of Human Services

2. Reasons for Removal

Percentage of Reasons for Removal for First Time Entries from July 2004 through December 2004

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neglect</td>
<td>84%</td>
</tr>
<tr>
<td>Physical Abuse</td>
<td>12%</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>2.9%</td>
</tr>
<tr>
<td>Other</td>
<td>1.6%</td>
</tr>
</tbody>
</table>

Source: University of California at Berkeley, Center for Social Service Research
The Connecticut Department of Children and Families (DCF) is currently under a Consent Decree, Juan F. v. Rell, to reform its child welfare system. The federal court-ordered Exit Plan requires specific steps be taken to improve the care and supervision of children in foster care, to revise adoption procedures, to reduce the number of children in residential care, and to improve services for children with mental retardation. Responding to the requirements of the court order has become the driving force for many changes within DCF.

Currently, DCF is serving 6,414 children in foster care. During 2003-2004, more than 75% of children in foster care were children of color: 32 percent African Americans and 43 percent Latino.

In 1997, the Connecticut Alcohol and Drug Policy and Council completed a report that recommended a “client-based model be developed with a collaborative, quality service delivery and substance abuse treatment program for women and their children with a core component being supervised homes for recovering families with wrap-around support services.” In response to this directive, DCF focused its efforts on developing strategies to address the issues of housing, substance abuse and reunification of children with their families. DCF staff recognized that one of the main reasons children were coming into care was that their families lacked safe and stable housing. Parental substance abuse was also a contributing factor in the increasing number of children in foster care. The majority of these children were either African American or Latino. As a first step to address the large number of children of color entering the system, DCF began looking for community resources to provide services focused on supportive housing that provided on-site case management services for recovering substance abuse families. DCF was willing to fund such a program and the Connecticut Department of Social Services (DSS) agreed to make rental subsidies (Section 8 Vouchers) available in support of this effort.

In 1998, DCF piloted this effort through a contract with The Connection, Inc., a non-profit agency based in Middletown, Connecticut. DCF felt that a supportive

housing and substance abuse program addressed a number of the requirements in the Juan F. Consent Decree and assisted in developing an approach to reduce racial disproportionality in child welfare work. Areas of focus included:

1. Increasing the number of adoptions;
2. Reducing the number of children in residential care;
3. Increasing early childhood intervention and prevention services;
4. Adopting the Family Conferencing Model for developing family case plans; and
5. Combining Section 8 Housing Vouchers with substance abuse treatment.

While this program did not begin as a strategy to address disproportionality and disparities in the treatment of minority children, it has become a key response to this problem. Since 80% of children were coming into care due to substance abuse by their caretaker or parent were African American and Latino, Connecticut anticipated that any program designed to address both substance abuse and affordable housing would also reduce the number of minority children in the child welfare system.

**Connecticut’s Initiatives**

**The Connection, Inc., Supportive Housing for Recovering Families (SHF) Program**

The Connection, Inc., is a non-profit human service and community development agency founded in 1972 that works to build and sustain healthy, safe and caring communities. It is a statewide organization operating 27 programs that serve over 3,000 clients per month. The Connection, Inc., provides training, consultation, research and other learning activities to assist clients. It operates on a budget of over $19 million annually. The cornerstone of its work is the Supportive Housing for Recovering Families Program (SHF) that began as a demonstration project in 1993. Properties ranging from 25-to-40 apartment units provided permanent, affordable housing with on-site case management services for a mix of low-income and homeless persons, including people with disabilities. Its contract with DCF specifically targets families who have come to the attention of the child welfare system.

The Supportive Housing for Recovering Families Program of The Connection, Inc. combines a comprehensive, family-centered and intensive case management model with supportive and affordable housing services. The strategy was designed so children could return to their families after being separated due to family issues that include housing instability, substance abuse or incarceration. SHF is intended to preserve parent-child relationships, build upon family strengths and support stability in the community. In its work with DCF, the program is focused primarily on the reunification of children with their families. The program also aims to prevent placement of a child into foster care when the family has agreed to work with DCF to address issues that brought them to the agency’s attention. Importantly, there is a program-wide emphasis on understanding and respecting cultural and ethnic differences.\(^{31}\)

Although multiple agencies are often involved with a family, a unique feature of SHF is that a family has only one case manager, affiliated with The Connection, Inc., or one of its subcontractors. Case managers are responsible for no more than 12 cases. With the assistance of technology, these case managers are available 24 hours a day, seven days a week. The families who have completed the SHF program indicate that the dedication and commitment of the SHF case managers made a tremendous difference in their recovery and reunification with their children.

SHF covers multiple jurisdictions in Connecticut and case managers are located in each of the 13 DCF service areas. A case manager is accessible to all families and services are provided to 600 families across the state. SHF also provides an intensive home-based case management process that includes the availability of scattered site housing for parents recovering

\(^{31}\) See Appendix 1
from substance abuse. The provision of supportive resources and affordable, safe and stable places to live are the keys to SHF’s success. Services include coordinated treatment services, weekly home visits, help with budgeting, transportation, obtaining a car, searching for housing, and with following the family care plan. It is expected that parents meet specific eligibility requirements as well as work cooperatively with DCF, participate in the development and implementation of the family care plan and be capable of resuming parenting responsibilities.

Service delivery is organized so that staff model and teach families how to act on their own behalf, thereby empowering them to function independently after they complete the SHF program. This work is done in three sequential phases with each phase lasting up to a year. Families can be involved in the program for up to three years. In Phase 1 the family works on reunification and skill development work, which may include finding a place to live, learning to budget, and maintaining their home properly. Phase 2 includes learning skills that will allow families to live independently, such as securing employment, learning to handle issues with their children, and building supportive relationships with others, such as family, social workers, school officials, and other agencies. Phase 3 concludes the program as families learn how to fully maintain their home and handle their personal responsibilities, including child-rearing, and they become active participants in the community.

Breakthrough Series Collaborative (BSC)
Connecticut is also participating in the Breakthrough Series Collaborative (BSC): Reducing Disproportionality and Disparate Outcomes for Children and Families of Color in the Child Welfare System, an initiative of Casey Family Programs. The BSC brought together a network of 13 teams from across the country using an innovative methodology for system reform. In this methodology, teams developed ideas for practice reforms to reduce disproportionality, tested them through small scale application, evaluated the results, and where successful, implemented the ideas on a large scale and shared lessons learned with other participating jurisdictions. The Connecticut BSC team included the Department of Children and Families, the Police Department, University of Connecticut, Yale University, City of Waterbury, New Opportunities, Inc., and Alliance Staffing, among others.

As a part of the BSC, the team learned to use Plan, Do, Study, Act cycles (PDSAs) to quickly test ideas and strategies. One PDSA involved exploring the extent to which child welfare staff and stakeholders understood the importance of racial, cultural and ethnic identity formation in youth. As a result of this PDSA, Connecticut delivered training to raise awareness among DCF staff and stakeholders using the “Knowing Who You Are” video.

Practice and Administrative Reforms
DCF has made additional changes in its child welfare program operations that could lead to further reductions in the number of minority children in the foster care system by promoting the timely achievement of permanency. The department has:

- Established a single telephone access line for prospective adoptive parents, which makes inquiries about the adoption process easier;
- Equalized the subsidy rate for foster and adoptive parents, which has removed the financial disincentive for foster parents to adopt;
- Provided free post-secondary education at the University of Connecticut for all foster care children who are adopted; and
- Developed the Community Care Plan where all service providers and the family meet to develop treatment and supportive services plans.

Connecticut’s Future Goals
DCF’s future plan includes exploring broad-based initiatives or reforms to further help reduce the number of minority children in care. Some of the changes considered for implementation include:

- Establishing interagency teams with staff from the Child Protective Services Agency, the Juvenile
Services Agency, and the Mental Health Agency to develop and support coordinated family case plans. While the DCF social worker and the Connection’s case manager are coordinating their work, the current process does not eliminate the problem that families face when there are multiple expectations and demands from other agencies that are also providing support and services.

- Continuing to expand the Supportive Housing for Recovering Families (SHF) program statewide by broadening the availability of Section 8 Housing Vouchers.
- Implementing the Nurturing Families Program, a voluntary program enacted in 2005 that establishes the following policy: “every child born in the State of Connecticut will be visited for up to six weeks by a social worker. All mothers in the state are given access to resources that ensure access to health care and other services during this six-week period.”
- Expanding the Community Care Plan statewide to connect families with appropriate resources and supports in their communities to achieve independence, family stability, reunification, and permanent housing.

The Connection, Inc., has also developed a plan for additional services while working to improve and expand services provided to DCF families, including:

- Institutionalizing the Relational Model for engaging clients. The Relational Model “maintains that growth-fostering relationships are a central human necessity and disconnections are a source of psychological problems. The client is given the opportunity to learn different and more appropriate ways of dealing with difficult emotions, conflicts, and everyday situations;”
- Maintaining staff team members who reflect the racial, ethnic, and gender make-up of the target population;
- Continuing the policy of having no less than 20% African Americans or Latino and 50% female membership on the Board of Directors.
- Preparing all forms and written documents in English and Spanish; and
- Providing six hours of annual sensitivity training for all staff on cultural and ethnic diversity.

**Connecticut’s Promising Practices and Strategies**

DCF has demonstrated a commitment, through the work of The Connection, Inc. and the SHF program, to try a different approach to help families resolve some of the most difficult problems: substance abuse, unemployment and inadequate and unaffordable housing. The resulting work shows promising practices and strategies through the following activities:

- Use of an intensive and integrated case-management process with one primary case manager. All agencies involved with a family can coordinate their requirements and services through a single case manager and minimize the number of people interacting with the family. The SHF program assists families in continuing substance abuse treatment while maintaining a stable home for their children.
- The Relational Model for working with the families stresses the importance of creating a strong, healthy relationship between the family and the case manager.

DCF has also made significant progress toward developing a successful working relationship with the housing authority. As a result, housing vouchers for DCF families increased from 100 in 1998 to 644 in 2005. In addition, casework services are provided by a community-based agency using a more grassroots approach to building relationships with clients. The resulting impact is a growing success rate of families completing the SHF program, increasing reunification rates, improved housing stability, longer term success in breaking the cycle of drug dependency and incarceration and, ultimately, a reduction in the number of children of color in the child welfare system.

32 See Appendix 1
Data from Connecticut

A. Demographics of Connecticut

Demographic Data

<table>
<thead>
<tr>
<th>Race</th>
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</tr>
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<td>Total</td>
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**Connecticut’s Total Child Population**

<table>
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<tr>
<th>Race</th>
<th>Percentage</th>
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<tbody>
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<tr>
<td>Other</td>
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**Child Welfare Population**

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Source: U.S. Census 2000 & Connecticut Department of Children and Families, 2005

B. Process and Outcome Data

Outcomes Achieved through The Connection, Inc., Supportive Housing for Recovering Families Program’s (SHF) work with the Department of Children and Families (DCF):

- 400 families including 1,000 children have been reunified or preserved since the beginning of SHF in 2003;
- 73% of the families completed the SHF program during 2004;
- 93% of the families referred who have completed the assessment phase of SHF have been housed;
- 80% of the families exiting the SHF program have successfully completed it;
- 75% of the families exiting the program were satisfied with their services; and
- Family Unification (Section 8) Vouchers have increased from 100 vouchers in 1998 to 644 vouchers through 2005.
African American children make up 70% of the children in foster care, while only 20% of the children in Illinois are African American. Nearly one-half the children in out-of-home care in Illinois are in the City of Chicago and in Cook County. As of August 2005, there were 17,636 children in out-of-home care; 8,617 of these children were from the city of Chicago and Cook County.

In 1993, community members became alarmed at the number of children in the child welfare system and even more alarmed that the majority were children of color—mostly African American children. Like other large urban areas, the Cook County area has experienced a steady increase in the number of families affected by drug and alcohol abuse and mental health problems.

African American community leaders, advocates and child welfare service providers came together to develop a plan to address racial disproportionality and disparate treatment of minority children in the child welfare system. The group began its work by identifying the concerns around which they would focus their actions. The issues that were of greatest concern to them included:

- African American children were coming into the child welfare agency at a very high rate and were being separated from their families;
- African American children were not being returned to their families quickly, if at all;
- Policies and practices of the state child welfare agency supported out-of-home care instead of reunification; and
- Relative care policies and practices were not favorable to placement of children of color with their families.

As an outcome of these meetings, this group of advocates made a presentation to the Illinois Legislative Black Caucus at their annual meeting in spring 1994. The Governor responded by issuing an Executive Order formally establishing the African American Family Commission (AAFC), which later became the Illinois African American Family Commission (IAAFC). The order states: “The African American Family Commission was created to assist the Illinois...
Illinois’ Initiatives

The Illinois African American Family Commission (IAAFC)
The Illinois African American Family Commission (IAAFC) was created in October 1994 with the mission to “develop, evaluate, and advocate for public policies, research and programs that strengthen and preserve families, family economics, workforce participation, health status, safety, education and training, and quality of life for African Americans.”

Since the beginning, the IAAFC assumed a leadership role in informing the public about critical issues and in spear-heading projects that support African American families and children. The work of the Commission now cuts across multiple child-and-family-serving agencies, including the Departments of Aging, Children and Family Services, Commerce and Economic Opportunity, Corrections, Human Services, Public Aid, and Transportation. While funding was initially provided by the Department of Children and Family Services, the expanded role of the Commission is now to be funded by each of the agencies involved.

The Commissioners, appointed by the Governor for two-year terms, were given the charge to “advocate for and help develop policies, plans, and programs that promote family preservation and strengthen African American communities in Illinois.” The Commissioners represent the educational, business, religious, human service and related professions, and the community. All matters that come before the Commission, including analysis of legislative bills, are assigned to one of its eight committees that are responsible for recommending strategies or action steps.

Legislative Review
Legislative review is a critical part of the IAAFC’s responsibility. Through careful review, analysis and, when necessary, testimony on hundreds of bills coming before the legislature, the IAAFC may influence the outcome or prevent the passage of a law that otherwise could affect children of color in a negative way. In the legislative session ending in 2004, the IAAFC reviewed and provided comment on 19 bills. These bills ranged from legislation on preventive health care to Senate Bill 3208 that codified the existence of the IAAFC.

Research Initiatives and Reports
In addition to becoming a leading advocacy organization for African American children, the IAAFC also launches research initiatives about problems that impact African American children and families. Using the information obtained from these research studies, the IAAFC recommends changes to existing laws, regulations, policies and practices and supports the development of new legislation related to child welfare.

A study to look at the dropout rates in 26 Chicago high schools to determine if a relationship existed between family background and the dropout rate was conducted. The results showed a correlation between the racial composition of the schools and the dropout rate (low for schools in white communities and high for schools in African American communities). Average income level was also correlated with the dropout rate: low dropout rates in areas with an average income of $41,234 and high dropout rates in areas with an average income of $28,532.


34 Illinois African American Family Commission, background found at http://www.aafc.org/Background.htm
37 See Appendix 1
compiled information about the status of the state's African Americans including information about education, employment, income, housing, health, child welfare, and criminal justice.

FORUMS
The IAAFC co-sponsored the Children and Family Forum with the Jane Addams College of Social Work and the Children and Family Research Center of the School of Social Work of the University of Illinois at Champaign-Urbana. This forum focused on the value and legal risks of permanence, kinship care, reunification, and the well-being of children in care. The forum highlighted that African American children are four to five times more likely to live in kinship care than white children. This finding of the extremely high number of African American children in kinship care prompted the IAAFC to support legislation on subsidized guardianship as a permanency option for the state.

The State of the African American Family Symposium was held in April 2004. This symposium, the second convened by the IAAFC, was co-sponsored by the African American Family Research Institute, the Jane Addams College of Social Work, and the Institute for Research on Race & Public Policy of the University of Illinois at Chicago. The forum included advocates, consumers, researchers, policymakers, and practitioners who focused their discussions on issues associated with criminal justice, health equity, community development, and the impact on African American families.

FAMILY PRESERVATION PROGRAM INITIATIVE
During the 1995-1996 period, the Family Preservation Program Initiative was launched and involved 18 community-based organizations to develop non-traditional programs to serve African American families.

CHILD WATCH HOTLINE
The IAAFC implemented the Child Watch Hotline aimed at the prevention of child abuse and neglect, such as employment assistance, rent subsidies, parenting assistance, and an existing child welfare case, if needed.

Illinois’ Future Goals
The IAAFC’s future plan is to broaden the scope of its advocacy work to include proposing changes that impact specific practices in child welfare. Future work will place more emphasis on shaping public policy and programs to support children who come into care and enhance support systems for families when they leave care. Some of the areas that the IAAFC has identified for immediate attention are:

* Changing practices with respect to sibling rights to include supporting practice and legislation that enables children who are adopted to maintain a relationship with their siblings after adoption;
* Expanding the research and analysis on over-representation of African American children in juvenile justice and educational systems;
* Increasing advocacy related to the implementation of the Health Care Justice Act to ensure equity exists in access to services;
* Offering forums to expand the knowledge of policymakers, advocates and politicians about public policies affecting the quality of life of African American families in Illinois; and
* Offering forums to specifically focus on educating consumers about social services and expectations.

Illinois’ Promising Practices and Strategies
The IAAFC has demonstrated that organizations can influence the legislative process to promote better outcomes for African American children coming into the child welfare system. The IAAFC successfully influences new legislation as well as the programs, policies and procedures of child and family-serving agencies to ensure equitable treatment of African Americans.
Americans in Illinois. Some of the strategies that the IAAFC uses include:

- Preparing an impact analysis on all legislation and advocating for the interests of African American families and children when submitting recommendations about new laws;
- Supporting proposed legislation that strengthens and enhances policies and procedures to improve conditions for African American families; and
- Continuing to function as a “gatekeeper” for reforms in laws and agency policies on issues affecting African American families and children in all of the human service agencies in the State of Illinois.
Data from Illinois

A. Demographics of Illinois

**Demographic Data**

<table>
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<table>
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<tr>
<th>Child Welfare Population</th>
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<tr>
<td>African American</td>
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<tr>
<td>Other</td>
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<tr>
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<td>100%</td>
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</tbody>
</table>

Source: U.S. Census 2000 & Illinois Department of Children and Family Services

B. Process and Outcome Data

In 2000, the Illinois African American Family Commission (IAAFC) published “The Social and Economic Profile of African-Americans in Illinois,” which compiled information about the status of African Americans in Illinois with respect to their education, employment, income, housing, health, child welfare and criminal justice. Some of the findings are:

- 16% of the African American male workforce had a felony conviction.
- 2,214 juveniles were incarcerated in 2000, of which 58% were African American youth.
- 73% of African Americans have a high school diploma as compared to 85% of the state’s Caucasian population.
- African Americans experienced a 15% unemployment rate as compared to 6% of the state’s total population.
- The per income of African Americans was $14,747, about $10,000 below that of Caucasians and Asians.
The history of the treatment of Native American families and children is well known in this country, and today’s child welfare practices of removing children from their families has the potential to lead to the extinction of some tribal nations. According to the 2000 census, the Native American population in Woodbury County (Sioux City) is 0.5%, whereas 2.2% of the child welfare population for the county is Native American. In Woodbury County, most children are removed from home due to poverty related conditions, substance abuse and domestic violence.

According to the Iowa Citizens Review Board, 88% of all Native American children in Iowa reside in two counties—Woodbury and Tama. There are 32 tribes represented with the largest populations in the Omaha, Santee Sioux, Winnebago-Nebraska, Yankton Sioux and Rosebud Sioux tribes.

One of the most important issues for the Native American community was the confusion about the requirements imposed by the Adoption and Safe Families Act (ASFA) and the Indian Child Welfare Act (ICWA). No provision in ASFA specifically modified ICWA. ICWA states that the specific needs of Indian children are best served by maintaining their relationships with their tribes and extended families. Native American specific legislation38 was enacted to ensure the following:

- Notice to tribes of state child custody proceedings;
- Standards for the placement of Indian children in foster homes and termination of parental rights;
- Active efforts to provide rehabilitative services to the birth family or Indian custodian;
- Transfer of jurisdiction to tribal courts and full faith and credit for tribal judgments;
- Preferred placement of Indian children with their extended family or other Indian families; and
- Tribal right to intervene in state child custody proceedings.

Addressing the needs of Native American children and their tribes and families became a community-wide concern as more information became known about DHS policies and practices. Information indicated that more Native American children were coming into the child welfare system, and ICWA mandates for working with the tribes and families were not being followed. An annual Memorial March Honoring Lost Children is sponsored by Recover Our Children, a community action group, to call attention to these issues and concerns. The purpose of the march, held on the day before Thanksgiving, is to call public attention to issues of disproportionality and disparate treatment of Native American children in the foster care system.

**Iowa’s and Sioux City’s Initiatives**

**Iowa Indian Child Welfare Act (IICWA)**

In 2003, the Iowa Legislature enacted the Iowa Indian Child Welfare Act (IICWA) to focus attention and work on addressing the disproportionate representation of Native American children in the foster care system and to better ensure compliance with ICWA and IICWA by the courts and the DHS. A main purpose of the legislation was to ensure that, when removal from the home is necessary, the children’s placement reflects “the unique values of the child’s tribal culture and assist[s] the child in establishing, developing, and maintaining a political, cultural and social relationship with the child’s tribe and tribal community.”39 Additionally, the legislation was enacted to prevent unwarranted removal of Indian children because of cultural bias or ignorance, to require the placement of Native American children in homes that reflect their culture and to maximize tribal court decision making. IICWA requirements apply to the placement, foster care, adoption, failed adoption and all other child custody proceedings after the termination of parental rights of parents for Native American children. Compliance with ICWA and IICWA would likely reduce the disproportionate number of terminations of parental rights. Sioux City accounted for 18% of the termination of parental rights statewide; 7% of these terminations were parents of Native American children while only 2% of the population is Native American.

**Community Initiative for Native Children and Families (CINCF)**

The Community Initiative for Native Children and Families is a community-based coalition with the mission to ensure that Native service providers and public and private agencies work together. CINCF is active in pursuing compliance with ICWA. The CINCF committee brought together representatives from:

- Tribal Council Leaders, Judges, and Community Representatives
- Tribal Domestic Violence Representative
- The National Indian Child Welfare Association
- Representatives of Native service providers
- The Human Rights Commission
- Representatives from the Iowa Legislature
- Woodbury County Department of Human Services
- Iowa Department of Human Services
- County administration representatives
- University of Iowa
- University of South Dakota
- Sioux City Police Department

These representatives meet regularly, discuss Native American issues and concerns and work with the DHS to develop strategies for resolving problems. Multidisciplinary community-based teams are developed through the work of CINCF to link Native families with culturally and spiritually sensitive services. These teams build trust with tribes by ensuring that the DHS is following the ICWA.

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39 Senator Steve Warnstadt, Iowa Senate District 1, Des Moines, Iowa, steve.warnstadt@legis.state.ia.us
Minority Youth and Family Initiative (Woodbury County)
The passage of the Iowa ICWA included the requirement that two Children of Color Projects be implemented: African American and Native American. The African American Project is being developed in Des Moines, Iowa, and is not described in this report. The Minority Youth and Family Initiative is the Native American Children of Color Project and is being developed in Sioux City. It is also a part of the DHS Child Welfare Redesign Initiative. The key strategies developed for the Minority Youth and Family Demonstration Project are:

- Create a process whereby relatives are identified earlier and are approved as placement options;
- Review the Interstate Child Placement Compact (ICPC) to increase border state placements in tribes that cross state lines;
- Recruit and retain Native American foster homes; and
- Use Family Team Meetings (FTM) as the primary service delivery process.

A local planning committee was established to guide the work for this project. The proposed outcomes focus on decreasing the number of Native American children in the child welfare system, increasing the number of Native American foster homes, increasing the number of Native American children placed with relatives, increasing the number of Native American FTM facilitators and a reducing the number of Native American children being re-abused or neglected. The committee has developed a plan of action to achieve these outcomes.

Sioux City Family Resource Center
The Native American Family Resource Center is a community-based agency that provides help to the Native American community with problems that range from finding employment and housing to finding someone to negotiate access to various governmental systems and services. The Center works with the schools to ensure that diversity education is a part of all curriculum and classroom content, where appropriate. The Center is an advocate for the Native American community on the local and state level.

The Center provides opportunities to teach Native American parents coping skills, especially through programs that maintain and sustain the cultural traditions of the Native American nations and tribes.

Specialized Native American Unit in DHS
In January 2005, DHS restructured the organization for a specialized unit to provide services to Native American children and their families. This unit consists of social workers and other support staff that understand and are sensitive to the issues and concerns of Native American families. The unit works closely with the various tribes to ensure that the mandates of ICWA are being implemented. It functions independently, handling family services, child protective services and adoptions. It focuses its attention on two decision points: placements and reunifications. A unique component of the unit is having two Native American staff members who serve as liaisons to the Native American community. One staff member works as the Tribal Liaison, communicating and facilitating matters between the DHS and the Tribes. The other staff member is the family liaison and helps families meet agency requirements and court dates and obtain needed resources. The unit has been given more funding for additional activities, such as providing transportation, stipends and other incentives to individuals who want to become foster parents, and for training on cultural diversity and understanding the Iowa ICWA provisions.

Iowa School of Social Work
The Iowa School of Social Work has made changes throughout its curriculum to incorporate the Native American cultural framework into the content of all its classes. Students can also receive extra credits for work done within the Native American communities.
Iowa’s and Sioux City’s Future Goals

The future plan for the Minority Youth and Family Demonstration Project emphasizes the following activities:

- Reviewing licensing standards and identifying barriers to licensing Native American foster homes;
- Addressing ICPC issues and developing border agreements;
- Recruiting and using Native American Family Team Facilitators for the FTMs; and
- Expanding the development of Native provider agencies in the Sioux City community.

Iowa’s and Sioux City’s Promising Practices and Strategies

DHS, along with the CINCF Committee, has implemented activities that are intended to address the disproportionality and disparity in the treatment of Native American children that promise positive outcomes. Some of the actions taken are:

- Developing a specialized Native American Unit to not only provide services but also increase DHS’s knowledge, understanding and sensitivity to Native American families and children;
- Enhancing social work practices by involving the Native American community in the process to reinforce and retain the cultural heritage of Native American people;
- Expanding the use of FTMs with Native Americans as a strategy to reduce the number of children coming into the child welfare system; and
- Launching a major community-wide initiative to address problems resulting from alcoholism and substance abuse with special attention to the growing problem with methamphetamines enabling the Native American community to take a strong leadership role in finding solutions to these problems while continuing to press the government for support.

Additionally, the Recover Our Children group sponsors the Memorial March Honoring Lost Children to increase public awareness of the number of children removed from Native American families.
Data from Sioux City

A. Demographics of Sioux City

Demographic Data

<table>
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Sioux City’s Total Child Population

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Child Welfare Population

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B. Process and Outcome Data

1. Termination of Parental Rights

The Community Initiative for Native Children and Families (CINF) has implemented a process for manually tracking the results of court actions with respect to the number of cases where parental rights have been terminated.

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Source: Woodbury County Department of Human Services
The Michigan Department of Human Services (MDHS) is the agency responsible for child welfare services. MDHS is a state-administered system with services provided through 82 county offices. MDHS offers a continuum of services and programs designed to promote child and family safety, health care, and child development. MDHS has a long history of working together with its private child placing agencies to provide both foster care and family preservation services. In Michigan, African American children represent 17.48% of the state child population but make up 52% of the foster care population.

Michigan’s work on the issue of overrepresentation of minority children in the child welfare system began with the need to find adoptive homes for African American children in Wayne County (Detroit) in the late 1960s. The number of African American children was increasing and the belief was that African American families were not a resource for adoption. Homes for Black Children, a non-profit agency, began operations in 1969 to dispel this belief. Its work was not only successful in finding adoptive homes for African American children but was also instrumental in focusing the County’s attention on prevention services to keep children out of the system. In 1986, Homes for Black Children joined forces with the University of Michigan to conduct a study on protective service intervention practices. The study showed that once protective services workers were given culturally sensitive training, the number of children removed from their families decreased. In the later 1960s, Homes for Black Children, along with several agencies including MDHS and the Skillman Foundation, took a leadership role in bringing the issue of overrepresentation to the forefront. This work then led to community involvement to include the NAACP, the Civil Rights Commission, the United Auto Workers Union, which represents social workers, and private agency service providers.

As early as the 1970s, in response to the work of the Homes for Black Children and the University of Michigan, MDHS identified contributing factors to children being in the child welfare system. These included:

40 Jacquelynn Moffett, President, Homes for Black Children, Testimony, (June 8, 2005).
Confusion between poverty and neglect;
Need to educate the public and partners on abuse and neglect in a cultural context;
Need for substance abuse and mental health services and housing;
Not enough neighborhood-based prevention and family preservation services;
Limited number of culturally competent staff;
Historic lack of trust of the system by minority communities;
Individual perception and denial of the existence of racism within the system;
Lack of data about effectiveness of all services; and
No accountability for system outcomes.

**Michigan’s Initiatives**

**Michigan Department of Human Services**

Michigan Department of Human Services offers a continuum of services from primary prevention to treatment and rehabilitation. In addition to these approaches, MDHS has an array of other programs that are a traditional part of state services, such as juvenile justice prevention programs, teen outreach programs and teen pregnancy prevention projects. Included in the MDHS continuum of prevention services are programs such as:

- **Families First of Michigan**. An intensive, short-term crisis intervention and family education service.
- **Wrap-Around Services**. A support service for families with children at risk of out-of-home placements.
- **Partnerships for Safety**. A strengths-based, solution-focused interview protocol that was developed and tested with child protective service workers in six counties and adopted in 2002. The protocol was designed to address family satisfaction with services, to reduce out-of-home placements, reduce referrals, reduce the length of stay in foster care, and increase community linkage.
- **Families Together/Building Solutions**. Short-term, less intensive services designed to help families with multiple problems.
- **Family Group Decision Making (FGDM)**. FGDM was adopted from New Zealand and is based on the belief that families have strengths and that children can be protected in their kinship network. This program has been successfully used in Michigan with Native American families and with other families known to child protection.
- **Family Resource Centers**. These neighborhood-based service centers provide families with an array of services and supports in a single site. The centers are easily accessible as they are located within school settings in economically challenged neighborhoods and communities.
- **Jim Casey Youth Boards and Youth in Transition Supports**. To better address the needs of older youth in care, many of whom are children of color, youth boards have been established in 17 counties to give youth a voice in the decisions that affect their placements and services. A focus on the needs of this population is leading to programmatic, policy and service changes to better meet the needs of youth and their families.

**Family to Family Initiative**

In 2003, *Family to Family* was introduced in Wayne and Macomb counties and several other counties. The goal of this initiative is to strengthen families to prevent out-of-home removal whenever possible or when removal is necessary to place children in permanent homes in their neighborhoods and communities and where possible, to keep them in their families. Birth parents, foster parents and community involvement in the decision-making process related to possible removal of children from their
families and other safety and planning activities is a critical component of the initiative. Two key practice changes were implemented, Team Decision Making (TDM) and Family Case Reviews, to support better child welfare decision making. Family to Family also introduced neighborhood-based recruitment, training and support of foster homes. Following on the success of the pilot sites, MDHS has been implementing Family to Family statewide since August 2005.

Michigan Advisory Committee on the Overrepresentation of Children of Color in Child Welfare

During 2002 and 2003, Michigan’s Children, a key state advocacy organization, was able to gain legislative interest on issues impacting minority children, especially African American children. Working with members of the legislature, language was drafted and attached to the budget bill directing MDHS to convene a task force to study the disproportionate representation of African American and other children of color in the child welfare and juvenile justice systems of the state. The task force was directed to examine the level of involvement of African American and other children of color at each stage in the system, including points of entry and each point at which a treatment decision is made and the outcomes for children exiting the systems. MDHS was directed to produce a report by December 31, 2005. In response to this directive MDHS established the Michigan Advisory Committee on the Overrepresentation of Children of Color in Child Welfare.

The first meeting of the Committee was held in November 2004. The Advisory Committee was co-chaired by the Director of the MDHS and the President of the Skillman Foundation. Other members include representatives of the judiciary, health agencies, the Department of Civil Rights, the Michigan Federation for Children & Families, private child welfare agencies, county agencies and other human service agencies, and community representatives. The Committee established the following objectives:

- To gain a deeper understanding of racial/ethnic disproportionality and disparity in Michigan’s child welfare system;
- To gain an awareness of the issues in a national context;
- To understand the potential causes that lead to disproportionality and disparity; and
- To create a framework for action.

Beginning in February 2005, the Committee held focus groups in selected counties, some of which had the highest disproportionality rates. Two public hearings were held to hear testimony from the community and obtain information that could help develop a plan to guide the Committee’s work in addressing overrepresentation and disparities. The action plan was to be presented to the Legislature and the Governor in December 2005 and a comprehensive report was presented to the Legislature on March 21, 2006. This report was the trigger for a series of recommendations to be undertaken by MDHS and its key stakeholders. A continuing focus on this will be ensured by oversight from the Advisory Board, local accountability groups as well as through annual reports to the legislature.

Michigan’s Future Goals

MDHS established the following initiatives to continue their work on reducing the number of minority children coming into the child welfare system:

- Expanding Family to Family into all 82 counties in Michigan. The plan is to increase involvement of the family and extended family, to improve information about safety, to keep the children in their communities and to make greater use of individualized services.
- Small Group Domains or Subcommittees are being established to work on the targeted areas to include:

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Data collection;
Prevention and early intervention;
Diversion of foster children from the juvenile justice system;
Engagement of communities in the prevention of child abuse/neglect and development of families;
Decision making that is free of bias and is culturally responsive;
Preparation of the workforce to deliver services in a responsive manner;
Allocation of resources to serve families earlier and in a less intrusive manner
External review of policies, programs and contracts to assess whether they disadvantage children of color.

The State Interagency Wrap-Around Steering Committee was established to promote the integration through all agencies of the “wrap-around” philosophy, which is based on collaboration across agencies and on “tapping into” or using all needed community resources. The Steering Committee also intends to support the development of a statewide, integrated, strengths-based system of care. The Steering Committee provides training and technical assistance and sponsors an annual conference.

Michigan’s Promising Practices and Strategies

Michigan Department of Human Services has chosen to use these strategies and practices to help reduce the overrepresentation of minority children in their programs:

- Expanding the Family to Family Initiative.
- Developing a long-term strategic plan that focuses on selected programs and systems reforms as identified through research and internal review.
- Continuing to promote the use of Family Group Decision Making, Families First, Wrap-Around Services, reunification and other prevention and family preservation services to support children and youth living in their own families, with relatives or in foster care placements.
- Establishment of youth boards in all counties.
- Effective use of a Title IV E Waiver that focuses on family strengthening and preservation and on expedited reunification.

With the expansion of Family to Family, MDHS wants to increase its capacity to develop community-based foster homes and expand the use of Team Decision Making (TDM) as the primary practice protocol for preventing children from coming into care. Building on the success achieved during the earlier pilot projects, MDHS believes the practice protocol described above will expedite reunification of children with their families. MDHS is engaging the community as a partner on the Advisory Committee to develop a long-range plan to address disproportionality and disparity in the treatment of minority children.
### Data from Michigan

#### A. Demographics of Michigan

**Demographic Data**

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
<th>Michigan's Total Child Population</th>
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</tr>
<tr>
<td>Total</td>
<td>100%</td>
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**Child Welfare Population**

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
<th></th>
</tr>
</thead>
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<tr>
<td>African American</td>
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<td></td>
</tr>
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<td>Other</td>
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</tr>
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</tr>
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</table>

Source: U.S. Census 2000 and Michigan DHS Foster Care Fact Sheet, June 2005

#### B. Process and Outcome Data

**1. African American Disproportionality by Selected County**

<table>
<thead>
<tr>
<th>County</th>
<th>No. of African American Children in County Population</th>
<th>% of African American Children in County Population</th>
<th>% of African American Children in Foster Care</th>
</tr>
</thead>
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<tr>
<td>Berrien</td>
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<td>Genesee</td>
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<tr>
<td>Ingham</td>
<td>9,836</td>
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</tr>
<tr>
<td>Jackson</td>
<td>3,408</td>
<td>8%</td>
<td>34%</td>
</tr>
<tr>
<td>Kalamazoo</td>
<td>8,102</td>
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<td>39%</td>
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<tr>
<td>Kent</td>
<td>18,972</td>
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</tr>
<tr>
<td>Marquette</td>
<td>69</td>
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</tr>
<tr>
<td>Muskegon</td>
<td>8,425</td>
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<td>18%</td>
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<tr>
<td>Oakland</td>
<td>34,872</td>
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<td>12%</td>
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<tr>
<td>Saginaw</td>
<td>14,013</td>
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<tr>
<td>Wayne</td>
<td>281,077</td>
<td>49%</td>
<td>82%</td>
</tr>
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</table>

Source: Michigan Department of Human Services (MDHS)

**2. Native American Disproportionality by Selected County**

<table>
<thead>
<tr>
<th>County</th>
<th>No. of Native American Children in County Population</th>
<th>% of Native American Children in County Population</th>
<th>% of Native American Children in Foster Care</th>
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</thead>
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</tr>
<tr>
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</tr>
<tr>
<td>Jackson</td>
<td>181</td>
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<td>0%</td>
</tr>
<tr>
<td>Kalamazoo</td>
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<td>.4%</td>
</tr>
<tr>
<td>Kent</td>
<td>921</td>
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<td>2%</td>
</tr>
<tr>
<td>Marquette</td>
<td>311</td>
<td>.2%</td>
<td>21%</td>
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<tr>
<td>Muskegon</td>
<td>399</td>
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<td>1%</td>
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<tr>
<td>Oakland</td>
<td>895</td>
<td>.3%</td>
<td>.3%</td>
</tr>
<tr>
<td>Saginaw</td>
<td>250</td>
<td>.5%</td>
<td>.2%</td>
</tr>
<tr>
<td>Wayne</td>
<td>2,164</td>
<td>.4%</td>
<td>.3%</td>
</tr>
</tbody>
</table>

Source: Michigan Department of Human Services (MDHS)
The Ramsey County Community Human Services Department (RCCHSD) administers family and children’s services under the supervision of the State of Minnesota’s Department of Human Services (DHS). The Division of Family and Children’s Services (DFCS) provides child protection services, children’s mental health services, foster care and guardianship services along with services for adults, including financial assistance. RCCHSD sees its mission as “promoting safety and well-being for Ramsey County’s most vulnerable children and families through a coordinated system of care. The agency has embarked on a plan to develop a practice framework that will guide the standards of practice, supervisory activities and the day-to-day interaction between families, social workers and the community of caregivers and providers.”

The demographics of Ramsey County are changing. In 1990, Caucasians represented 88% of the population. By the year 2000, that percentage dropped to 77%. In 1990, 79% of the children in Ramsey County were Caucasian but that percentage decreased to 62% by 2000. In Ramsey County’s overall population, children of color increased from 20% in 1990 to approximately 39% in 2000.

Minnesota is home to the largest Hmong community in the United States. The Hmong came as refugees beginning in the late 1970s; most were born in Laos. According to the 2000 Census 56.4% of Hmong in Minnesota are under age 18 and 46% are school age. During the 1999-2000 school year, 20,371 Hmong-speaking children were among the 60,000 pupils in the Minnesota school system.

This trend toward a growing community of color caused Ramsey County to recognize that it needed to study the impact of these demographic changes on its services, workforce and planning for future resources. Communication challenges with immigrant communities and overrepresentation of African Americans and American Indian children in children’s services agencies needed to be addressed.
Minnesota’s and Ramsey County’s Initiatives

Minnesota’s history of taking action to address these issues goes back to 1980 when the Council on Black Minnesotans was established to address the unmet needs and ongoing issues impacting African American Minnesotans and to ensure that their needs were known to the legislators and other policymakers. Other organizations have been developed to serve similar functions to include The Chicano Latino Affairs Council and the Council on Asian-Pacific Minnesotans. The Minnesota Indian Affairs Council is the official organization that serves as the liaison between the Minnesota government and the eleven Minnesota Tribes. The Councils and the Tribes have prepared a comprehensive set of protocols that support their working relationships. Establishing these groups represents one process that the State has used to give special attention to the concerns of people of color living in Minnesota.

The initial work in Ramsey County to address the problem of disproportionate numbers of African American children in the child welfare system began when a group of community advocates pressed the legislature to require DHS to conduct a study on the issue of disparities in the treatment of minorities. At the same time, a Model Employees Initiative was underway in Ramsey County looking at the workforce implications of the changing population demographics. Recognition was also dawning that the immigrant community was growing: the Hmong community and other immigrant groups coming predominantly from Asian countries. Relationship issues with these growing communities of people of color needed the attention of the government.

African American Disparities Committee

In 2001, the Minnesota legislature mandated that DHS study the outcomes for African American children in the child welfare system and convened the African American Disparities Committee to provide policy recommendations. This group was charged with the responsibility of presenting recommendations annually to the legislature. Prior to this legislation being enacted, the Minnesota Legislature had taken the following actions:

- Mandated that all family preservation services be culturally competent;
- Mandated the juvenile court ensure that reasonable efforts be made for culturally appropriate services to prevent placement or to eliminate the need for removal of children of color from their homes;
- Passed a state version of the Indian Child Welfare Act and emphasized preserving the Indian cultural heritage; and
- Enacted a comprehensive Mental Health Act that required the DHS to create a continuum of mental health services that were sensitive to cultural differences.

Hmong Cultural Center Resource Center

The Hmong Resource Center, located in St. Paul, Minnesota, was established to serve as a community resource that houses academic and scholarly information about the Hmong people and their culture. An online library catalog, cultural artifacts, various text and reference books, and research studies are available. The Center offers educational presentations and workshops that provide information to the Hmong as well as to the wider community.

Minnesota’s and Ramsey County’s Best Practice Framework

Minnesota and Ramsey County established a structured framework to guide how child protection staff delivers services. This framework included the development and implementation of a social worker’s guide for practice, a handbook for supervision, a self-assessment tool for use by the child protective services (CPS) staff to aid in increasing their diversity awareness and the Family-Centered Assessment Guidebook for social work practice. The social worker’s guide, A Practice Guide for Working with African-American Families in the Child Welfare System, includes practice
principles that provide a clear value base and include a description of how these values and principles are to be implemented. Each worker is required to look at how biases and personal values may get in the way of serving families effectively. The supervisor’s handbook was designed to ensure that the organizational infrastructure and community relationships support a strength-focused practice with staff training and mentoring. The Family-Centered Assessment Guidebook requires that the entire family be the focus of attention and that an array of informal and formal services and supports be available to meet their needs.

These practice tools are used to ensure that all social workers have appropriate instructions and supervision to enhance their cultural awareness and competency. As new procedures are developed to correct problems in the system, these practice tools are revised to ensure that changes are institutionalized.

There also have been program practices and procedures put in place in the child protection and foster care program that are improving service delivery to minority children:

♦ Regular reviews are conducted to look at specific policies and practices to assess if improvements are needed.

♦ Placement conferences may now be held in the foster parents’ home in order to strengthen natural parent and foster parent relationships.

♦ An Alternative Response Program has been developed so that low- to moderate-risk families involved in a child maltreatment report can participate in an assessment process rather than the traditional child protection investigative response. This alternative response takes a holistic approach to the family and allows the parent to choose the service agency from which they receive services.

♦ Psychologists that are culturally knowledgeable and sensitive are assigned to work with Native American children and families.

♦ The Department’s Anti-Racism Initiative, through its seven Service Teams, will ensure that service evaluations and the process for proposing and implementing service changes will result reductions of disproportionality and disparate treatment of people of color.

♦ Service providers are using the Culture and Language Appropriate Standards to assess their cultural competence/responsiveness as contracts are being renewed or written.

Ramsey County’s Ending Racial Disparities Project

The Ending Racial Disparities Project is a multi-year initiative designed to reduce racial disparities in CPS and out-of-home placements. The Project established partnerships between the RCCHSD and the African American, American Indian, Hispanic/Latino, and Southeast Asian/Hmong communities to work on finding solutions to this problem. The Project is guided by a steering committee that includes representatives from RCCHSD, the FCS Director, Ramsey County Attorney’s Office, Public Defender’s Office, the Court, the Sheriff’s Department, the Saint Paul Police Department, the Saint Paul Public Schools, and six cultural consultants from the communities. The cultural consultants are individuals who are in good standing in their communities and are able to provide information about their people’s history, circumstances, concerns, and issues. Their participation assists in the development of partnerships with each racial/ethnic community and ensures that, from the start of the project, each minority group has someone who can provide input into the planning and implementation of activities.

The project is divided into three phases. During Phase 1, cultural consultants (one to two for each group) representing the different racial/ethnic communities (African American, American Indian, Hmong, and Latino) along with a representative from the Caucasian community, were brought into the process. Initial funding supporting the work for Phase 1 came from a Children’s Justice Act grant from the DHS.\footnote{Grants from this fund support work that reduces trauma and improves services to children who have been abused}
The cultural consultants helped develop a plan for their respective racial/ethnic community that was designed to engage their communities in a partnership with Ramsey County and to develop strategies for ending the existing racial disparities.

Phase 2, in which Ramsey County is currently engaged, focuses on building community partnerships while gathering information from community members about the impact of agency policies and practices and their ideas for changes that will reduce existing racial disparities. In addition, staff are receiving training on institutional racism and participating in focus groups of all agencies involved with CPS to garner input and recommendations on how to reduce existing disparities. Community meetings were held in each community with designated and respected community leaders along with other community members and agency staff. Within each community focus groups were held prior to the planned larger community meetings to share ideas and goals. These focus groups and larger community meetings are being used to build relationships between the communities and RCCHSD. Talking Circles are used in the Native American communities to share their stories, their views and information about their culture, life styles, beliefs and customs. In these Talking Circles, each participant has the opportunity to speak once before someone else can speak again. Talking Circles and interviews were also used to gather information about the communities’ perceptions about out-of-home placement programs and to get recommendations for changes. Their input is specifically sought on new programs or practices that are being considered. For example, their comments with regard to the use of Family Group Decision Making were encouraged so that a clearer understanding about its purpose and the value results.

Phase 3 will include community meetings and focus groups to determine what refinements of the current initiatives and strategies need to be made and assess if new initiatives are warranted. This phase will be ongoing and will include soliciting grants to fund special projects or initiatives designed to impact specific problems or issues.

**Minnesota’s and Ramsey County’s Future Goals**

RCCHSD has established the overarching goal of achieving a cultural shift in the attitude of the community toward the agency and to transform itself into an “anti-racist institution.” To achieve these goals, RCCHSD has begun a process to change how the agency sets policy and implements practice.

RCCHSD has developed a multi-year plan to implement activities to end racial disparities in all of its services. The plan is focused on creating a more diverse agency that is culturally aware and sensitive by strengthening its contract services, by building a better support system for minority vendors and by eliminating the causal factors of disparities as they are identified in the treatment disparities for minority children.

RCCHSD has also established five Action Teams to address administrative operations: leadership, recruitment, staff retention, training, and contractual services. These Action Teams will support management by helping to develop more appropriate operational and administrative policies and procedures in each work area as needed. Action Teams engage in the following activities.

- The Leadership Action Team establishes basic diversity practices for the leadership, develops performance appraisals with cultural competency components, creates a self-assessment instrument for leaders and develops the plans for leadership training on racism and cultural diversity.
- The Recruitment and Hiring Action Team ensures that career development and promotion opportunities are equivalent among all RCCHSD staff.
The Staff Retention and Support Action Team assesses issues related to staff retention, including differential retention rates for staff of color and develops a proposal for funding an assessment of racial and cultural issues within the Department.

The Training Action Team increases the cultural competence of RCCHSD staff and guides RCCHSD’s diversity training.

The Contracts Action Team increases the cultural competence of organizations under contract with RCCHSD, develops a draft set of standards for culturally and linguistically competent vendors and identifies strategies for increasing vendor capacity.

Minnesota’s and Ramsey County’s Promising Practices and Strategies

Ramsey County has embarked on a course of action to demonstrate promising practices and strategies that can reform its management, organization, and services. The County has implemented the following practices:

- Reviewing system-wide policies, procedures and practices, allowing representatives from the racial and ethnic groups to have direct input to changes that need to be made;
- Building an ongoing process within administrative operations for ensuring that all staff are routinely given access to increasing knowledge about different cultures in their communities and how to serve them, thereby increasing their sensitivity and respect for cultural differences;
- Using a worker’s guide and supervisor’s handbook to guide staff performance;
- Using the Family-Centered Assessment Guidebook to improve practice; and
- Using cultural consultants as advisors to RCCHSD in order to increase agency knowledge and sensitivity to the different racial and ethnic groups.

Through these measures RCCHSD will have day-to-day administrative operations that ensure all staff are given ongoing access to information about different cultures to improve the overall cultural competence of its agency.
Data from Ramsey County

A. Demographics of Ramsey County

**Demographic Data**

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<th>Race</th>
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<tr>
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<td>21%</td>
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<tr>
<td>Two or more races</td>
<td>6%</td>
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**Child Welfare Population**

<table>
<thead>
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<th>Race</th>
<th>Percentage</th>
</tr>
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<tbody>
<tr>
<td>Caucasian</td>
<td>62%</td>
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<tr>
<td>Asian/Pacific Islander</td>
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**Reports**

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**Out-of-Home Placements**

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<td>Asian/Pacific Islander</td>
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<td>Hispanic/Latino</td>
<td>6%</td>
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<tr>
<td>Two or more races</td>
<td>5%</td>
</tr>
<tr>
<td>Other</td>
<td>1%</td>
</tr>
</tbody>
</table>

Source: U.S. Census 2000 & Ramsey County Community Human Services Department, Family and Children’s Services Division, Ending Racial Disparities Project Report, December 2, 2003

B. Process and Outcome Data

1. **Placements Over Time**

The total number of children placed in Ramsey County declined from 1,516 in 2002 to 1,380 in 2004; however for those children in placement a rising trend can be seen in the number of multiple placements.

<table>
<thead>
<tr>
<th>Number of Placements* by Year</th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Number of Children Placed</td>
<td>1,516</td>
<td>1,640</td>
<td>1,479</td>
<td>1,380</td>
</tr>
<tr>
<td>Total Number of Placements</td>
<td>2,121</td>
<td>2,279</td>
<td>2,004</td>
<td>2,069</td>
</tr>
<tr>
<td>Number of Children Placed More than Once</td>
<td>434</td>
<td>455</td>
<td>364</td>
<td>456</td>
</tr>
<tr>
<td>Number of Children Placed 3 or More Times</td>
<td>125</td>
<td>130</td>
<td>108</td>
<td>152</td>
</tr>
<tr>
<td>Number of Children Placed 4 or More Times</td>
<td>30</td>
<td>38</td>
<td>40</td>
<td>56</td>
</tr>
<tr>
<td>Number of Children Placed 5 or More Times</td>
<td>10</td>
<td>12</td>
<td>9</td>
<td>20</td>
</tr>
</tbody>
</table>

*Excludes Emergency Shelters and Placements shared with the Department of Corrections

Source: Ramsey County Community Human Services Department, Family and Children’s Services Division, Ending Racial Disparities Project Report, December 2, 2003
2. Children’s Race Over Time
Ramsey County’s data shows some decline in the recent number of African American children in placement; however, the percentage of Native American children has remained relatively even.

<table>
<thead>
<tr>
<th>Race</th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>48.2%</td>
<td>47.4%</td>
<td>48.9%</td>
<td>46.3%</td>
</tr>
<tr>
<td>Caucasian</td>
<td>36.9%</td>
<td>36.3%</td>
<td>33.5%</td>
<td>33.8%</td>
</tr>
<tr>
<td>Native American</td>
<td>4.9%</td>
<td>4.8%</td>
<td>5.5%</td>
<td>5.4%</td>
</tr>
<tr>
<td>Asian</td>
<td>4.0%</td>
<td>4.1%</td>
<td>5.1%</td>
<td>5.4%</td>
</tr>
<tr>
<td>Multi-racial</td>
<td>4.7%</td>
<td>5.2%</td>
<td>4.6%</td>
<td>4.7%</td>
</tr>
<tr>
<td>Unknown</td>
<td>1.2%</td>
<td>2.2%</td>
<td>2.4%</td>
<td>4.3%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Source: Ramsey County Community Human Services Department, Family and Children’s Services Division, Ending Racial Disparities Project Report, December 2, 2003

<table>
<thead>
<tr>
<th>Age</th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 1 year</td>
<td>2.4%</td>
<td>2.9%</td>
<td>1.7%</td>
<td>2.8%</td>
</tr>
<tr>
<td>1–5 years</td>
<td>20.4%</td>
<td>21.6%</td>
<td>19.9%</td>
<td>19.4%</td>
</tr>
<tr>
<td>6–10 years</td>
<td>21.0%</td>
<td>18.9%</td>
<td>16.7%</td>
<td>15.0%</td>
</tr>
<tr>
<td>11–15 years</td>
<td>32.5%</td>
<td>32.0%</td>
<td>35.1%</td>
<td>33.2%</td>
</tr>
<tr>
<td>16–17 years</td>
<td>15.9%</td>
<td>15.5%</td>
<td>16.4%</td>
<td>18.8%</td>
</tr>
<tr>
<td>18+ years</td>
<td>7.8%</td>
<td>9.1%</td>
<td>10.1%</td>
<td>10.8%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Source: Ramsey County Community Human Services Department, Family and Children’s Services Division, Ending Racial Disparities Project Report, December 2, 2003
Guilford County, with a population of 438,795, is one of a hundred counties in North Carolina and has Greensboro and Highpoint as its two largest municipalities. The median income in the county is $42,618. The Guilford County Department of Social Services (DSS), in Greensboro, provides financial assistance, family and children services and services to adults. Its mission is to “use a holistic approach to assure safety, promote self-sufficiency and permanency in the lives of adults, children, and families through collaboration and partnership within the community.”

County services are divided into three zones; East, West, and High Point. The highest concentration of African American children is in the East Zone. This area has the highest concentration of poverty, lower educational achievement and other problems associated with disparity and disadvantage.

Disproportionality in the child welfare system is evident from June 2003 data, that showed that African American children were 35% of the county population as compared with 55% Caucasian (non Hispanic) population but they accounted for 55% of the investigations as compared with 35% for Caucasian children. Among substantiated cases of child protective services, 55% were African American children as compared with 35% Caucasian children with both groups having similar percentages for foster care entries.

DSS began its work on the overrepresentation of minority children in its child welfare system by initially focusing on reducing the time to permanency for children in the foster care system. The Families for Kids project (funded by the Kellogg Foundation) was the first such initiative. Heightened awareness among DSS staff resulting from the Families for Kids work forced their acknowledgement of some disarray in the child welfare agency including treatment disparity and disproportionality of minority children in foster care as well as increase their sensitivity to issues of race with the county. Focusing on data up front with ongoing internal analysis made it possible for staff and community members to engage in productive discussions and develop corrective strategies.
These community/staff conversations and data analysis provided clear evidence that desired outcomes were not being achieved and disproportionality needed to be addressed. For example, one data report showed that, while the foster care caseloads in Guilford County had begun to decline in 2002, the overall number of children entering the system increased from 215 in 2002 to 255 during 2004. The specific variables triggering the increase were not clear, but the need for more analysis of cases coming through the courts was apparent. Other aspects of the data analysis, however, provided reasons for hope. For example, the data showed that children were being returned to their parents or relatives at a faster rate. Data collected on factors contributing to children coming into care also provided insight on how to focus services up front for improving practices and reducing disproportionality. High among contributing factors requiring attention were: substance abuse, unstable housing, parental refusal of services or lack of engagement, parent’s mental health status, prior history of parental criminal behavior, economic stress and prior child protective service history. In an effort to address the disproportionality issues and these contributing factors, the initiatives described here were undertaken.

Guilford County’s Initiatives

Family to Family Initiative

In 2001, the State Department of Human Services (DHS) embraced the Family to Family Initiative to continue its child welfare system reforms. Guilford County’s DSS became one of the agencies selected to launch this initiative. With some funding available through the Annie E. Casey Foundation for a coordinator and training, DSS set out to implement the Family to Family strategies. DSS agreed to transform its foster care program into a more neighborhood-based and culturally sensitive program. The emphasis was on keeping children in their communities and returning those placed outside their communities.

To accomplish this goal, DSS engaged the community, especially the faith-based community, in a joint effort to increase the number of African American foster homes. Additional work focused on three child welfare decision points: investigations, substantiations, and initial placement and special attention was paid to information that could ensure quality decisions at each of these points. Progress in Guilford County and other sites prompted a plan for statewide implementation, but recent circumstances have not made that plan possible.

The Guilford County Workgroup on Disproportionality (GCWOD)

As race related data from the Family to Family Initiative focused in on the overrepresentation of minority children in the child welfare system, the level of interest among DSS staff increased and they wanted to learn more about the causal factors behind the data. In response, the Guilford County Workgroup on Disproportionality (GCWOD) was formed and included staff from the management and supervisory levels of the three service zones and members of the Department of Social Services Board. The GCWOD mission is to create an internal DSS process—with community input—to reduce the disproportionality and treatment disparity of African American children in the county.

GCWOD worked to get a commitment from DSS to ensure that all staff develop a common understanding of the county’s disproportionality problem and their role in its elimination. Training was provided that helped staff better understand terminology such as institutional racism and its effect on child welfare practices.

Establishing this workgroup meant a new and concentrated review and analysis of promising approaches and strategies to inform their combined efforts to reduce the disproportionality and disparity. As a result, the GCWOD became the vehicle for DSS to identify and change ineffective practices as well as institutional barriers. The case practice and administrative changes recommended by the GCWOD are described below.
**Case Work Practice and Administrative Changes**

**PRACTICE CHANGES**

- **Family Assessment.** The Intake process, which traditionally focused on investigating families to determine if children had been abused or neglected, was broadened to include family assessments. These assessments allowed DSS staff to identify family strengths and needs and to begin meeting those needs in a less adversarial way. One goal of this practice change is to also engage other systems, such as the school system, to use an assessment process to develop solutions with families when problems, such as a possible school suspension, arise. This is an effort to prevent the family from coming to the attention of the child welfare system.

- **Team Decision Making.** Team Decision Making (TDM) was introduced as a change in practice during the Family to Family Initiative and now has become an integral part of the service delivery system. Bringing together the key persons involved with a child including family increases options to prevent placement and for making appropriate placements when they are necessary. DSS believes TDMs are having an impact by preventing the placement of children in foster care whenever possible.

- **Recruiting Relative and Non-Relative Foster Care Providers.** Guilford County DSS made intentional efforts to engage the community and the faith-based community to recruit foster parents who live in neighborhoods that experience high rates of children being removed from their homes. Family to Family data showed that the highest number of investigations and entries into foster care came from the East Zone, which is primarily African American. The Family to Family strategy works to ensure that children coming into foster care experience some continuity by remaining in their own communities and schools. Additionally, the child welfare system began to understand the importance of placing children with their relatives whenever possible. Renewed efforts were made to identify relatives immediately whenever children were at risk of removal and inviting family members to attend TDMs to assess their interest in and ability to become placement resources.

**ADMINISTRATIVE CHANGES**

- **Strategic Planning.** The GCWOD developed a strategic plan that identified some critical actions it wanted to carry out over a 6-to-12 month period. (See Appendix 1 for a copy of the Guilford County Strategic Plan.) Three critical actions in the plan were:
  - review and analysis of data;
  - staff training on race and racism; and
  - written reports on identified issues.

Data are routinely collected and analyzed by the GCWOD and reports are routinely shared with staff (see Appendix 1 for sample of data collected, reported and analyzed by the GCWOD). In addition, statistics are also available on activities that impact critical decision points, such as investigations, substantiations, and placements.

- **Community Partnerships.** The GCWOD identified other key agencies with which to build relationships for joint initiatives on behalf of families. For example, the GCWOD is working with the Greensboro Housing Authority to address the lack of affordable housing in the area, which is one reason some parents struggle to care for their children.

- **Memorandum of Agreement.** On December 6, 2004, 29 DSS supervisors and managers in the Child Welfare Division signed a Memorandum of Agreement on the issue of Disproportionality of African American Children in the Child Welfare System. The Memorandum of Agreement committed them to the following: “To assist our families and children in finding a better, healthier, and more secure way of life, we must do whatever we can to dismantle the racism that hurts and divides every one of us through education, honest discussions, and change in the polices and procedures.” (See Appendix 1 for a copy of the Memorandum of Agreement.)
Leadership Training. The Director of the DSS Child Welfare Division and other members of the leadership team participated in the “Undoing Racism” training sponsored by the Institute for Survival and Beyond. This training was considered a turning point for DSS. Leaders gained an understanding of institutional racism, which allowed them to better frame the issues and develop strategic plans. As a result of the training, leaders felt more prepared to engage others in finding solutions.

Future Goals of Guilford County

The GCWOD assumed the responsibility of leading the change process to strengthen its capacity to reduce the overrepresentation of minority children in the child welfare system. One high priority of the GCWOD is to analyze the factors contributing to the overrepresentation of minority children in the system. The GCWOD will examine each contributing causal factor and develop specific strategies to reverse or offset the disproportionality trend. By looking at factors that cut across the three service zones, the GCWOD can also consider effective countywide strategies. However, the GCWOD believes that further review over a longer time is needed before making decisions about which strategies will be the most effective. The GCWOD will also involve the community in the process to a much greater extent as plans develop.

A systemic goal of the GCWOD is to change the internal culture of DSS so that all staff are able to sensitively and appropriately deal with race as an issue in their work with clients. Work during the Family to Family Initiative led staff to acknowledge that disproportionality and disparity in the treatment of African American children was indeed a major concern for the County and specifically for DSS. Having now formalized the leadership’s commitment to address effects of institutional racism in the agency, the GCDOC identified other goals to pursue:

- Enhancing Data Tracking. In addition to capturing and reporting data in DSS, the plan is to expand data tracking to the juvenile services agency. It is anticipated that further research could lead to joint efforts to eliminate the causes of out-of-home placements and reduce them.
- Broadening Communication. The GCWOD intends to share information about its outcomes to organizations outside DSS. The initial target organization is the local County Directors’ Association.
- Developing Community Partnerships. Efforts to expand community partnerships to the fullest extent possible will involve other community agencies and organizations and political leaders in the process. Developing community partners will likely lead to solutions that address the issue of disproportionality.
- Solidifying Funding. GCWOD is considering how to use the state’s Title IV-E waiver to redirect funds to support families in ways that will reduce placements and accelerate reunification.
- Expanding and Reforming Staff Training. The Undoing Racism training may be extended to current social worker staff and included in the ongoing training curriculum for all staff coming into the agency.
- Expanding Team Decision Making (TDM). DSS will expand the use of TDM for all cases before petitions are filed in court and at all critical decision-making points in the service delivery system.

Guilford County’s Promising Practices and Strategies

The GCWOD is providing significant leadership to address racial disproportionality and disparity. Several promising practices and strategies are at work locally through the following activities:

- Continuing to use new practice models such as Team Decision Meeting (TDM);
- Transforming foster care services through the expansion of Family to Family;
Data from Guilford County

A. Demographics of Guilford County

Demographics and Decision Point Data

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Guilford County’s Total Child Population</strong></td>
<td></td>
</tr>
<tr>
<td>Caucasian (Non-Hispanic)</td>
<td>55%</td>
</tr>
<tr>
<td>African American</td>
<td>35%</td>
</tr>
<tr>
<td>Other</td>
<td>10%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
</tr>
</tbody>
</table>

| **CPS Investigations**        |            |
| Caucasian (Non-Hispanic)      | 35%        |
| African American              | 55%        |
| Other                         | 10%        |
| Total                         | 100%       |

| **Substantiated CPS Cases**   |            |
| Caucasian (Non-Hispanic)      | 35%        |
| African American              | 55%        |
| Other                         | 10%        |
| Total                         | 100%       |

Source: U.S. Census 2000 & Guilford County DSS, June 2003

While progress against the effects of racism will require a long-term commitment of time and resources, the GCWOD believes such a commitment can reform the agency by restructuring how its work is done.

B. Process and Outcome Data

1. General Demographic Data

<table>
<thead>
<tr>
<th>Service Area</th>
<th>African American</th>
<th>Caucasian (Non-Hispanic)</th>
<th>Other</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>East Zone</td>
<td>Population</td>
<td>50%</td>
<td>45%</td>
<td>5%</td>
</tr>
<tr>
<td></td>
<td>Investigations</td>
<td>69%</td>
<td>25%</td>
<td>6%</td>
</tr>
<tr>
<td></td>
<td>Entries Into Care</td>
<td>76%</td>
<td>23%</td>
<td>1%</td>
</tr>
<tr>
<td>West Zone</td>
<td>Population</td>
<td>19%</td>
<td>74%</td>
<td>7%</td>
</tr>
<tr>
<td></td>
<td>Investigations</td>
<td>47%</td>
<td>43%</td>
<td>10%</td>
</tr>
<tr>
<td></td>
<td>Entries Into Care</td>
<td>43%</td>
<td>55%</td>
<td>2%</td>
</tr>
<tr>
<td>High Point</td>
<td>Population</td>
<td>27%</td>
<td>66%</td>
<td>7%</td>
</tr>
<tr>
<td></td>
<td>Investigations</td>
<td>54%</td>
<td>37%</td>
<td>10%</td>
</tr>
<tr>
<td></td>
<td>Entries Into Care</td>
<td>52%</td>
<td>41%</td>
<td>7%</td>
</tr>
</tbody>
</table>

Source: Guilford County DSS, October 2004
2. Referral Sources by Race
GCWOD targeted the referrals coming into the agency at intake by source and racial group for intensive review and analysis. These data are being used by DSS to examine the reporting decision point and to determine why certain rates are higher than others and whether the referrals are appropriate. Learning more about the referral source could lead to changes in training as well as enhancing community education.

### Referral Sources by Race

<table>
<thead>
<tr>
<th>Referral Source</th>
<th>African American</th>
<th>Caucasian</th>
<th>Other</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Percentage</td>
<td>Number</td>
<td>Percentage</td>
</tr>
<tr>
<td>Educational Personnel</td>
<td>545</td>
<td>60%</td>
<td>222</td>
<td>25%</td>
</tr>
<tr>
<td>Human Service Personnel</td>
<td>470</td>
<td>54%</td>
<td>337</td>
<td>39%</td>
</tr>
<tr>
<td>Law Enforcement/Court</td>
<td>0</td>
<td>0%</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Anonymous</td>
<td>355</td>
<td>58%</td>
<td>260</td>
<td>42%</td>
</tr>
</tbody>
</table>

Source: North Carolina Central Registry, 2001

3. Removal Reasons by Race
The Guilford County Workgroup on Disproportionality (GCWOD) analyzed the contributing factors leading to overrepresentation of minority children in the Guilford County child welfare system. The GCWOD completed a review of 216 children who entered care during 2004. Of these 216 children, 120 (56%) were African American and 96 (44%) were Caucasian. The following table shows the reason for removal by race. Each child could have multiple reasons for removal and, therefore, the column totals do not equate to the sum total.

### Removal Reasons by Race

<table>
<thead>
<tr>
<th>Contributing Factors</th>
<th>African American</th>
<th>Caucasian</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of Children Removed Because of</td>
<td>Percentage of 120</td>
<td>Percentage of</td>
</tr>
<tr>
<td>Contributing Factor</td>
<td>African American Children</td>
<td>96 Caucasian Children</td>
</tr>
<tr>
<td>Parent's Substance Abuse</td>
<td>60</td>
<td>50%</td>
</tr>
<tr>
<td>Unstable Housing</td>
<td>41</td>
<td>34%</td>
</tr>
<tr>
<td>Parent Refused Services</td>
<td>37</td>
<td>31%</td>
</tr>
<tr>
<td>Parent's Mental Health</td>
<td>33</td>
<td>27%</td>
</tr>
<tr>
<td>Parent's Criminal Behavior</td>
<td>33</td>
<td>27%</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>11</td>
<td>9%</td>
</tr>
<tr>
<td>CPS History</td>
<td>27</td>
<td>22%</td>
</tr>
<tr>
<td>Economic Stress</td>
<td>26</td>
<td>22%</td>
</tr>
<tr>
<td>Child’s Mental Health</td>
<td>15</td>
<td>12%</td>
</tr>
<tr>
<td>Incarceration</td>
<td>11</td>
<td>9%</td>
</tr>
<tr>
<td>Child Delinquency</td>
<td>12</td>
<td>10%</td>
</tr>
<tr>
<td>Child’s Medical Needs</td>
<td>7</td>
<td>6%</td>
</tr>
<tr>
<td>Caregiver Health</td>
<td>8</td>
<td>7%</td>
</tr>
<tr>
<td>Abandonment</td>
<td>4</td>
<td>3%</td>
</tr>
<tr>
<td>Death of Parent</td>
<td>2</td>
<td>2%</td>
</tr>
<tr>
<td>Teen Mother in Custody</td>
<td>4</td>
<td>3%</td>
</tr>
<tr>
<td>Child’s Substance Abuse</td>
<td>1</td>
<td>1%</td>
</tr>
</tbody>
</table>

Source: Family to Family Initiative Outcomes Report, Guilford County, April 2005

4. Juvenile Court Placements
The GCWOD examined the number of children who entered the Guilford County child welfare system as a result of juvenile (delinquency) court placements. Between May 2003 and July 2004, 20 (80%) African American youth and five (20%) Caucasian youth were placed through the juvenile court. The percentage of African American children is extremely high. For that reason the GCWOD determined that this is an area outside DSS’s jurisdiction that must be targeted for attention.
5. Removal Reasons by Service Zone
The GCWOD looked at the rates of and reasons for removals by each of the three service zones in the county. By looking at factors that cut across the zones, the GCWOD can consider effective county-wide strategies.

<table>
<thead>
<tr>
<th>Contributing Factors</th>
<th>East Zone</th>
<th>West Zone</th>
<th>High Point</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number of Removals</td>
<td>Rank in Zone</td>
<td>Number of Removals</td>
<td>Rank in Zone</td>
</tr>
<tr>
<td>Parent’s Substance Abuse</td>
<td>44</td>
<td>1st</td>
<td>22</td>
<td>1st</td>
</tr>
<tr>
<td>Unstable Housing</td>
<td>33</td>
<td>2nd</td>
<td>17</td>
<td>3rd</td>
</tr>
<tr>
<td>Parent Refused Services</td>
<td>22</td>
<td>4th</td>
<td>20</td>
<td>2nd</td>
</tr>
<tr>
<td>Parent’s Mental Health</td>
<td>26</td>
<td>3rd</td>
<td>6</td>
<td>7th</td>
</tr>
<tr>
<td>Parent’s Criminal Behavior</td>
<td>20</td>
<td>5th</td>
<td>9</td>
<td>5th</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>5</td>
<td>9th</td>
<td>15</td>
<td>4th</td>
</tr>
<tr>
<td>CPS History</td>
<td>19</td>
<td>6th</td>
<td>8</td>
<td>6th</td>
</tr>
<tr>
<td>Economic Stress</td>
<td>19</td>
<td>6th</td>
<td>2</td>
<td>10th</td>
</tr>
<tr>
<td>Child’s Mental Health</td>
<td>5</td>
<td>9th</td>
<td>2</td>
<td>10th</td>
</tr>
<tr>
<td>Incarceration</td>
<td>9</td>
<td>7th</td>
<td>4</td>
<td>8th</td>
</tr>
<tr>
<td>Child Delinquency</td>
<td>7</td>
<td>8th</td>
<td>1</td>
<td>11th</td>
</tr>
<tr>
<td>Child’s Medical Needs</td>
<td>1</td>
<td>12th</td>
<td>3</td>
<td>9th</td>
</tr>
<tr>
<td>Caregiver Health</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Abandonment</td>
<td>1</td>
<td>12th</td>
<td>1</td>
<td>11th</td>
</tr>
<tr>
<td>Death of Parent</td>
<td>1</td>
<td>12th</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Teen Mother in Custody</td>
<td>3</td>
<td>10th</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Child’s Substance Abuse</td>
<td>2</td>
<td>11th</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Source: Family to Family Initiative Outcomes Report, Guilford County, April 2005

6. Team Decision Meetings (TDMs)
Guilford County DSS uses Team Decision Meetings (TDMs) at the intake and placement decision points. GCWOD tracked the participation rate of stakeholders, birth parents, relatives and foster parents in TDMs. Between July 2004 and February 2005, 435 TDMs were held and 2,904 persons were in attendance. A total of 730 pre-petition TDMs involved 1,136 children; 436 (38%) of the 1,136 children came into placement; 75% of the 1,136 children entered custody after the first TDM. A total of 686 placement change TDMs occurred, involving 538 children. The TDM recommended a placement change for 59% of the children and 24% of these children moved to less restrictive placements. The following data show the number of TDMs per month and the participation rate.

<table>
<thead>
<tr>
<th>Number of Team Decision Meetings (TDMs) by Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>65</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Percentage of Attendance by Stakeholder and TDM Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stake Holder</td>
</tr>
<tr>
<td>--------------</td>
</tr>
<tr>
<td>Birth Parents</td>
</tr>
<tr>
<td>Relatives</td>
</tr>
<tr>
<td>Foster Parents</td>
</tr>
</tbody>
</table>

Source: Family to Family Initiative Outcomes Report, Guilford County, April 2005
Wake County, North Carolina had a population of 627,846 in 2002, the median family income in the county was $67,149. Almost 6,400 families with children were living in poverty. Wake County Human Services (WCHS), located in Raleigh, was formed by merging the county departments of Social Services, Public Health and Mental Health, Developmental Disabilities and Substance Abuse. The mission of WCHS is to “promote a healthy and safe place to live, grow and work. In partnership with communities and other organizations, [WCHS] will enhance the ability of families and individuals to become self-sufficient to their greatest ability while ensuring quality care for those individuals unable to achieve self-sufficiency.”

In Wake County, African American children make up 25% of the child population but are 60% of the child welfare population. Over the past four years, Wake County has implemented several strategies in attempting to reduce racial disparities and to improve child welfare outcomes for all children. Most of the strategies were a direct result of Wake County’s involvement in Family to Family and its own Racial Disparities Workgroup. Shortly after starting Family to Family, leaders from WCHS’s Child Welfare Division began reviewing data that suggested racial disparities in the county were more dramatic than they had previously understood. WCHS leaders made the decision to confront the disparities openly and directly and to do so with community partners at the table.

**Wake County’s Initiatives**

*Family to Family Initiative*

In 2001, Wake County Human Services began a partnership with The Annie E. Casey Foundation to implement its Family to Family Initiative. The county sees and frames the strategies of Family to Family as central to reducing racial disparities and improving outcomes for African American families. Consistent with Family to Family’s approach, Wake County sought to form partnerships with communities in inner city Raleigh, the area in Wake County from which the greatest number of children were entering foster care. The county told community leaders that large numbers of children were coming into foster care from their communities, that the children were disproportionately African American,
and that Wake County was failing the children by sending them out of county for lack of foster homes. The county was successful in forming community partnerships with African American churches and community agencies for the purpose of recruiting and supporting foster families.

Wake County’s efforts through Family to Family to recruit foster families closer to children’s homes and to train foster parents to mentor birth parents are strategies designed to reunite children more quickly with birth families. By implementing Team Decision Making (TDM), Wake County has sought to bring families and community resources to the decision-making table before children are taken into foster care, moved from one placement to another, or returned home.

Wake County reorganized its service delivery into geographic zones to promote community partnerships between WCHS and the targeted communities. Its early efforts were focused on a neighborhood that wraps around the center of downtown. The area has a mix of housing units that includes new, revitalized and traditional homes, as well as rental properties and several public housing communities. The neighborhood also includes a historically black college and university (St. Augustine’s College and Shaw University), a number of public schools, and several churches. This historically African American neighborhood has an increasingly diverse population, but five years ago this target neighborhood accounted for almost half of the children coming into foster care in Wake County, with almost all of the children being African American.

Wake County’s ongoing self-evaluation efforts have focused on understanding racial disparities and measuring change. This information gathered in the self-evaluation process, which included extensive community input, resulted in Wake County entering into a contract with St. Augustine’s College to build a community collaborative that would recruit and provide support to foster families in the neighborhood. Importantly, the renewed contract emphasizes providing support to families to prevent children from needing to enter foster care.

### Racial Disparities Workgroup

The Racial Disparities Workgroup was convened in July 2002. It consisted of WCHS leadership as well as staff volunteers, representatives from the faith partnership, the public schools and the guardian ad litems’ office. At the first meeting, the WCHS Director of Child Welfare presented stark data on racial disparities in Wake County. The workgroup has used this data to inform its action plan. The workgroup was given the following charge by the WCHS Director of Child Welfare:

- Look at the indicators of disparities in the experiences between African American and Caucasian children and focus self-evaluation efforts on key decision points in child welfare: reporting, substantiations, entries into foster care, length of time in placement, and permanency results.
- Determine how Wake County is similar or different from other areas in the state.
- Identify the possible reasons for the disparity and consider alternate explanations.
- Recommend specific strategies to reduce disparities and improve services.

The Racial Disparities Workgroup discussed how the WCHS and the community could do a better job supporting single-parent families living in poverty in order to decrease the number of children coming into foster care. Yet, the Workgroup felt that it needed more information about why children were coming into foster care. In one specific action, the group reviewed 25 case summaries and found no cases in which it felt the county should not have taken custody. However, the Workgroup did identify other issues during the review, including the number of children entering custody from kinship placements and the need for low-income kinship providers to have access to legal services so that children could receive legal permanence.

The Workgroup has focused its efforts on a variety of strategies and issues including mobilizing the faith community to support families whose children are at risk of coming into foster care as well as on the differential outcomes for African American children in foster care including length of stay and kinship care.
Believe in a Child Campaign
Responding to its difficulty in finding adoptive homes for older African American children in foster care, Wake County contracted for a large-scale multi-media campaign called *Believe in a Child*. The campaign included newspaper inserts, radio and television public service spots, and billboards and specifically recruited families to foster and adopt older African American youth. Wake County also modified its regular recruitment efforts to target families willing to accept the most difficult to place children.

Child Welfare Faith Community Partnership
A cornerstone of WCHS’s efforts to reduce racial disparities has been the partnership formed with local churches to recruit foster families and provide support to birth families, especially those where children were at risk of removal. This partnership, initiated as part of *Family to Family* in December 2001, has become an ongoing part of how the community and the agency work together to address the needs of families. Forty-two churches have joined together and have:

♦ Recruited 35 families who completed the training and became foster parents;
♦ Sponsored or adopted individual families at risk;
♦ Supported foster families and foster youth;
♦ Organized and participated in events to honor and support foster families;
♦ Donated school supplies, toys, suitcases and gifts on special occasions;
♦ Provided space within the churches for foster parent and staff training, agency meetings; and
♦ Participated in agency committees and brought to the process the community’s perspective as new activities were considered.

This partnership is unique because of the churches’ level of involvement with the agency and their dedication and willingness to become directly involved in supporting individual families. Each church has an assigned person as the primary contact who can represent the church and carry out the commitments made with WCHS and the families. Another unique feature is the assignment of a staff liaison from the Child Welfare Division of WCHS for each church along with a part-time coordinator who oversees the work of the partnership. These features have resulted in a strong working relationship between the faith community and WCHS. The relationship that began with a focus on foster care as part of the *Family to Family* Initiative has transformed into a working alliance to help with other concerns, including supporting kinship caregivers so that children do not need to enter foster care. As a result, the faith community has become a major participant in the work to address racial disparities.

Legal Services
Many African American children come into foster care in Wake County from kinship families. Low-income kinship families experience difficulty accessing medical treatment and other services when they do not have legal custody of the children in their home. This has been problematic for some families and has resulted in children being placed in the child welfare system. To prevent these barriers from bringing children into foster care, Wake County established a small fund to help kinship caregivers purchase legal services to establish custody.

Wake County’s Future Goals
Wake County leaders are cautiously optimistic about their ability to continue making progress in reducing the disproportionality of African American children in the child welfare system, but they realize they have a long way to go. WCHS has been successful in winning funding from the county to replace the Annie E. Casey Foundation support and allow the *Family to Family* strategies to continue. Wake County’s promising practices are tied to the partnerships they are building with the community and to the commitments that have been made to change the institutional culture of the WCHS. The Child Welfare Division hopes to build and strengthen its partnerships with the African American community and to increasingly enlist the partners’ help in supporting at risk families. A recent presentation by the Director of Child Welfare to WCHS’s Leadership Team sparked
The Director of Child Welfare at Wake County Human Services (WCHS) presented the following information on racial disparities in Wake County to the Racial Disparities Workgroup:

Raising Community and Staff Awareness

WCHS’s leadership believes that awareness and feedback concerning disparities can be a powerful intervention tool to reduce those disparities. For this reason, multiple presentations have been made to staff about disparities in the system, and WCHS staff have been invited to make suggestions for change. The Director of Child Welfare also made a presentation to the leadership of the public schools, social work, psychology, and guidance departments, which are also mandated reporters in the Wake County schools. A follow-up presentation was also made to all school social workers where data were distributed on the number of reports and the racial breakdown of reports for each of the over 100 schools in Wake County.

Cultural Competency Training

Building a culturally competent workforce has long been a priority for Wake County. Annual cultural competence training is a requirement for all staff. The leadership of WCHS hopes that some of its efforts to form community partnerships and to bring the perspective of families and the community into decision-making processes will have a more subtle but perhaps more powerful effect than formal training.

Wake County’s Promising Practices and Strategies

The Wake County Racial Disparities Workgroup is providing leadership for initiatives that are demonstrating promising practices and strategies through the following activities:

- Implementing a family mentoring model that uses the faith-based community to provide services and resources for youth and families to prevent placements and to help youth transition out of the system.
- Building a formal partnership between families, neighborhoods, stakeholders, service providers, and WCHS.
- Continuing to expand the Family to Family Initiative, focusing even more attention on finding homes in the communities where children live.
- Enhancing staff cultural sensitivity by expanding their exposure through training at all levels.

Wake County Human Services has used its community partnership as a way to bring about changes in agency policies and procedures as well as to help keep children in their families.

Data from Wake County

A. Demographics of Wake County

Demographic Data

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wake County’s Total Child Population</td>
<td></td>
</tr>
<tr>
<td>Caucasian</td>
<td>67%</td>
</tr>
<tr>
<td>African American</td>
<td>25%</td>
</tr>
<tr>
<td>Other</td>
<td>8%</td>
</tr>
<tr>
<td>Total</td>
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</tr>
</tbody>
</table>

Child Welfare Population

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>60%</td>
</tr>
<tr>
<td>Other</td>
<td>40%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
</tr>
</tbody>
</table>

Source: U.S. Census 2000 & Wake County Human Services

The Director of Child Welfare at Wake County Human Services (WCHS) presented the following information on racial disparities in Wake County to the Racial Disparities Workgroup:

- Although African Americans accounted for less than 25% of the population in Wake County, 55% of the children reported and substantiated as abused or neglected were African American;
- The percentage of African American children who were determined to have experienced abuse or neglect was much higher in Wake County than the state as a whole, even though the percentage of African Americans in Wake County’s population was lower;
- Once substantiated as abused or neglected, African American children were almost twice as likely as Caucasian children to be placed in foster care within two years;
African American children placed in foster care stayed in care longer than Caucasian children; and

79% of all children in foster care, in July 2002, were African American.

Data were also presented comparing Wake County with other jurisdictions in North Carolina. These data suggested that the greatest disparity between Wake County and the rest of the state was the very low involvement of Caucasian families in Wake County’s child welfare system. Two findings stood out:

The poverty rate for African Americans in Wake County, according to the 2000 Census, was 20% while the poverty rate for Caucasians in Wake County was only 3%. The racial disparity in poverty between blacks and whites was much greater in Wake County than in North Carolina as a whole. The statewide poverty rate for African Americans was 20%, and the statewide poverty rate for Caucasians was 9%.

Slightly more than half of the African American families with children in Wake County, according the 2000 census, were single parent families whereas fewer than one in six white families with children were single parent families. Moreover, analysis of CPS reports received and children in foster care in Wake County showed that single parent households were disproportionately represented in Wake County’s system irrespective of race.

Single-parent white families were five times more likely to be reported to CPS than two-parent white families; single parent African American families were almost four times more likely to be reported than two-parent African American families. Almost 80% of the children in foster care came from single parent families.

B. Process and Outcome Data

1. New Reports Accepted
The following statistics provide information related to the numbers and percentages of new reports received at the Hotline by race.

<table>
<thead>
<tr>
<th>Race</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>246</td>
<td>80%</td>
</tr>
<tr>
<td>Caucasian</td>
<td>26</td>
<td>9%</td>
</tr>
<tr>
<td>Other</td>
<td>35</td>
<td>11%</td>
</tr>
<tr>
<td>Total</td>
<td>307</td>
<td>100%</td>
</tr>
</tbody>
</table>

Source: Family to Family Initiative Outcomes Report, Wake County, July–December 2004

2. Substantiation Data
When the racial disparities work began in 2002, African American families reported to the WCHS Hotline were slightly more likely to be substantiated for maltreatment than Caucasian families. By 2004, the substantiation rate had been reversed. African American families were being substantiated less often (22%) than Caucasian families (26%).

3. Foster Care Caseload by Race
As the data below indicate, the number of minority children in foster care is decreasing. Since 2002, the percentage of African American children entering foster care in Wake County and the overall percentage of Wake County’s African American foster children have both decreased. While the overall numbers are decreasing, the disproportionality rate continues to be high with respect to the percentage of African American children in the total population.

<table>
<thead>
<tr>
<th>Race</th>
<th>2002</th>
<th>2004</th>
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<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Percentage</td>
</tr>
<tr>
<td>African American</td>
<td>429</td>
<td>79%</td>
</tr>
<tr>
<td>Caucasian</td>
<td>92</td>
<td>17%</td>
</tr>
<tr>
<td>Other</td>
<td>22</td>
<td>4%</td>
</tr>
<tr>
<td>Total</td>
<td>543</td>
<td>100%</td>
</tr>
</tbody>
</table>

Source: Wake County Human Services
The Texas Department of Family and Protective Services (DFPS) is the agency responsible for providing services to ensure the safety and protection of children. Texas has taken steps to begin to strengthen support services for extended families in an effort to reduce the number of children coming into the system. Texas has also recognized the need to address the disproportionality and disparity in treatment of minority children, specifically, African American, Latino/Hispanic and Asian Pacific Islanders.

African American children made up 12.8% of the Texas population and 27% of the children entering foster care in 2003. In an effort to address this overrepresentation DFPS entered into a partnership with the Casey Family Programs to ensure that children receive the services they need to remain with their own families. In the San Antonio area and in other communities around Texas, AVANCE, Inc., has taken a leadership role in addressing this issue within the Latino/Hispanic community in conjunction with DFPS.

San Antonio’s Initiatives

AVANCE, Inc.

AVANCE, Inc., was founded in 1973 in response to the needs of the Hispanic community in the San Antonio area. The non-profit’s name refers to the organization’s goal to prepare children for entering school so they can achieve success through education in spite of living in poverty, limited access to resources and cultural and language differences. Its mission is to strengthen families, build self-confidence and the skills of families within their communities. AVANCE has expanded from one San Antonio neighborhood to over 50 centers across Texas, Kansas and California.

In San Antonio, AVANCE, Inc., provides services to families with young children. These services address disproportionality and disparity in the treatment of Latino families by targeting families that are at risk of coming to the attention of the child welfare system due to the poor economic conditions in which they live. Some AVANCE, Inc., services also support families after reunification.
PARENT CHILD EDUCATION PROGRAM

The Parent Child Education Program operates from September through May for parents with children 0 to 3 years of age. This program has had a major impact on improving the conditions and outcomes for families with young children as many families are now remaining together in their communities. Parents participate for four and one-half hours daily for five days per week. The program includes 27 sessions and each parent must complete at least 78% of the sessions to graduate from the program. A child care center is located on site and transportation and a nutritional meal for the children are provided. Families are recruited door-to-door and attend on a voluntary basis.

The Parent Child Education Program curriculum has four major components:

♦ **Toy Making.** This hands-on, one hour instructional component helps parents learn about various concepts and skills for good parenting by making toys for their children. Parents work together in a classroom setting, learning how to design and build unique toys.

♦ **Parent-Child Time Together.** This component engages the parent and child in play activities and uses the interaction as an opportunity for the parent to learn about child development. Help is given to parents in understanding child behavior and in modeling appropriate responses.

♦ **Resource Information and Support Services.** This component provides speakers and special resource specialists to meet with the parents and give assistance in accessing needed services.

♦ **Home Visitors Service.** This in-home observation and learning component has a trained aide who works with the parent to learn more about child care, new techniques for working with their children in a positive way and appropriate parent interactions. A separate session for fathers provides them with resource information and other support services if needed.

PROJECT HOME BOUND

Families working toward reunification were referred by DFPS to participate in AVANCE, Inc.’s Project Home Bound and the Parent-Child Education Program. This project was designed to help families reintegrate into their communities and provide supports to reduce the likelihood that they would return to the child welfare system. Because these families were referred by DFPS as a result of being reported for neglect or abuse of their child, they entered the AVANCE, Inc., Parent-Child Education Program involuntarily. To support these parents, AVANCE, Inc., altered its program components to put significant emphasis on relationship-building between the parent and AVANCE staff, building self-esteem and using community-based resources to support the family needs. AVANCE, Inc., was able to demonstrate a high success rate with the participating families. The program ended when the State contract was completed.

Community Partnerships in Child Welfare

The Community Partnerships in Child Welfare was established in San Antonio to involve the community in developing a network of support for at-risk families, changing the culture, policies and practices of the child welfare agency to be more family-centered and building a stronger base of community leaders who make decisions about the direction of the Partnership. The Partnership supports strong ties between families and their support systems including both formal and informal helpers with emphasis on making sure that families get what they need, when they need it and where they need it. The Partnership uses self-evaluation to include quality service reviews that examine overall child welfare practices and decision points.

San Antonio’s Future Goals

Community-Based Child Abuse Initiative

AVANCE, Inc., is working as the lead agency along with the DFPS on an initiative to develop a more community-based service delivery system to impact child protective services. This initiative is designed to implement services that can help prevent child abuse
and neglect, thus resulting in fewer children needing to be removed from their families and communities. This partnership among public agencies, community-based organizations, families and the youth seeks to design a new service delivery system. To gather information, five teams have been established that are using focus groups or “platicas” to engage the community in conversations about their needs and desired system changes. Community leaders were trained to facilitate these discussions.

A significant feature of this work is to engage youth in the planning and development of strategies as a part of the plan. Youth groups include individuals up to age 25. In the initial phase of this process, data are being collected to develop a community profile. In the second phase the youth will be looking at community assets, gaps in services, as well as their own strengths and needs. In the third phase, they will inventory the community resources. As information is gathered from all segments of the community, the information will be consolidated, analyzed and used to develop a plan of action. Phase 1 is in process and this work is expected to be complete in a little over one year.

**San Antonio’s Promising Practices and Strategies**

AVANCE, Inc., has introduced a model that is successful in helping young Hispanic parents, primarily mothers, develop skills that will allow them not only to raise their children, but also to become productive members of their communities. The primary protocol uses education and family relationships as the baseline for changing behavior, attitudes and actions. Young parents are educated about ways to rear their children, increasing their personal self-esteem and becoming self-sufficient. The underlying philosophy for the curriculum views education as a route to economic empowerment and personal development. It builds on the strong bond between a mother and child, which is an important cultural component of the Latino community.

### Data from San Antonio

#### A. Demographics of San Antonio

**Demographic Data**

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>San Antonio’s Total Child Population</strong></td>
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</tr>
<tr>
<td>Caucasian</td>
<td>61%</td>
</tr>
<tr>
<td>African American</td>
<td>7%</td>
</tr>
<tr>
<td>Other</td>
<td>32%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Child Welfare Population</strong></td>
<td></td>
</tr>
<tr>
<td>African American</td>
<td>60%</td>
</tr>
<tr>
<td>Other</td>
<td>40%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>100%</td>
</tr>
</tbody>
</table>

Source: U.S. Census 2000 & Texas Department of Family and Protective Services (DFPS)

#### B. Process and Outcome Data

**Children and Families Served by ADVANCE, Inc.**

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Parents Served</th>
<th>Number of Children Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001–2002</td>
<td>408</td>
<td>409</td>
</tr>
<tr>
<td>2002–2003</td>
<td>403</td>
<td>438</td>
</tr>
<tr>
<td>2003–2004</td>
<td>448</td>
<td>539</td>
</tr>
</tbody>
</table>

Source: ADVANCE, Inc.
PLACES TO WATCH
PROMISING PRACTICES

Eli Reed/Magnum Photos
The Children’s Administration of the Washington Department of Social and Health Services (DSHS) is the agency primarily responsible for child welfare services. King County has five field offices with three geographical locations including one that serves Native American families and one serving African American families. There are 1881 children in foster care in King County; children of color are 33% of the county’s child population but account for 50% of children in foster care.

Work on the overrepresentation of minority children in the child welfare system in King County began when DSHS social workers and community representatives united to address racial inequalities in the child welfare system. As the interested individuals in the community came together, they identified several conditions contributing to the overrepresentation of minority children. The issues below became the focal point for early discussions and helped shape some of the current strategies:

- Lack of a clear operational definition of abuse and neglect;
- Inconsistencies in the criteria used in determining when to make a child protective service report that allows for greater subjectivity on the part of the reporter;
- Lack of cultural awareness on the part of staff;
- Contradictions in the reports about scarcity of services and compliance by providers; and

Site Update of Importance

A major aspect of King County’s strategy has experienced controversy recently. The Office of African American Children’s Services is under investigation by the federal government as it reviews its compliance with civil rights laws that prohibit foster care decisions from being based on race. Additionally, the state suspended new referrals due to concerns about the quality of investigations and the safety of children being served. The Office continues to work with families already receiving services. In the framework for this paper, which is to identify jurisdictions as “places to watch,” we have included information on King County, acknowledging that there are many sides to the dispute about the services being offered. We believe there are important lessons to be learned from the history of King County’s efforts and from the strategies they chose to adopt.
Influence of poverty, housing, community safety and racism on the choices that families can make.

King County’s Initiatives

King County Office of Indian Child Welfare (OICW)

In the 1980s, King County established the Office of Indian Child Welfare (OICW) with the primary function of serving as the link between the Indian tribes and nations and the DSHS. Its responsibility was to establish the working relationship between these groups. The OICW was also the mechanism to implement the Indian Child Welfare Act (ICWA) and other initiatives to reduce the numbers of Native American children coming into care.

King County Office of African American Children’s Service (OAACS)

Concern about overrepresentation of African American children in the child welfare system was first raised by a group of African American social workers and representatives from the Black Child Development Institute. The initial systemic response by Department of Social and Health Services was to establish a special child protective service unit and in 2003 the Office of African American Children’s Services (OAACS) became a permanent office within DSHS. Its mission is to strengthen African American families and provide culturally relevant services when the children remained at home. The OAACS was also given the responsibility for overseeing permanency planning initiatives, including kinship care for African American children. While the early work did not show progress in reducing the overrepresentation of children in the system, OAACS has since undergone reorganization designed to improve its operations. Special attention has been given to stabilizing its leadership.

King County Disproportionality Stakeholder Coalition

The King County Coalition on Racial Disproportionality (Coalition) in child welfare began in 2002 and was led by a broad leadership group including the Department of Children and Family Services’ (DCFS) Regional Administrator, a Superior Court Judge, the Director of Casey Family Programs, representatives of the Court Appointed Special Advocate (CASA) program, the public defender, and other community agencies. Currently 26 organizations have committed to support the work of the Coalition. The Coalition meets monthly to develop and adopt strategies and share information with its members. Importantly, the Coalition includes the Child Welfare Agency and the Juvenile Court that have the authority not only to make decisions about what happens in the lives of children but also make the necessary administrative changes to support those decisions.

The Coalition leadership believes a key turning point in its work occurred after the “Undoing Racism” training, which was conducted by the Institute for Survival and Beyond. This training helped participants to understand the history of institutional racism and how it becomes imbedded into the framework of the laws, policies and practices of an agency. This improved understanding enabled the Coalition’s leadership to look more broadly at the need for systemic changes.

Recognizing that understanding the theoretical framework was not enough, the Coalition commissioned a report on the quantitative and qualitative aspects of racial disproportionality in King County. These data have been a major motivating influence and have provided a direction for an agenda for this work. The report helped determine the extent to which disproportionality exists at each child welfare decision point and the factors that contribute to racial disproportionality. The findings revealed that African American and Native American children are overrepresented at each decision point.47

The purpose of the Coalition was not only to gain a greater understanding of the issues, but also to develop specific actions that would reduce the numbers and the negative outcomes for children of color.

Its goal is to implement interventions that impact disproportionality at targeted decision points in child welfare related to investigations, placement and permanency, as well as to address the institutional factors that contribute to the problem. The Coalition decided to oversee a research project to identify the dynamics involved at each decision point and create a system-wide plan for change.

The Coalition is committed to educating the community about the issues and concerns resulting from treatment disparity of children in the child welfare system. Coalition members regularly participate in forums, conferences and other local and state presentations to highlight the problems and share this information with the public. They have held press conferences and made presentations at national meetings and conferences. They have engaged the community in critical discussions and garnered support as a result of this increased understanding.

**Building Blocks Project**
The Juvenile Court initiated the Building Blocks project to address the problems associated with overrepresentation of African American youth in the detention phase of the court process with a goal of reducing the number of children who were being detained. An interesting result of this initiative was an overall reduction in the number of all children held in detention but not a specific reduction in the disproportionate rate for African American youth.

**King County’s Future Goals**
The Coalition has developed a plan of action to guide its work over the next year. To prioritize their activities and to become more focused in their work, the Coalition developed plans for the following three projects designed to impact disproportionality in King County:

- **King County Systems Integration Initiative**, developed to reform the culture, policies, practices, programs and protocols that are currently being used in the judicial and child welfare systems, has brought together county and state officials from the juvenile justice, child welfare and other youth-serving agencies to take the following actions:
  - Develop a Model Interagency Agreement to guide information sharing;
  - Produce legal opinions to clarify ground rules for sharing information and convene attorney focus groups to discuss solutions;
  - Convene annual meetings to consider statutory and court rule reform; and
  - Participate in the development and implementation of cross-systems training.

- **The Benchmark Hearings Pilot Project** is developing a plan to decrease the number of children who have been in care longer than two years. This project includes dedicating a special judicial officer to hold reviews on cases and accelerate the permanency plans for the children, focusing on removing barriers by using institutional racism as one lens in the review.

- **Champions for Permanence Project** focuses on African American and Native American children and youth (340 African American children and 60 Native American children) in care longer than two years. This project uses special procedures that include:
  - Conducting relative searches;
  - Implementing Family Group Conferencing; and
  - Having students from the University of Washington’s School of Social Work conduct an extensive review of all case files to search for family members who might become placement and permanency options for children.

**King County’s Promising Practices and Strategies**
The King County Coalition on Racial Disproportionality has raised the level of attention and visibility on the issues on a community-wide basis. In addition to developing three initiatives to address the issue at the levels of policy, practice and administrative operations, the Coalition has also developed promising practices and strategies:
Consolidating the juvenile justice and child welfare planning so that outcomes are the result of joint consideration and reforms. Strategies are jointly decided upon so that overlapping actions can be minimized and planning can reflect a continuum of care and concern.

Expanding the use of Family Group Conferencing to improve practice and use of the Benchmark hearings to accelerate the movement of children into permanent placements. These changes in practices and procedures have evolved from the joint efforts of Child Welfare and Juvenile Justice. This type of collaboration can begin to breakdown institutional policies and practices that foster overrepresentation of minority children in the child welfare system.

Data from King County

A. Demographics of King County

Demographics and Decision Point Data

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
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<tbody>
<tr>
<td><strong>King County’s Total Child Population</strong></td>
<td></td>
</tr>
<tr>
<td>Caucasian</td>
<td>68%</td>
</tr>
<tr>
<td>African American</td>
<td>7%</td>
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<tr>
<td>Native American</td>
<td>1%</td>
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<tr>
<td>Other</td>
<td>24%</td>
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<tr>
<td>Total</td>
<td>100%</td>
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<table>
<thead>
<tr>
<th><strong>Child Welfare Population</strong></th>
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<tr>
<td>African American</td>
<td>33%</td>
</tr>
<tr>
<td>Native American</td>
<td>12%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>5%</td>
</tr>
<tr>
<td>Caucasian or Other</td>
<td>50%</td>
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<tr>
<td>Total</td>
<td>100%</td>
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<th><strong>Accepted Referrals</strong></th>
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</thead>
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<tr>
<td>Caucasian</td>
<td>54%</td>
</tr>
<tr>
<td>African American</td>
<td>19%</td>
</tr>
<tr>
<td>Native American</td>
<td>6%</td>
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<table>
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<tr>
<th><strong>Investigations</strong></th>
<th>No Findings</th>
<th>Unfounded</th>
<th>Founded</th>
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<tbody>
<tr>
<td>Caucasian</td>
<td>59%</td>
<td>31%</td>
<td>10%</td>
</tr>
<tr>
<td>African American</td>
<td>59%</td>
<td>26%</td>
<td>15%</td>
</tr>
<tr>
<td>Native American</td>
<td>77%</td>
<td>11%</td>
<td>12%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Children Out-of-Home Placement &gt; 60 Days</strong></th>
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</thead>
<tbody>
<tr>
<td>Caucasian</td>
<td>52%</td>
</tr>
<tr>
<td>African American</td>
<td>23%</td>
</tr>
<tr>
<td>Native American</td>
<td>11%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Dependencies Established</strong></th>
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</tr>
</thead>
<tbody>
<tr>
<td>Caucasian</td>
<td>51%</td>
</tr>
<tr>
<td>African American</td>
<td>27%</td>
</tr>
<tr>
<td>Native American</td>
<td>5%</td>
</tr>
<tr>
<td>Other</td>
<td>17%</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th><strong>Exit Paths</strong></th>
<th>Reunification</th>
<th>Adoption</th>
<th>Guardianship</th>
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<tbody>
<tr>
<td>Caucasian</td>
<td>71%</td>
<td>12%</td>
<td>10%</td>
</tr>
<tr>
<td>African American</td>
<td>63%</td>
<td>15%</td>
<td>14%</td>
</tr>
<tr>
<td>Native American</td>
<td>54%</td>
<td>21%</td>
<td>16%</td>
</tr>
<tr>
<td>2 or More Races</td>
<td>58%</td>
<td>14%</td>
<td>19%</td>
</tr>
</tbody>
</table>


48 Dependency data are for six months only (July 1, 2003 to December 31, 2003).
# Appendix 1. Reference List of Protocols, Tools and Curricula

<table>
<thead>
<tr>
<th>Number</th>
<th>Subject</th>
<th>Document Source and/or Contact</th>
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<tbody>
<tr>
<td>1</td>
<td>The Disproportionality Project—Raising Our Children Together, Report</td>
<td>Family To Family California Website at <a href="http://www.f2f.ca.gov">www.f2f.ca.gov</a> or Inter-City Family Resource Network (San Francisco, CA) or <a href="http://aecf.org/initiatives/familytofamily/overview.htm">http://aecf.org/initiatives/familytofamily/overview.htm</a></td>
</tr>
<tr>
<td>2</td>
<td>Memorandum of Agreement on the Issue of Disproportionality of African American Children in the Child Welfare system</td>
<td>Guilford County Department of Social Services (Greensboro, NC)</td>
</tr>
<tr>
<td>3</td>
<td>Guilford County Disproportionality Strategic Plan (12/1/04)</td>
<td>Guilford County Department of Social Services (Greensboro, NC)</td>
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<td>4</td>
<td>Wake County Family Mentoring Model</td>
<td>Wake County Human Services (Raleigh, NC)</td>
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<td>5</td>
<td>Relational Model for Case Management</td>
<td><a href="http://www.wellesley.edu/JBMTI/index.html">http://www.wellesley.edu/JBMTI/index.html</a> The Connections, Inc. (Middletown, CT)</td>
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<tr>
<td>6</td>
<td>Supportive Housing for Recovering Families</td>
<td>The Connections, Inc. (Middletown, CT)</td>
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<tr>
<td></td>
<td>Case Manager’s Training Curriculum</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Guidelines for Culturally Competent Organizations</td>
<td><a href="http://www.dhs_state.mn.us/main/groups/agencywide/documents/pub/dhs_id_016415.hcsp">http://www.dhs_state.mn.us/main/groups/agencywide/documents/pub/dhs_id_016415.hcsp</a> or Ramsey County Human Services Department (St. Paul, MN)</td>
</tr>
<tr>
<td></td>
<td>Supervisors Handbook</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Worker’s Guide</td>
<td></td>
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<tr>
<td></td>
<td>Family Centered Assessment Guidebook</td>
<td></td>
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<tr>
<td></td>
<td>Culture Language Appropriate Standards (CLAS)</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Iowa Indian Child Welfare Act—SF 354</td>
<td><a href="http://www.legis.state.ia.us/GA/80GA/Legislation/SF/003000/SF00354/Current.html">http://www.legis.state.ia.us/GA/80GA/Legislation/SF/003000/SF00354/Current.html</a> or Sioux City Family Resource Center (Sioux City, IA)</td>
</tr>
</tbody>
</table>
Guilford County
MEMORANDUM OF AGREEMENT
ON THE ISSUE OF DISPROPORTIONALITY
OF AFRICAN AMERICAN CHILDREN
IN THE CHILD WELFARE SYSTEM

Institutional racism is a systemic problem for the Department of Social Services through either the intentional or unconscious subordination of specific racial groups. While we may recognize and reject the most blatant forms of socially unacceptable or illegal bigotry, racial inequality has been institutionalized and thereby legitimized through our organizational practices and norms. As a result, racism often stands in the way of effective social work practice. One of our major barriers is our lack of understanding and shared analysis about what racism is and how it has been erected. It can only be undone if we understand what it is, where it comes from, how it functions, and why it is perpetuated.

As supervisors and program managers in the Child Welfare Division in the Guilford County Department of Social Services, it is our belief that to assist our families and children find a better, healthier, and more secure way of life we must do whatever we can to dismantle the racism that hurts and divides every one of us through education, honest discussions, and change in our policies and procedures.


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Appendix 2. Leadership Interviews

Rev. David Billing
The People’s Institute for Survival and Beyond
Core Trainer

Ralph Bayard
Casey Family Programs
Senior Director, Office of Diversity

Judge Patricia Clark
King County Superior Court
Chief, Juvenile Court Judge

Chiemi Davis
Casey Family Programs
Senior Director

Dennette Derezotes
Race Matters Project
Director

Joy Duva
Casey Family Programs
Deputy Executive Director

Madelyn Freundlich
Children’s Rights, Inc.
Former Policy Director

James Gibson
Center for the Study of Social Policy
Senior Fellow

Dr. Robert Hill
Westat
Senior Researcher

Sondra Jackson
Black Administrators in Child Welfare
Executive Director

Susan Kelly
Center for the Study of Social Policy
Senior Associate

Sania Metzger
Casey Family Services
Director of Policy

Susan Notkin
Center for the Study of Social Policy
Director, Center for Community Partnerships in Child Welfare

Rita Powell
Jim Casey Youth Opportunities Initiative
Senior Director

Dr. Dorothy Roberts
Northwestern University
Professor

Ray Sirry
Connecticut Department of Children
Former Court Monitor and Family Services

Gretchen Test
Annie E. Casey Foundation
Program Associate

Khatib Waheed
Center for the Study of Social Policy
Senior Fellow

Chantel Walker
Marguerite Casey Foundation
Director of Programs

Marsha Wickliffe
The M. Whittier Rose Group
Consultant

Dana Wilson
Child Welfare League of America
Director, Membership Services
Appendix 3. Map of State Disproportionality Rates

Percentage of African American Children in Foster Care According to State (Continental U.S.)

Sources: Child Welfare Outcomes 1999 Annual Report, published by the U.S. Department of Health and Human Services; Administration for Children and Families; Administration on Children, Youth, and Families; and the Children’s Bureau
Appendix 4. Site Visit Participants

Thanks and appreciation is extended to all persons who participated in the meetings and discussions held at each program site included in this report. Every effort was made to try to capture the names of the persons who attended but some names were missed. An apology is expressed to any persons who participated in the meetings or helped in any way to make the meetings possible and their name is not listed below.

San Francisco Disproportionality Project
Trent Rhorer
Jimmie Gilyard
Janice Anderson-Santos
Jack Stroppini
Beverly Upton
Sophia Isom
Robin Love
Sharon Bell
Pat Reynolds-Harris
Bill Bettencourt

Guilford County Workgroup on Disproportionality
John Shore
Pamela Watkins

Wake County Racial Disproportionality and Disparity Initiative
Dr. Warren Ludwig
Alma Shelton
Caroline Harper
Pastor Michael Dubin
Octavia Raney

Connecticut Supportive Housing for Families
Peter Nucci
Ray Sirry
Stacey Gerber
Elizabeth Cronin
Lisa Hansen
Nancy Santos
Donna Aaronian
Xiomara Goubourn
Violeta Carvahal
Georgia Chatman
Marie Cerino
Lisa DeMatteis-Lepore
Shelia Kristofak
Elizabeth Martinez-Hernandez
Dimenia Grebor

Illinois African American Commission
Senator Mattie Hunter
Terri Solomon

King County Coalition on Racial Disproportionality
Judge Patricia Clark
Ron Murphy
Lyman Legters
Jackie Buchanan
Zynovia Hetherington
Judy Wood
Jana Heyd

Ramsey County Children of Color Outreach Program
Susan Ault
Erin Sullivan-Sutton
Becky Montgomery
John Poupart
Mary Boyd
Lupe Serrano
Neal Thao
Monty Martin
Richard Coleman
Clyde Turner
Jenny Gordon
Joel Hetler

Sioux City Children of Color Project
Connie Bear King
Hosea Medeline
Mercedes Perez de Colon
Yesinia Gonzales
Miriam Botello
Tina Balderas
Julia Garza
Idel Bruckman

Michigan Task Force on Overrepresentation of Children of Color
Marianne Udow
Carol Goss
Jacquelynn Moffett
Susan Kelly

AVANCE, Inc., San Antonio
Dr. Gloria Rodriguez
Becky Cervantes
Ron Morales
Hosea Medeline
Mercedes Perez de Colon
Yesinia Gonzales
Miriam Botello
Tina Balderas
Julia Garza
Idel Bruckman
Appendix 5. Bibliography

The Places to Watch Report began with a review of the literature. Some reference sources were obtained through recommendations made by some of the interviewees, from a search of the Internet and by references located by the writer. Lists of the references that were reviewed or were in any way considered in the course of the performance of this report are listed below.

11. Fostering the Future: Safety, Permanence and Well-Being for Children in Foster Care, the PEW Commission on Children in Foster Care, Washington, DC.
21. Morse, B. A., Review of Case Management for People who are Homeless: Implications for Practice, Policy and Research.
Forged early in 2005, the Casey-CSSP Alliance for Racial Equity came together to develop and implement a national, multiyear campaign focused on studying and combating disproportionality, the over-representation of children of certain racial or ethnic communities in the child welfare system. The Alliance includes the five Casey organizations—the Annie E. Casey Foundation and its direct service agency, Casey Family Services, Casey Family Programs, the Jim Casey Youth Opportunities Initiative and the Marguerite Casey Foundation—as well as the Center for the Study of Social Policy (CSSP) and parents and alumni of foster care.

**CSSP** is a nonprofit public policy organization that develops and promotes policies and practices that support and strengthen families and help communities to produce equal opportunities and better futures for all children. We work in partnership with federal, state and local government, and communities and neighborhoods—from politicians who can craft legislation, state administrators who can set and implement policy and practice, and networks of peers, community leaders, parents and youth to find workable solutions to complex problems.

www.cssp.org

**Casey Family Programs** is the largest national foundation whose sole mission is to provide and improve—and ultimately prevent the need for—foster care. The foundation draws on its 40 years of experience and expert research and analysis to improve the lives of children and youth in foster care in two important ways: by providing direct services and support to foster families and promoting improvements in child welfare practice and policy. The Seattle-based foundation was established in 1966 by UPS founder Jim Casey and currently has an endowment of $2 billion.

www.casey.org

**The Marguerite Casey Foundation** was created by Casey Family Programs in 2001 to help expand Casey’s outreach and further enhance its 37-year record of leadership in child welfare. Based in Seattle, the Marguerite Casey Foundation is a private, independent grant-making foundation dedicated to helping low-income families strengthen their voice and mobilize their communities.

www.caseygrants.org

**Jim Casey Youth Opportunities Initiative** was created in 2001 by Casey Family Programs and the Annie E. Casey Foundation. Based in St. Louis, the Initiative is a major national effort to help youth in foster care make successful transitions to adulthood.

www.jimcaseyyouth.org

**The Annie E. Casey Foundation** is a private charitable organization dedicated to helping build better futures for disadvantaged children in the United States. It was established in 1948 by Jim Casey and his siblings, who named the Foundation in honor of their mother. The primary mission of the Foundation is to foster public policies, human-service reforms, and community supports that more effectively meet the needs of today’s vulnerable children and families. In pursuit of this goal, the Foundation makes grants that help states, cities and neighborhoods fashion more innovative, cost-effective responses to these needs.

www.aecf.org

**Casey Family Services** was established by Jim Casey in 1976 as a source for high-quality, long-term foster care. Casey Family Services today offers a broad range of programs for vulnerable children and families throughout the Northeast and in Baltimore, Maryland. The direct service arm of the Annie E. Casey Foundation, Casey Family Services operates from administrative headquarters in New Haven, Connecticut, and eight program divisions in Connecticut, Maine, Maryland, Massachusetts, New Hampshire, Rhode Island and Vermont.

www.caseyfamilyservices.org