



Institutional racism in child welfare

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Black¹ children have been overrepresented in the child welfare system for a long time. Billingsley and Giovannoni (1972) were among the first scholars to highlight this issue in their seminal work, *Children of the Storm*, more than three decades ago. While black children comprise about one of five children in the nation's population today, they account for about two out of five of the 500,000 children who are removed from their families and placed in foster care.

Why are black children overrepresented in child welfare, while white children are underrepresented? Three explanations are most often provided. First, this higher representation of blacks should be expected, since they have multiple risk factors that predispose them to maltreat their children more than whites (Capillare, Eckenrode, & Powers 1993; Gil, 1970; Jason, Andereck, Marks, & Tyler, 1982; Lauderdale, Valiunas, & Anderson, 1980; Searly & Lauderdale, 1983). Second, this disproportionate representation is said to be due to their poverty status, i.e., since poor families are more likely to be in child welfare than non-poor families, and blacks are more likely to be poor than whites, they should be more highly represented than whites.

Indeed, since blacks account for two-fifths of all children in foster care, this is comparable to the proportion (40%) of all poor children who are black. Moreover, most studies have found the highest rates of child maltreatment among the most economically disadvantaged groups. Thus, some analysts conclude that, since blacks are more highly concentrated among low-income families, it is their class status—not their race—that accounts for their higher representation (Gelles, 1982; Pelton, 1978).

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Note: The term "black" will be used throughout this article rather than African American, since increasing numbers of black children in the child welfare system have parents who are immigrants from the Caribbean, Africa and Central and South America that do not identify themselves as African Americans.

But this article will focus on a third explanation—institutional racism (Better, 2002; Roberts, 2002). Most observers are also aware that the reports to the government hotlines have a class bias in that low income and minority families are more likely to be reported for child maltreatment than middle-income and non-minority families (Hampton, 1991; Holton, 1990). In order to obtain more accurate data (that would also include unreported cases of abuse and neglect), the government instituted the National Incidence Studies of Child Abuse and Neglect (NIS) in 1980, 1986, and 1993. Contrary to popular belief, however, all three NIS studies revealed that black families do not maltreat their children more often than white families (Sedlak & Broadhurst, 1996). And, when class and other risk factors are controlled for, blacks have *lower* rates of abuse and neglect than whites (Sedlak & Schultz, 2005a).

A key question remains, “Why are black children still taken from their homes more than white children?” But not only are black children disparately placed in foster care, they also remain there for much longer periods than white children (Jenkins & Diamond, 1983; U.S. Children’s Bureau, 1997). Thus, this disproportionate removal of black children can have profound policy implications, since numerous studies have shown that former foster children are highly represented among the homeless, welfare recipients, delinquents, drug addicts, criminals and child abusers as adults. Is the foster care system unwittingly incubating tomorrow’s underclass?

This assessment will describe how institutional racism influences the operation of the child welfare system and how it results in disparate adverse effects on black children and their families. First, institutional racism will be viewed from an historical perspective to show how it affected the evolution of child welfare policies regarding black children and families. Second, the impact of other systems (notably, mental health, special education and juvenile justice) that contribute to the disparate representation of blacks in child welfare will be assessed. Third, the extent to which decision-making processes at various stages of child welfare system screen in black children and screen out white children will be examined (Morton, 1999; Roberts, 2002). Fourth, the role of institutional racism in denying vital social and economic supports to kin caregivers who are responsible for their related children will also be described. This analysis will close with recommendations to reduce the overrepresentation of black children in child welfare.

1. Institutional racism

Before one can adequately understand the operation and impact of institutional or systemic racism, it is necessary to operationally define the concept. Billingsley and Giovannoni (1972) provide an appropriate definition:

It is the systematic oppression, subjugation and control of one racial group by another dominant or more powerful racial group, made possible by the manner in which the society is structured. In this society, racism emanates from white institutions, white cultural values, and white people. The victims of racism in this society are Black people and other oppressed racial and ethnic minorities. (Billingsley & Giovannoni, 1972, p. 8)

Other important characteristics of institutional racism are that it can be covert or overt, unconscious or conscious, and unintentional or intentional. In other words, for this form of racism to occur, it is not necessary for a group of people to assemble in a backroom to consciously conspire against another group. They must only internalize the operating norms and values of the agency, institution or society in which they are situated (Better, 2002; Day, 1979). As Downs (1970) observes, institutional racism can emanate from people with good intentions, and who are without malice:

Racism can occur even if the people causing it have no intention of subordinating others because of color, or are totally unaware of doing so. Admittedly, this implication is sure to be extremely controversial. Most Americans believe racism is bad. But how can anyone be "guilty" of doing something bad when he does not realize he is doing it? Racism can be a matter of result rather than intention because many institutional structures in America that most whites do not recognize as subordinating others because of color, actually injure minority group members far more than deliberate racism. (Downs, 1970, p.78)

An important premise of this analysis is that most policies in child welfare have been developed by persons and groups with good intentions and who are genuinely concerned about the "best interests" of children. This is a major reason why the policies have endured so long. Nevertheless, many of these well-meaning policies continue to have adverse effects on poor children in general, and disproportionately on children of color, because of the influence of systemic racism. This form of racism is also strongly correlated with classism and sexism. Some of the most serious manifestations of institutional racism can be found among poor children who live in families headed by women who are members of a racial minority. It should also be noted that members of minority groups who conform to the norms of racist institutions may be institutionally racist. For example, black police officers that are more aggressive with black than white suspects or black social workers that often sanction poor black families more harshly than poor white families could both be exhibiting institutional racism (Day, 1979).

This assessment will focus on a form of institutional racism that is known as "structural discrimination" (Better, 2002). Structural (or unintentional) discrimination refers to the disparate adverse consequences of societal trends and institutional policies on racial minorities that may not have been explicitly designed to have racially discriminatory effects (Hill, 1990). It is manifested in the notion of "disparate

adverse impact” in the legal field. Several Supreme Court decisions (notably, the 1971 *Griggs v Duke Power* edict) have held that policies in the areas of employment, housing and voting rights that have undue adverse impact on minorities can be declared racially discriminatory or unconstitutional, even if those policies were not originally designed to have negative effects on those groups (Calmore, 1989). In short, structural discrimination shifts the focus from the prejudiced attitudes or malevolent intentions of individuals to the consequences or effects of systems or institutions.

Advocates in child welfare might find it useful to review legal precedents relating to disparate adverse impact to determine whether they might be applied to reduce racially disproportionate adverse effects of policies and practices in child welfare. An example of such a strategy are the lawsuits that have been instituted by Children’s Rights Inc. in about ten states in which state officials have been charged with violating the rights of foster children under Title VI of the Civil Rights Act of 1964. In an unprecedented court-ordered settlement in Tennessee on May 15, 2001, for example, the state agreed to have an independent expert conduct statewide evaluations to identify disparities in order to reduce disparate treatment of black children in foster care. These cases may set precedents for other court challenges that are designed to prevent or reduce the disproportionate negative effects of child welfare policies on children of color.

2. Historical overview

One of the earliest indictments of the inequitable treatment of black children by child welfare services was at the 1930 White House Conference on Child Health and Protection of Dependent and Neglected Children. The noted sociologist, Dr. Ira De Augustine Reid, Director of Research of the National Urban League, presented a paper that described the discriminatory treatment of black children in four areas: welfare assistance, foster care, health services, and child care (Billingsley & Giovannoni, 1972). His data revealed that black families were sharply underrepresented or largely excluded from participating in the Mother’s Aid (the forerunner of AFDC) program in both the North and South. Despite the much higher illegitimacy rates among blacks, the existing facilities for unmarried mothers or their out-of-wedlock children were almost exclusively for whites. Furthermore, despite the alarmingly higher rates of infant mortality among blacks, medical and health care services were mainly for whites. Similarly, although black mothers were more likely to work than white mothers, the day care services that were available were mostly for whites (Billingsley & Giovannoni, 1972). Many of these inequities persist today. Although much higher proportions of black children and families are currently represented in these programs, the services are still inaccessible or inadequate for the large numbers of low-income families that need them (Pear, 1998; Revkin, 1999; Stehno, 1982).

The child welfare system was not originally designed to serve blacks. It developed toward the end of the 19th century along with the settlement house movement to serve the needs of thousands of poor and working class white families

who had emigrated from Europe. As a result of this exclusion, the black community had to develop its own social welfare agencies to care for the poor, aged and dependent. Since its inception in the 1700s, the Black Church, through its mutual aid and fraternal societies, was the major catalyst for the creation of numerous institutions, such as credit unions, banks, homes for the elderly, homes for unmarried mothers, orphanages, hospitals, schools, and colleges (among free blacks during slavery and after slavery ended) (Curry, 1981; Ross, 1978). Indeed, many black banks and colleges continue to exist today. However, some of these organizations were destroyed as a result of race riots and other racial conflicts. The advent of integration during the 1950s and 1960s also contributed to the demise of many social welfare agencies in the black community.

In order to make a proper assessment of the impact of institutional racism, it is necessary to adopt a broader view of child welfare. Indeed, Billingsley and Giovannoni (1972) argued that child welfare services should also include services in the areas of public assistance, child care, health services, child support, juvenile justice, education, and mental health. The impact of some of these other institutions will now be examined.

3. Mental health

Mental health institutions play an important role in the development of children in the child welfare system. Research on “modern racism” has shown that institutional racism is often manifested in inequitable mental health treatment of racial minorities through “aversive racism” (Whaley, 1998). Aversive racism is a form of structural discrimination that refers to prejudicial attitudes and discriminatory behavior that may be exhibited unconsciously or unintentionally by persons with liberal views and tolerant predispositions. Aversive racists often rationalize or justify their negative stereotypes, uncomfortable feelings, or differential treatment of minorities on nonracial grounds (such as poverty, parental absence or inadequacy, and perceived aggressive behavior).

Several studies have revealed that mental health professionals, who internalize stereotypes of blacks as being more violent or aggressive, more often diagnose black patients as schizophrenia than white patients (Whaley, 1998). Black youth are more likely than white youth to be prescribed psychiatric medications (especially Ritalin) in order to control their “aggressive behavior.” Black adolescents are more often referred to secure correctional facilities, while white youths with the same violent behavior and psycho-pathology are more often referred to mental health services as outpatients (McCabe et al., 1999; Stehno, 1982). In short, diagnoses based on racial prototypes by well-meaning clinicians are more likely to result in higher rates of placement of black children in foster care than white children (Stehno, 1982; Whaley, 1998). Moreover, while most black children have few mental health problems when they enter foster care, their mental health deteriorates markedly by the time they leave or age out of the system as a result of continual shifts from home to home and inadequate social and psychological services (Curtis, Dale & Kendall, 1999).

4. Schools

Educational institutions are another important source for identifying children likely to come to the attention of the child welfare system. Black students are also more likely than white youth to be labeled as “mentally or educationally retarded” and assigned to special education. Members of the teaching profession also exhibit aversive racism in their differential perception and treatment of students. Educators who may unconsciously perceive black students to be more belligerent than white students are more likely to recommend blacks for detention, suspension or expulsion. Black youth are more likely to be suspended or expelled than white youth who are responsible for the same infractions of school regulations (Smith & Chunn, 1989). School officials may recommend that these “incorrigible” young people should be placed in foster care because of truancy, aggressiveness or as persons in need of services (PINS). Between 30% and 41% of children in foster care receive special education services (Day, Williams & Yu, 2002). These examples of institutional racism do not only apply to the behavior of white educators. Black teachers who subscribe to stereotypes about blacks may also exhibit aversely racist behavior that results in “double standards” in the differential treatment of black and white students.

5. Juvenile justice

The juvenile justice system is an important source for recruiting black youth into child welfare. About 15% of children in foster care were placed because of delinquent behavior or status offenses. Minority youth are markedly overrepresented in the juvenile justice system as a result of racially disparate treatment at various stages of decision-making processes. Black youth are more likely than white youth—with the same offenses: to be referred to juvenile court, to be detained prior to trial in secure facilities, to be formally charged in juvenile court, to be waived for disposition in adult courts, and to be committed to a juvenile or adult correctional institution (Youth Law Center, 2000). It is also interesting to note that, while government data reveal that white youth use and sell more drugs than black youth, blacks are more likely to be charged with drug offenses than whites—at each stage of criminal processing (Hill, 1999; US-OJJDP, 1999). Racial disparities between minority and non-minority youth reached such alarming levels that Congress amended the Juvenile Justice and Delinquency Prevention Act (PL 93-415) in 1988. This legislation required all states to identify the extent of racial overrepresentation at each stage of the decision making processes of the juvenile justice system; and to implement strategies for reducing disproportionate minority confinement (DMC).

Moreover, blacks charged with possession of crack cocaine receive more severe sentences than whites charged with similar amounts of powder cocaine (Mauer, 1999). Clearly, institutional racism pervades all stages of the juvenile justice (and adult criminal justice) system. It is also important to observe that the correctional institutions receive many youth who leave the child welfare system without being

adopted or reunited with their parents. Research has revealed that youth who age out of foster care (who are disproportionately children of color) often become homeless, or turn to prostitution and crime (Jonson-Reid & Barth, 2000). Many studies have also found that maltreated children are more likely than non-maltreated children to engage in delinquent or criminal behavior as youth or adults that eventually leads to incarceration (Wiebush, Freitag, & Baird, 2001). Once again, this contributes to the overrepresentation of black youth and the underrepresentation of white youth in the juvenile justice system (Mauer, 1999).

6. Decision-making processes

To what extent do decisions made at various stages of child welfare processes contribute to the concentration of black children? We will review research findings that focus on the following stages: reporting, referrals, investigation, substantiation and placement in foster care. Which families are more likely to be reported to child protective services (CPS)? Most research suggests a strong correlation between social class and child abuse and neglect (Hampton, 1991). Many research studies have found that child maltreatment is reported more for low income than middle- and upper-income families (Gelles, 1982; Hampton & Newberger, 1985; O'Toole, Turbett, & Nalepka, 1983). Studies have revealed that doctors are more likely to diagnose physical injuries as "abuse" among poor families, and as "accidents" among affluent families (Katz, Hampton, Newberger, Bowles, & Snyder, 1986; McPherson & Garcia, 1983).

The overrepresentation of poor families in foster care should not be surprising, since social welfare policies are intrinsically linked with child welfare policies. In order for states to receive federal reimbursement through Title IV-E funds for their child welfare services, the families they serve must qualify for public assistance (formerly Aid to Families with Dependent Children, now Temporary Assistance to Needy Families). But the 1996 welfare reform act further restricted eligibility for foster care. The law limited eligibility for Title IV-E funds to only those foster children who would have been income eligible for AFDC as of July 16, 1996. As time passes, it is likely that fewer children will meet this standard, and states will be able to claim decreasing amounts of federal reimbursement for their foster care programs. Thus, the majority of children in foster care are from families that relied on or qualified for public assistance (Lindsey, 1994). Since minority children are highly represented on the welfare rolls, it is to be expected that they would also be disparately concentrated in the child welfare system.

Many researchers have also concluded that child maltreatment is reported more for blacks than whites. For example, Hampton and Newberger (1985) found that both public and private hospitals overreported abuse and neglect among blacks and underreported maltreatment among whites. Three-fourths of blacks were reported for maltreatment by the hospitals, compared to 60% of whites. In Illinois, black children were reported to CPS at three times the rate of white children (Rolock & Testa, 2005). Several studies also revealed that black women were more likely than white women to be reported for child abuse, when their newborns had tested positive for drug use (Chasnoff, Landress, & Barrett, 1990; Neuspiel, Zingman, Templeton, DiStabile, &

Drucker, 1993). Moreover, a study of children under three years old who experienced pediatric fractures found that minority children (53%) were more than twice as likely as white children (23%) to be reported for suspected physical abuse. Even when one controlled for the likelihood of abuse injury, minority children continued to be reported more for abuse than white children (Lane, Rubin, Monteith, & Christian, 2002).

On the other hand, other studies do not find strong racial differentials in the reporting of child maltreatment. They have concluded that the strongest predictors of reporting are: severity of injury, cases with prior reports, and history of family problems (Newberger, Reed, Daniel, Hyde, & Kotelchuck, 1977; Wolock, Sherman, Feldman, & Metzger, 2001) After receiving reports on alleged child maltreatment, child welfare agencies routinely screen them to decide which ones should be referred for investigation. It is important to note that sizable minorities of cases that are reported for child maltreatment are not referred for investigation. According to the National Child Abuse and Neglect Data System (NCANDS), one-third of the three million referrals to CPS in 2002 were screened out, while two-thirds were screened in and investigated (Administration for Children and Families, 2003). Similarly, a nationwide survey of child welfare agencies by the Urban Institute revealed that 36% of the cases that had been reported to CPS in 1996 were screened out prior to investigation (Tumlin & Geen, 2000).

During the screening process, a decision is made about whether or not some cases will be investigated. An in-depth longitudinal study of child maltreatment reports in New Jersey found that blacks (20%) and whites (23%) had similar rates of investigation (Wolock et al., 2001). Although a reanalysis of NIS-3 data did not find that race alone had any effects on investigation, it found strong interactions between race and severity and type of maltreatment on the probability of investigation (Sedlak & Schultz, 2005b). For example, the NIS-3 reanalysis found higher rates of investigation for blacks than whites among children: (a) who were emotionally maltreated or physically neglected; and (b) whose parents were substance abusers.

At the conclusion of the investigation of the maltreatment report, a decision is made whether or not to confirm or substantiate the allegation. Only a fraction of child abuse reports are substantiated. According to NCANDS data, about 30% of all cases investigated were substantiated in 2002, while 60% were not substantiated (Administration for Children and Families, 2003). Similarly, the national survey by the Urban Institute revealed that about 38% of the cases investigated for child maltreatment in 1996 were substantiated (Tumlin & Geen, 2000).

Are there racial differentials in substantiation? A comprehensive review of studies of the substantiation of child maltreatment reports identified four key predictors: status of reporter, prior reports of maltreatment, race or ethnicity of victim or family and type of maltreatment (Zuravin, Orme, & Hegar, 1995). Substantiation was more likely: when the reports were made by professionals; when there had been prior reports of abuse or neglect; when the report was for physical abuse rather than neglect; and when the victim or family was a member of a minority group (i.e., black or Hispanic). Furthermore, most risk assessment studies reveal higher rates of substantiation for blacks than whites (Baird, Ereth, & Wagner, 1999; Eckenrode, Powers, Doris, Munsch, & Bolger, 1988).

But there is some contrary evidence on racial differentials in substantiation decisions. For example, the New Jersey study of child maltreatment did not find

racial differences regarding substantiation rates. When race or ethnicity was included in regression models to estimate the probability of substantiation, it had no significant effects (Wolock et al., 2001). But the study did identify three other strong predictors of substantiation: parental substance abuse, number of children and family functioning. Based on an analysis of NCANDS data for selected states, however, Morton (1999) found the rates of substantiation for black children were consistently higher than the rates for white children, while the substantiation rates for Latino children were comparable to those of white children. Thus, decisions about substantiation might be operating differently for black and Latino children. After a case has been substantiated, a decision must be made about whether children will be removed from the home or whether their families will receive services in the home. Of all substantiated cases, about one out of five children are placed in foster care (Administration of Children and Families, 2003).

In sum, there are contradictory data about whether there are racial differences at various stages of the child welfare system. Major reasons for these mixed results are the different methodologies employed in these studies and the paucity of systematic data by race at different stages. Nevertheless, as there are numerous studies of racial patterns relating to the placement of children in foster care, it is useful to examine this later decision-making stage in greater detail.

At the outset, it is important to highlight some puzzling patterns of foster care placement. While eight out of ten children in the child welfare system are referred because of abuse or neglect, the overwhelmingly majority (about 60%) are there for neglect (or reasons related to poverty)—not for abuse (Administration for Children and Families, 2003). Moreover, contrary to popular belief, children are more likely to be removed from their home for neglect than for physical or sexual abuse (Katz et al., 1986; Lindsey, 1994). In other words, families (which are disparately white) that have been substantiated as physically or sexually abusing their children are more likely to keep their children and receive services in the home. On the other hand, families (which are disparately black) that have been found to neglect their children are more likely to have their children taken from them. Are these placement patterns in the best interest and safety of the child? Similarly, children who are removed from substance-abusing parents (who are disproportionately black) are placed more for neglect than abuse (Walker, Zangrillo, & Smith, 1994). Research studies have yet to adequately explain these racial anomalies of foster care placement

6.1. Foster care placement

To what extent is race a determinant of placement into foster care? One of the most comprehensive analyses of the role of race in the child welfare system was based on the National Study of Protective, Preventive and Reunification Services (NSPPRS) Delivered to Children and Families, which was conducted by Westat in 1994 to update the findings of the 1977 National Study of Social Services to Children and Their Families. A major objective of the NSPPRS was to document the number and characteristics of children and families based on a nationally representative sample of 2109 children who received in-home or out-of-home child

welfare services between March 1, 1993 and March 1, 1994.

Since the NSPPRS had data on all children who received child welfare services, it was possible to determine whether there were racial differentials between placement in foster care and in-home services. In fact, according to the NSPPRS, black children were twice as likely as white children to be placed in foster care (56% versus 28%). Or, 72% of white families received services with their children at home, compared to only 44% of black families in the child welfare system (U.S. Children's Bureau, 1997).

In order to assess whether race was a significant predictor of foster care placement, when combined with other important social and economic variables, it was necessary to conduct multivariate analyses of the NSPPRS data. Hill (2005) tested various logistic regression models to determine the set of variables that were the strongest predictors of placement in foster care. His analysis identified five strong predictors: race of child (i.e., black versus white), substance-abusing parents, children with disabilities, Medicaid recipients, and cases with abuse allegations. Further analyses revealed that, even when black children had a combination of advantaged characteristics (such as no child disability, no receipt of Medicaid, no substance abusing parent, and no abuse allegation), they were still significantly more likely to be placed in foster care than white children with more disadvantaged characteristics. Consequently, the study concluded that race remained a strong predictor of foster care placement, even when combined with other important determinants (Hill, 2005).

It is also important to note that although black children are more likely than white children to be freed for adoption, they are still less likely to be adopted than white children (Altstein & McRoy, 2000). Thus, black children are more likely to be "legal orphans" in child welfare than white children. Yet, contrary to the widespread belief that black families are not interested in formal adoption, the National Urban League Black Pulse Survey revealed that one-third of (or 3,000,000) black household heads said they were interested in formally adopting children (Hill, 1999). Government data also reveal that the formal adoption rates among black families are often the same as, and sometimes higher than, the rates among white families (Mason & Williams, 1985; U.S. Children's Bureau, 1984).

Moreover, many studies reveal that black children receive fewer services than white children after being placed in foster care. A secondary analysis by Close (1983) of the 1977 national survey of social services revealed that black and Latino children had fewer visits with their families, less contact with workers, and fewer services overall than white children. A study of the foster care system in New York found that black and Latino children were less likely than white children to be placed in agencies that had superior outcome records, irrespective of their entry-level characteristics (Gurak, Smith, & Goldsen, 1982). And, a comprehensive review of child welfare research by Courtney et al., 1996 found that minority children generally received fewer or more inadequate services in the child welfare system than white children. These researchers concluded that their literature review suggests "a pattern of inequity, if not discrimination, based on race and ethnicity in the provision of child welfare services" (Courtney, Barth, Berrick, Brooks, Needell, & Park, 1996, p. 112).

6.2. *Visibility hypothesis*

Many researchers have also examined the extent to which the overrepresentation of black children in foster care may be affected by the racial composition of the geographic areas in which they reside. Most of these studies have focused on the “visibility hypothesis” of foster care placement. According to this thesis, the rates of out-of-home placement of minority children are higher in localities in which the proportion of minorities is relatively small (i.e., where they are more visible) than in local areas where the composition of minorities is relatively large. Indeed, Jenkins and Diamond (1985) were among the first scholars to confirm the existence of the visibility hypothesis. They compared the proportions of minority children in each county based on the 1980 Census with the proportions of minority children in foster care in the same counties based on the special 1980 out-of-home survey conducted by the U.S. Office of Civil Rights.

But the researchers found that the visibility pattern existed only for black children, and not for any of the other three minority groups (i.e., American Indians, Asians and Hispanics). More specifically, their findings revealed that black children were twice as likely to be placed in foster care in counties where they comprised 5–10% of the population than in counties where black children comprised 30–50% of the population. These findings were confirmed two decades later by Garland, Ellis-MacLeod, Landsverk, and Granger (1998), and Barth, Miller, Green, and Baumgartner (2001). For example, Barth et al., 2001 found that black children who lived in counties where they comprised less than 5% of the population were more likely to be placed in foster care than black children who lived in counties where they comprised more than 15% of the population. Thus, these scholars concluded that to adequately understand the overrepresentation of children of color in foster care, it was necessary to also examine external factors that relate to the geographic context (especially, the racial or ethnic composition of minority children).

6.3. *Kinship care*

A foster care arrangement in which researchers have found the inequity of services to be blatant is among children who had been placed with relatives. The differential treatment of kin caregivers and their children appears to be a manifestation of institutional racism in the child welfare system. This issue is of paramount interest to the black community, since black children are twice as likely as white children to be placed with kin (29% versus 14%) (U.S. Children’s Bureau, 1997). The overrepresentation of black children in kinship care families requires a closer examination of this form of foster care placement.

“Informal adoption” or the rearing of black children by kin is a long-standing cultural tradition that is a legacy of the African heritage (Hill, 1999). Consequently, prior to the 1980s, very few black children that lived in households headed by relatives were in the child welfare system (Hill, 1977). However, with the advent of

crack cocaine and the AIDS epidemic in inner cities in the 1980s, the number of children with drug-abusing or HIV/AIDS-infected parents that was placed in foster care for neglect increased sharply. Since fewer non-related foster parents were available, child welfare agencies began to aggressively recruit relatives as foster parents. The number of children placed with kin soared to such an extent that a new type of foster placement was created, "kinship care." In many large cities today, such as Baltimore, Los Angeles, Chicago, etc., sizable numbers of children in foster care are placed with relatives. However, the kin families in the child welfare system still comprise only a small fraction of all black children who are living with relatives. Eighty percent (or 800,000) of the one million black children—not living with either parent—are with relatives in informally adoptive homes outside the system, while only the remaining 20% (or 200,000) are in foster care (Hill, 1999).

What are the characteristics of kinship care families? About two-thirds are headed by grandparents, while the remaining one-third is headed by aunts, uncles or older sisters and brothers. Most kin caretakers have no spouses, are older (with a median age of 50 years), have less education and have low or fixed income (Ehrle, Geen, & Clark, 2001). Many kinship families in foster care receive inadequate welfare payments that average about US\$ 200 per month, and do not receive the much higher foster board payments for non-relatives that range from US\$ 356 to US\$ 431 per month, depending on the age of the child. Studies have found that kin caregivers are less likely to receive foster parent training, respite care, educational or mental health assessments, individual or group counseling, or tutoring for their children than non-kin foster parents (Chipungu, Everett, Verdick, & Jones, 1998; Iglehart, 1994).

Despite their lower access to adequate economic stipends and vital services, however, children in kinship care are in more stable living arrangements than children in non-relative foster care. Children in non-related foster care are three times more likely to be moved to different homes or settings than children in kinship care (33% versus 10%) (U.S. Children's Bureau, 1997). Moreover, many studies have found the lowest levels of child abuse to be among black children who live with relatives. Thus, children tend to be safest when living with or in regular contact with extended family members (Cazenave & Straus, 1979; Hill, 1977, 1999).

7. Implications

What implications can be drawn from this examination of the factors that contribute to the disparate representation of black children in child welfare? The main findings will now be summarized and their implications for child welfare practice, social policies, and future research will be discussed.

What are some of our major findings? According to the three NIS studies, black families do not maltreat their children more than white families. But black children are more likely to be removed from their homes for neglect (for reasons related to poverty) than for physical or sexual abuse. Consequently, this assessment found

that black children and their families receive racially disparate treatment at various stages of the decision-making processes of child welfare. Black families are more likely than white families to be reported and substantiated for child maltreatment. Even when black families have advantaged characteristics (which are highly correlated with receiving services in the home), black children are still significantly more likely to be placed in foster care than children in comparable white families. After being placed in foster care, black caregivers are less likely than white caregivers to receive equitable economic stipends and vital social services, especially if they are relatives. We conclude, therefore, that this disparate adverse treatment of black children and their families in child welfare is due, in large part, to institutional or systemic racism.

7.1. Practice

Why are black families treated more inequitably than white families? Billingsley and Giovannoni (1972) provide one answer: the devaluing of the culture and functioning of black families. Since black families are overrepresented among the poor, they are often perceived and treated differently because of class-related characteristics. Yet, many black families who do not have disadvantaged attributes are also assumed to be dysfunctional. Apparently, too many social service professionals still agree with Glazer and Moynihan (1963, p. 51) that blacks have “no values and culture to guard and protect.” Although the black community views informal adoption by relatives as an African-derived cultural strength that promotes family preservation and reunification, large segments of the child welfare community devalue this form of child-rearing. Many disparaging epithets are often made about kin caregivers, such as the “apple does not fall far from the tree”, “they are only doing it for the money”, or “they are too old to care for children. Such expressions are recurring examples of cultural insensitivity in current social service practice.

In order to reduce the prevalence of individual or institutional racism, helping professionals must implement practices that enhance their sensitivity toward and appreciation of diverse cultural beliefs and customs (Altstein & McRoy, 2000; Holton, 1990; McPhatter, 1997). They must disavow the belief that “different” cultural values or practices are inherently “inferior.” They must regularly conduct self-assessments to increase their awareness of stereotypes about different classes or minority groups. All families should be treated as partners or consumers, and not as adversaries or clients (Curtis et al., 1999; Pinderhughes, 1991). One should also realize that it is possible to racially discriminate without consciously intending such adverse outcomes.

There is also a vital need for the broader participation of people of color in decision-making at all stages of child welfare processes to achieve more culturally diverse and sensitive policies and practices. Moreover, contrary to the widespread belief that black families cannot be found for placing black children, many black-controlled (and other progressive) agencies are demonstrating that permanent and safe homes can be found in the black community. These agencies have also proven that permanent homes for children of color can be found by implementing both culturally sensitive and cost-effective strategies (Day, 1979;

McRoy, Ogelsby & Grape, 1997). Federal and state governments should take aggressive actions to increase the racial and ethnic diversity of the governance and staffing of child welfare agencies.

7.2. Policies

A number of public policies should be considered to reduce the disproportionate representation of black children in child welfare. First, similar to the mandates to reduce minority overrepresentation in juvenile justice and special education, Congress should also require states to reduce the concentration of children of color in the child welfare system. Second, intensive efforts should be made to provide family preservation and other support services to troubled families in order to prevent the unnecessary placement of many minority children into foster care. Third, in those cases where children must be removed, the top priority should be to place those children with members of their extended family. Fourth, relatives who care for their grandchildren and nieces and nephews should receive foster care stipends that equal those of non-related caregivers. Fifth, kin families should also be entitled to a broad range of social and economic services for their dependent relatives (who may be at-risk because their parents are substance abusers, HIV or AIDS-infected or incarcerated) whether inside or outside the child welfare system.

Sixth, serious consideration should be given to creating a guardianship subsidy as a new foster care permanency option that permits kin caregivers to receive Title IV-E funds, similar to the existing adoption subsidy. The State of Illinois should be commended for implementing an innovative subsidized guardianship program that provided the same payments to kin and non-kin caregivers. Results from a comprehensive evaluation of the five-year Illinois experiment revealed that giving financial subsidies to kin guardians achieves comparable levels of child permanency, stability and safety as children in adoptive homes (Westat, 1999). More child welfare advocates should support the Kinship Caregivers bills that have been periodically introduced by Senator Hillary Clinton (D-NY) and Congressman Danny Davis (D-ILL) to provide equal Title IV-E stipends to relatives and non-relatives, and to increase access to a wide range of support services for kin providers—both in and outside the child welfare system.

7.3. Research

First, more studies are needed on the extent to which children of color are differentially treated at various stages (i.e., reporting, investigation, substantiation, placement in foster care, and quality of services after placement) of the decision-making processes of the child welfare system. Second, social researchers should address the anomalies of foster care, such as: (a) why children are removed more for neglect than for physical or sexual abuse; and (b) why kin caregivers receive lower benefits and fewer services than non-kin caregivers.

Third, more studies are needed to identify the protective factors (such as strong extended families, religiosity, etc.) responsible for black families having child maltreatment rates that are equal to or lower than those of white families. Fourth, more research is needed to explain why the lowest rates of child abuse are found among children who are reared by relatives. The implementation of such social practices, public policies, and research strategies would not only prevent or reduce the differential adverse treatment of children of color and their families, but would significantly improve their social and economic well-being in all institutions of our society.

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