



# Dynamics that contribute to racial disproportionality and disparity: Perspectives from child welfare professionals, community partners, and families

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## ABSTRACT

This qualitative study used focus groups to explore child welfare and collaborating system decision makers, community partners, and families' perspectives on the dynamics that contribute to racial disproportionality and disparity in Oregon's child welfare system. Findings revealed that poverty, lack of trust, negative perceptions of clients' behaviors, inability to relate to clients, raising/differing expectations for families of color, holding onto the past, and lack of family engagement were dynamics that contributed to racial disproportionality and disparate treatment of families of color in the child welfare system. Practice and policy implications are discussed and recommendations for action steps and interventions to improve outcomes for children and families of color are presented.

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## 1. Introduction

Over the past ten years, there has been growing acknowledgment and concern about racial disproportionality and disparity in the United States child welfare systems. National data indicate that children and families of color continue to be overrepresented in the child welfare system (Sedlak & Broadhurst, 1996; Sedlak & Schultz, 2005; Sedlak et al., 2010; U.S. General Accounting Office, 2007). Black and American Indian children have been the most affected by racial disproportionality and disparity and in some states, Hispanic children are also overrepresented in the child welfare system (Child Welfare Information Gateway, 2011; Derezotes & Poertner, 2005; Hill, 2005, 2006; McRoy, 2004; Sedlak & Broadhurst, 1996; Sedlak & Schultz, 2005; Sedlak et al., 2010; U.S. General Accounting Office, 2007).

The Oregon child welfare administrative data indicate that the racial representation of children and families of color are consistent with national statistics. Children and families of color in Oregon are disproportionately overrepresented and experience disparate outcomes at various points on the child welfare continuum. In 2008, American Indian and Black<sup>3</sup> families were nearly 2 and 2.5 times respectively, more likely to be represented among Child Protective Services (CPS) reports than they were to be represented in Oregon's general population.

Children of color were also less likely to have favorable outcomes at various decision points on the child welfare continuum. For example, children of color represented 10.7% of Oregon's general population, yet were 19.7% of the foster care population. American Indian children were 5.5 and Black children 2 times more likely to be represented in Oregon's foster care population than their representation in Oregon's general population. These children also had an increased likelihood of longer stays in foster care than White children (Miller et al., 2009).

### 1.1. Contributors of racial disproportionality and disparity

The dynamics that contribute to racial disproportionality and disparity are not well understood nor are the negative consequences associated with the overrepresentation of children and families of color in child welfare adequately addressed (Cross, 2011; Roberts, 2011). Thus, scholars continue to seek the elusive answer to the question: What factor(s) contribute to the overrepresentation of children and families of color in the child welfare system? The literature advances a number of theories to answer the questions concerning the determinants of racial disproportionality and disparity in child welfare. Two primary (and often posed as competing) theories are discussed: 1) the higher prevalence of individual, family, and community risks among families of color and 2) institutional, systemic, and individual racial biases.

#### 1.1.1. Individual, family, and community risks

Research has consistently found that poverty, violence exposure, parental incarceration, substance abuse, mental health problems, and single parenthood are to be associated with an increased susceptibility to child maltreatment (Barth, 2005; Coulton, Korbin, & Su, 1999; Drake,

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<sup>3</sup> The racial category, "Black" refers to individuals who are non-Hispanic and of African descent.

Lee, & Jonson-Reid, 2009; Nelson, Saunders, & Landsman, 1993; Sedlak & Broadhurst, 1996). Exposure to these risk factors has a higher prevalence among Black families (Bartholet, 2009; Bartholet, Wulczyn, Barth, & Lederman, 2011; Coulton & Pandey, 1992; Courtney et al., 1996; Drake & Pandey, 1996). While exposure to such social, contextual, and behavioral risks has the potential to increase children's vulnerability to maltreatment, the research on the link between race and child maltreatment has produced inconsistent results. For example, analysis of two waves of the National Incidence Studies of Child Abuse and Neglect (NIS-2 and NIS-3) suggested that there were no significant differences in the rates of child maltreatment among Black and White parents (Sedlak & Broadhurst, 1996; Sedlak & Schultz, 2005). When the same researchers analyzed the most recent NIS-4 study, they found that there are higher rates of child maltreatment among Black families as compared to White families (Sedlak et al., 2010). These later findings appear to support the notion that individual, family, and community risks are the reasons why families of color, specifically Black families are overrepresented in the child welfare system (Bartholet, 2009). The NIS-4, however, did not suggest that any single factor was the cause for the overrepresentation of children and families of color with child welfare involvement. Rather, the researchers encouraged further analysis that examines the independent and interrelated associations between family factors (i.e., employment status, socioeconomic status, family structure) and the rates of child maltreatment. There was also support for further analysis that examines whether racial differences in child maltreatment rates remain once family vulnerabilities are controlled (Sedlak et al., 2010).

#### 1.1.2. Institutional, systemic, and individual racial biases

Children and families' outcomes can be adversely impacted when racial bias influences professional decision-making (Dettlaff & Rycraft, 2008). There is research evidence that suggests that race is a primary determinant of the difference in decision-making outcomes among child welfare professionals and collaborating systems (Ards, Myers, Malkis, Sugrue, & Zhou, 2003; Chibnall et al., 2003; Dettlaff & Rycraft, 2008; Rivaux et al., 2008). For example, Rivaux et al. (2008) found that when controlling for risks such as poverty, race influenced decision-making in child welfare. They found that African Americans had lower risk scores (e.g., home and social environment, caregiver capability, patterns of maltreatment). Furthermore, findings indicated that there was a lower threshold of removal of African American children and a higher threshold for providing in-home preservation services for these families. In another study, Chibnall et al. (2003) found that school and medical personnel over-reported families of color to child welfare. Study participants suggested that school personnel confused factors associated with poverty as child maltreatment and medical personnel made assumptions concerning drug use among pregnant African American women. These negative perceptions of families of color can have a devastating and compounding effect on children and families of color at various points on the child welfare continuum.

#### 1.2. Purpose of the study

Most studies do not engage multi-system decision makers, stakeholders, and client participants within child welfare to explore their perceptions on the dynamics of racial overrepresentation in child welfare. Therefore, the purpose of this study was to employ qualitative methods to obtain perspectives on the dynamics that contribute to racial disproportionality and disparity in Oregon's child welfare system from child welfare and collaborating system decision makers, community partners, and families with child welfare involvement. Participants were also engaged in in-depth discussions of recommendations for practice and policy action steps to improve outcomes for children and families of color.

## 2. Methodology

The study was conducted on behalf of the Governor appointed Child Welfare Equity Task Force and Safe Reduction of Foster Care Initiative with funding from the Oregon Commission on Children and Families and Casey Family Programs. The qualitative data presented herein was collected as part of a larger mixed-methods study that examined the existence, extent, and dynamics of racial disproportionality and disparity in Oregon's child welfare system. The work of Feyerherm and Butts (2002) and Pope and Feyerherm (1992) informed the decision point methodology and statistical analysis of disproportionate and disparate rates. In addition, the research drew on the expertise of decision makers and system participants to interpret results and make recommendations for action. The data for the qualitative portion of the study was collected via focus groups.

### 2.1. Study design

This qualitative study was designed to engage child welfare and collaborating system decision makers, community partners, and families in a participatory action process (Kemmis & McTaggart, 2000) characterized by open and in-depth discussions of the topics of interest. In the process, participants also provided an interpretive analysis of the results from the quantitative portion of the parent study. There was neither a predetermined theory tested nor an intention to generate a new theory; rather, the purpose of the study was to obtain diverse perspectives from participants on the dynamics that contribute to racial disproportionality and disparity in the child welfare system (Creswell, 2003; Denzin & Lincoln, 2000; Guest, MacQueen, & Namey, 2011; Strauss & Corbin, 1998). A secondary purpose of this study was to use the qualitative data as a source for recommendations to shape an action planning process that would foster equitable treatment for all children and families of color in Oregon's child welfare system. All aspects of the study were guided by a state level task force representing multiple disciplinary, family, and racial/ethnic vantage points in the state's system.

The researchers collaborated with task force members to create a matrix displaying the various decision makers, stakeholders, and family participants at each stage of the child welfare decision-making process. Special attention was given to ensure that racial, ethnic, cultural, professional, and regional diversities were represented. Task Force members assisted researchers in contacting focus group sponsors. Sponsors were sent letters with an invitation to participate with a description of the study's purpose, an explanation on measures to ensure anonymity, and a statement of the potential risks and benefits of participation. They provided potential participants with an informed consent to review prior to participating in the focus groups.

### 2.2. Study sample

Seventeen focus groups were convened and completed with over 100 participants. The research team had information on the professional backgrounds and in many cases the participants' cultural, racial, ethnic, and professional identities, through self-identification during focus group discussions or organization/agency affiliation. Intentionally, the research team did not survey or record participants' demographics once the focus group started to minimize the perception that anonymity would be breached. In addition, the purpose of this qualitative study was not to generalize the findings to any particular group (i.e., racial, professional) but rather to assure that the findings reflected a range of voices from the state.

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