



Who am I? Who do you think I am? Stability of racial/ethnic self-identification among youth in foster care and concordance with agency categorization

Jessica Schmidt ^{a,*}, Shanti Dubey ^a, Larry Dalton ^b, May Nelson ^c, Junghee Lee ^a, Molly Oberweiser Kennedy ^a, Connie Kim-Gervey ^a, Laurie Powers ^a, Sarah Geenens ^a,
The Research Consortium to Increase the Success of Youth in Foster Care ¹

^a Regional Research Institute for Human Services, Portland State University, PO Box 751, Portland, OR 97207-0751, United States

^b Oregon Department of Human Services, Children, Adults and Families, 2446 SE Ladd Avenue, Portland, OR 97214, United States

^c Portland Public Schools, 501 N. Dixon Street, Portland, OR 97227, United States

ARTICLE INFO

Article history:

Received 10 March 2015

Received in revised form 18 June 2015

Accepted 21 June 2015

Available online 25 June 2015

Keywords:

Foster care

Race/ethnicity

School

Child welfare

ABSTRACT

While it has been well documented that racial and ethnic disparities exist for children of color in child welfare, the accuracy of the race and ethnicity information collected by agencies has not been examined, nor has the concordance of this information with youth self-report. This article addresses a major gap in the literature by examining 1) the racial and ethnic self-identification of youth in foster care, and the rate of agreement with child welfare and school categorizations; 2) the level of concordance between different agencies (school and child welfare); and 3) the stability of racial and ethnic self-identification among youth in foster care over time. Results reveal that almost 1 in 5 youth change their racial identification over a one-year period, high rates of discordance exist between the youth self-report of Native American, Hispanic and multiracial youth and how agencies categorize them, and a greater tendency for the child welfare system to classify a youth as White, as compared to school and youth themselves. Information from the study could be used to guide agencies towards a more youth-centered and flexible approach in regard to identifying, reporting and affirming youth's evolving racial and ethnic identity.

© 2015 Elsevier Ltd. All rights reserved.

1. Introduction

Increasing awareness, sensitivity and responsiveness to racial and ethnic minority youth and families has been a major issue in child welfare. Overrepresentation of youth of color, most notably African American and American Indian youth (US Department of Health & Human Services, 2014), concerns about institutional bias toward these youth and families (e.g., Hill, 2004), poor outcomes for youth of color exiting

the system (Miller, Farrow, Meltzer & Notkin, 2014) and attention to the need for improved system cultural competence (e.g., Beckett & Lee, 2004), underscore the importance of this issue. Indeed, positive racial identity has been shown to be important for well-being and for buffering the negative effects of racism and discrimination (Chae, Lincoln & Jackson, 2011; Sellers, Caldwell, Schmeelk-Cone & Zimmerman, 2003). Perhaps the most fundamental aspect of supporting the positive racial/ethnic identity development of young people in foster care is affirming their racial/ethnic self-identification.

1.1. Stability of self-identification over time

Contrary to the static, quantitative descriptions of race/ethnicity for various groups of young people (including youth in foster care), several studies have documented the fluidity of racial/ethnic identity among adolescents and the tendency for self-identification to shift over time. Using data from the National Longitudinal Study of Adolescent Health (the ADD Health survey), which was administered to a nationally representative sample of over 11,000 youth, ages 14–18, and then again five years later, Hiltin, Brown, and Elder (2006) found that 10% of respondents had changed their racial categorization over time.

* Corresponding author.

E-mail addresses: jdsch@pdx.edu (J. Schmidt), sdubey@pdx.edu (S. Dubey), larry.dalton@state.or.us (L. Dalton), mnelson@pps.net (M. Nelson), jungle@pdx.edu (J. Lee), mokenn@pdx.edu (M. Oberweiser Kennedy), conkimg@pdx.edu (C. Kim-Gervey), powersl@pdx.edu (L. Powers), geenens@pdx.edu (S. Geenens).

¹ The Research Consortium to Increase the Success of Youth in Foster Care is dedicated to experimentally identifying approaches that improve the outcomes of young people in foster care. Agency members of the Research Consortium to Increase the Success of Youth in Foster Care who contributed to this paper include the Portland Public Schools and the Oregon Foster Care Program. For information about this manuscript, please contact Jessica Schmidt (jdsch@pdx.edu). Preparation of this manuscript was funded, in part, by grants #R324A100166 from the Institute of Educational Sciences and #R01HD064854 from the Eunice Kennedy Shriver National Institute of Child Health and Human Development, National Institutes of Health.

Interestingly, when the authors investigated how different psychological and social characteristics varied with consistency of racial self-identification, they found that young people who lived in predominantly White neighborhoods, had higher SES backgrounds and experienced greater self-esteem, were less likely to change their classification. Also examining the ADD Health data over time, J.M. and Kao (2007) found that youth originally identifying as multiracial were most likely to change their racial identity from one time point to the next (over 40%). In comparison, single race groups were relatively stable; one important exception however were Native American youth, of whom 33% changed their racial categorization over the five year period.

Change in racial categorization over time is described by some authors (e.g. Hiltin et al., 2006) as typical of normal development, and is thought to become more solidified as young people grow in their awareness and understanding of different racial groups, with most eventually settling on a single, stable racial choice in young adulthood (e.g. see Poston, 1990). However, other researchers contend that for many individuals racial identity never becomes fixed, can change at any point during one's lifetime, and is subject to new experiences around prejudice, significant life events, new relationships and even larger changes within society, such as political movements (e.g. see Brunsma & Rockquemore, 2001). While research exists that supports both points of view, the experiences of youth in foster care have been overlooked. Thus, information around the stability or fluidity of racial self-categorization for youth in foster care over time is non-existent.

1.2. Concordance between self-report and categorization by others

Research examining the concordance between racial and ethnic self-identification of youth in foster care and the external classifications provided by the agencies they interface with is also non-existent. Researchers investigating the intersection of race/ethnicity and child welfare typically rely on the classifications provided by the child welfare agency, which are based upon required data elements for the Adoption and Foster Care Analysis and Reporting System (AFCARS). Regarding race and ethnicity, AFCAR requirements, as noted in Appendices A and B of the federal regulations at 45 CFR 1355 and as stated in the federal child welfare policy manual, specify that a person's race is "based on how a client perceives him/herself or in the case of young children, how the parent identifies the child" (*Adoption and Foster Care Analysis & Reporting System (AFCARS) & Child Welfare Policy Manual*, 2014). Despite this stipulation, how the data is actually collected remains unclear and has not been systematically evaluated. In lieu of this information, it is likely, as Lu et al. (2004, pg. 449) point out, "this method of classification is considered to best reflect the child's race/ethnicity from the perception of the child welfare system although it may not necessarily reflect the child's own racial/ethnic identity nor that of his family".

Likewise, schools have similar federal requirements to collect and report on student race and ethnicity. Districts and states receiving federal funds (e.g. the Elementary and Secondary Education Act or the Individuals with Disabilities Act) must participate in the EDFacts data collection system, which gathers information about student race and ethnicity. The data collection guidelines for EDFacts stem from "Standards for the Classification of Federal Data on Race and Ethnicity" (Anonymous, 1997) issued by the Office of Management and Budget in 1997. The specific federal guidance around ethnic and racial data collection by schools was published by the U.S. Department of Education in the Federal Registrar (Anonymous, 2007) on October 19, 2007 (72 Fed Reg 59267) and, while it emphasizes self-identification (defined as student or parent on behalf of student), an observer (i.e. school staff) can provide the information if the family does not. Similar to the child welfare system, there is not a clear picture of whether race/ethnicity data collected by the school for youth in foster care stems primarily from student self-report, information provided by parent (in this case, bio or

foster) or school staff, nor has the concordance between school categorization and youth self-identification been examined.

In the broader literature however, researchers have examined the concordance of youth self-identification with the categorizations made by others. In J.M. & Kao's, 2007 study, they compared the racial self-perceptions of youth with the interviewer's categorization of the youth's race and ethnicity. They found that among youth who identified as Native American, only 5% had interviewers who agreed with their self-report. In contrast, among students identifying as White, concordance with the interviewer rating was 87%. In addition to Native American youth, rate of agreement was also low for youth identifying as multiracial. For example, among youth identifying as Black–White multiracial, 17% were described by interviewers as only White. Even more striking, 45% of students identifying as Asian–White were categorized by interviewers as White only. Saperstein and Penner (2014) conducted a parallel study with a slightly different sample from the ADD Health survey and found that the level of agreement between interviewer ratings and youth self-report was lowest for Native American youth (77.5%), followed by Asian youth (94.1%), although these figures suggest significantly greater concordance than Doyle and Kao's study. Cambell and Troyer (2007) further explored the significance of discordance between youth self-report and observer ratings on the Add Health survey by examining its impact on mental health. Focusing on the relative large percentage of Native American youth who were perceived to be another race by the interviewers, they examined various indicators of stress and well-being. In comparison to youth who were correctly classified as Native American by observers, Native American youth who were misclassified reported significantly more distress on 4 out of 5 indicators, including a greater likelihood to have thoughts around suicide, attempt suicide and believe they would die at a young age, even when controlling for differences such as SES and social support. The authors suggest that the findings highlight the potential impact perceptions and expectations of others have on an individual's identity when it is incongruent with how the individual sees himself or herself.

If one expands the literature search to include studies comparing the racial self-reports of adults vs. administrative records in health care, the research is robust. Numerous studies have documented a consistent pattern of health care agencies under-classifying certain minority groups and multi-racial individuals. Kressin, Chang, Hendriks, and Kazis (2003) found only a 60% rate of agreement between patients' self-reports of race and ethnicity, and Veteran's Affairs (VA) administrative records, with the lowest levels of concordance for patients identifying as Native American, Asian and Pacific Islander. Similarly, a study by Gomez, Kelsey, Glaser, Lee, and Sidney (2005) compared patient self-report and Kaiser medical records, and found that the rates of agreement were highest for African Americans and Whites, and lowest for Hispanics and Native Americans. A comparison of dental records from the VA with patient self-report of race and ethnicity, found agreement in the majority of cases for Whites (77%) and African Americans (76.4%), while there was almost no concordance for individuals identifying as Native American (4.6%; Boehmer et al., 2002). This pattern of low concordance for some racial/ethnic groups (e.g. Native American, Hispanic) and relatively high concordance for others (e.g. African American, White) has been repeated in several other studies as well (e.g. McAlpine, Beebe, Davern & Call, 2007; Waldo, 2005; West et al., 2005).

While there has been no comparison of administrative records and self-report for youth in foster care, there is one study that examined the degree to which child welfare data matched caregiver reports of youth race/ethnicity. Using data from the National Survey of Child and Adolescent Well-being (NSCAW), a longitudinal study involving youth in the child welfare system, a comparison was made between the caregiver's description of a youth's race/ethnicity and the labels assigned by the caseworker. Results indicated that caregivers were five times more likely than caseworkers to describe their child as Native American and twice as likely to identify their child as multi-racial (Smith, Stambaugh, Morgan & Ringeisen, 2010). Smith and his

Download English Version:

<https://daneshyari.com/en/article/6833976>

Download Persian Version:

<https://daneshyari.com/article/6833976>

[Daneshyari.com](https://daneshyari.com)